

Refugio ISD &
Project AWARE

Responding to Mental Health Crisis in Rural Districts:

Prevention, Preparedness,
and Protocol

Tammy Gendke, MA LSSP

Melissa Gonzales, Superintendent

Laura Hernandez Gold, LCSW-S



Advancing Wellness and
Resiliency in Education

Agenda

Mental Health Crisis Prevention, Preparedness, Protocol

- Who is Refugio ISD?
- Why are we here?
- Prevention
- Intervention
- Postvention
- Training Resources



Refugio ISD

- Population of Refugio - 2748
- District Enrollment - 681
- Economically Disadvantaged - 78%
- Demographics:
 - Hispanic - 67.9%
 - White - 24 %
 - African American - 9.1 %
- Teachers - 66 Admin - 3 Other - 76

The way we were...



Process

Reactive "Protocol "- Basic screener, contact parent, and refer out

Lack of proactive suicide prevention and/or professional development

Barriers

Lack of mental health resources

Geographical limits

Lack of staff to address student MH needs

Stigma (parental and cultural)

Unfunded state mandates

Eager to help, but ill-prepared to do so.



**HURRICANE
HARVEY**



**AUGUST 25,
2017**



**Advancing Wellness and
Resiliency in Education**

Project AWARE

- SAMHSA funded
- Five year grant 2018-2023
- Two Education Service Centers (3, 5)
- Region 3 ESC: Refugio, Woodsboro, Port Aransas
- Region 5 ESC: Bridge City
- Mental Health Behavioral Health Specialists
- Goals to increase:
 - Access to mental health services;
 - Awareness and identification of MH issues;
 - Skills that promote resiliency and pro-social behaviors

Legislation

SB 11	Parent or guardian notification for student's suicide risk
TEC 37.115	BTA-Must follow suicide prevention policy
TEC 37.220	BTA-Referral of a student to LMHA or other for evaluation or treatment
TEC 28.004	SHAC - Policies and procedures for suicide prevention
TEC 38.351	Set out counseling alternatives for parents for suicide prevention



Prevention



Staff

Gatekeeper Training

*AS+K About Suicide
Kognito
Youth Mental Health First Aid*



Community

Gatekeeper Training

*Law Enforcement
Clergy
Parents*

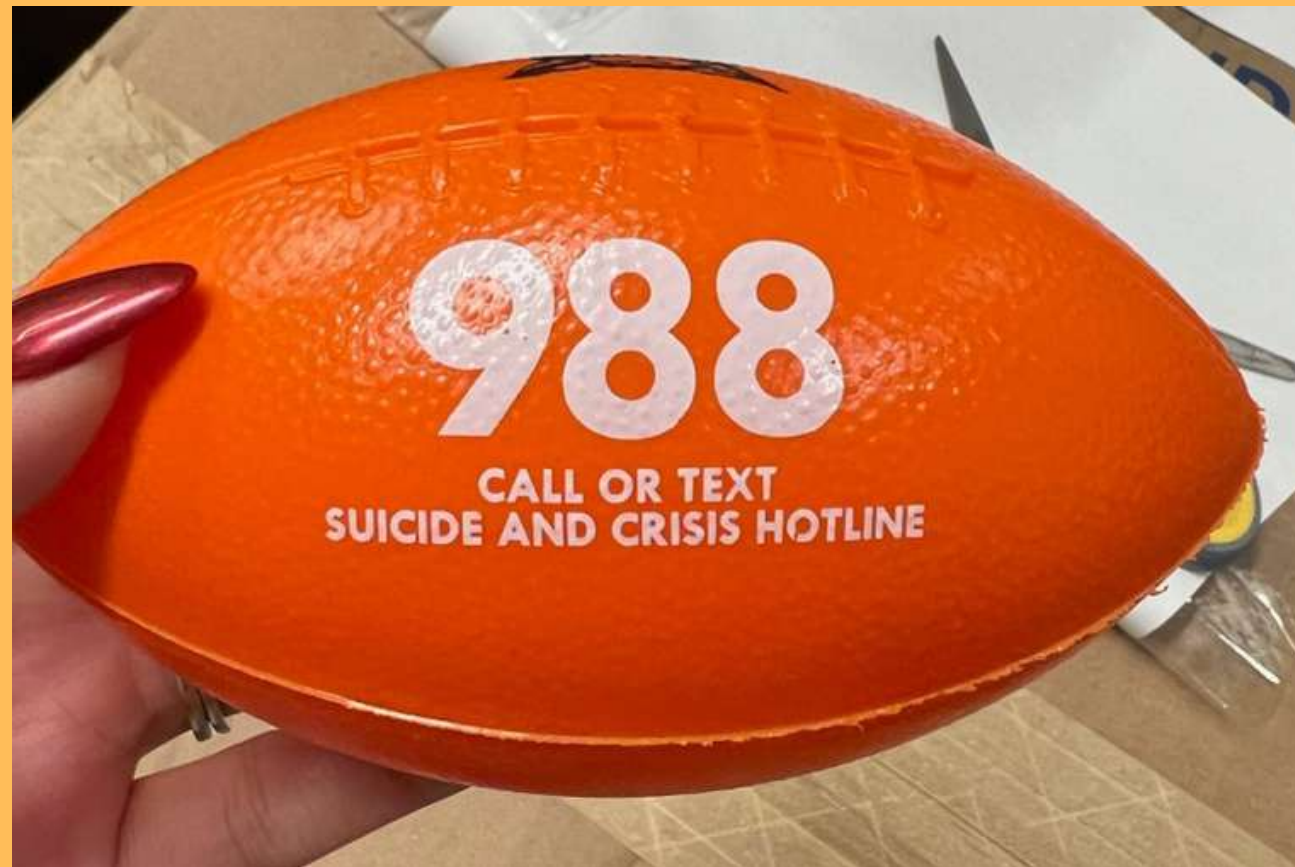


Students

Training & Outreach

*Signs Of Suicide
Hotline Magnets
Bracelets
988 Footballs*

Prevention Examples



Protocol

Refugio Independent School District Suicide/Mental Health Crisis Protocol



Rev 7/20/21

Refugio ISD Suicide Protocol At-a-Glance

For full policies and procedures, refer to the crisis protocol

Student is identified* as potentially considering suicide:

- Comments, Social media posts, Writings/drawings/class assignments

*The person who identifies the student as potentially considering suicide will complete the **Written Notification of Student Mental Health Concern** and provides it to Crisis Response Coordinator.



Student is referred *immediately* to a Crisis Response Coordinator:

- Counselor
- School Mental Health Professional
- Administrator
- Nurse

Student is not to be left alone at any time.



Crisis Response Coordinator:

- Speaks with student regarding concerns
- Completes Suicide Intervention Interview
- Completes Columbia-Suicide Severity Rating Scale (C-SSRS)
- Documents discussion and protocol procedures for student according to C-SSRS and professional judgement (*Protocol 1, 2, or 3*)



Protocol 1:

(Non-Specific Suicidal Ideation only or denies all suicidal ideation)

- Call student's Parent/Guardian for conference
- Have Parent/Guardian sign **Acknowledgement form (or Refusal form)**
- Provide crisis line phone numbers, mental health resources/referrals, and tips for a suicide safer home
- Complete Safety Plan with parent/student, if necessary
- Counselor follows up with student and parent the next day, and as needed

Protocol 2:

(Current ideation with non-specific plan, no access to method, and no intent)

- Conference with Parent/Guardian
- Have Parent/Guardian sign **Acknowledgement form (or Refusal form)**
- Provide crisis line phone numbers, mental health resources/referrals, and tips for a suicide safer home
- Student is referred to follow up with mental health providers/crisis team ASAP
- Complete Safety Plan with parents/student
- If unable to create a safety plan, or if you need consultation, contact Crisis Team from Gulf Bend (877-723-3422)
- Inform administrators of outcome (if student was hospitalized, or will be returning to school)
- Counselor follows up with student and parent the next day, and as needed

Protocol 3:

(Current Ideation with some intent, a specific plan, or an accessible method)

- Emergency Conference with Parent/Guardians
- Immediately contact Crisis Team from Gulf Bend (877-723-3422) OR
- Refer to ER for immediate crisis intervention
- Have Parent/Guardian sign **Acknowledgement form (or Refusal form)**
- Provide crisis line phone numbers, mental health resources/referrals, and tips for a suicide safer home
- Inform administrators of outcome
- Counselor follows up with student and guardian the next day, and as needed

Crisis Response Team

Who is on the Crisis Response Team?

- Everyone!
 - Teachers, coaches, paraprofessionals, administrators, nurses, counselors, SROs, students, etc.
- ALL staff need to be trained on mental health crisis protocol
- Students need to know how to ask for help, and that it is safe to seek help for themselves or a friend

Crisis Response Coordinator

- Point of contact for concerns regarding students who may be considering suicide
- Usually campus counselors
- Must identify an alternate in case of counselor being unavailable

"Suicide prevention is everyone's business." --AFSP

Intervention

Policies & Procedures

At-A-Glance	Notice of Mental Health Concern	Interview Form	Screening
One-pager that allows staff to have easy access to procedures	Used to document mental health concern	Guides counselor as to what questions to ask and how to proceed	Tool to be used to determine what next steps need to be taken. Screening is NOT an assessment.
Safety Planning	Resources/Referrals	Reintegration Plan	Anonymous Reporting System
Counselors are trained to safety plan if necessary. MCOT may also be used.	Know what resources and referral agencies are available for your area. Provide resources to student & parents.	Plan for when students return to school after hospitalization or suicide attempt	Way for parents, students, etc. to express concern about other students in order to get them help

Parent/Guardian contact made at first sign of concern about suicide.

Identifying a Student who may be Considering Suicide

Verbal

- "I just want to kill myself."
- "I'm gonna kermit sewer slide."
- Other student reports



Classwork

- English assignments
- Daily grades
- Artwork



Social Media

- Instagram posts
- Twitter posts
- TikTok



Screening

- Universal
- Targeted
- Regular meetings



Written Notification of Student Mental Health Concern

[illegible]

The person who raises concern for the student provides a written narrative describing the warning signs displayed (i.e. what situation or behaviors prompted the need for concern).

This helps the Crisis Response Coordinator:

- Have more knowledge prior to meeting with the student
 - Avoid re-traumatization
- Utilize the information when speaking to the student
- Accurately report information to Guardians/Crisis teams

Student Suicide Concern Report

Helps guide the process

- Key documentation to record actions taken by staff and parents/guardians during the crisis

Student Suicide Protocol Report Checklist

Student _____ Grade _____

Student Conference:

_____ Columbia-Suicide Severity Rating Scale (C-SSRS)

_____ Suicide Intervention Interview

Parent Conference:

_____ Notify and conference with Parent/guardian

_____ Parent/guardian Acknowledgement Form signed, **or** Parent/guardian Assessment Refusal Form signed

_____ Mental Health Resources/Information, Coping Skills, and Suicide Safe Home information provided

Student and Parent:

_____ Safety Plan (*if needed*)

Referrals Made:

_____ Follow up with community mental health provider (Gulf Bend, student's current provider, etc.)

Columbia-Suicide Severity Rating Scale

- Free
- Evidence-based screener
- Series of direct, plain language questions about suicide
- Designed to be used by anyone, anywhere--no mental health training needed
- Helps identify the level of support needed

Asking directly about suicide **WILL NOT** make someone suicidal, in fact studies have shown it can actually lower distress.

Columbia Suicide-Severity Rating Scale with Response Protocol

2016, The Columbia Lighthouse Project

Ask questions that are in bold and underlined.	Past month	
Ask Questions 1 and 2	YES	NO
1) <u>Have you wished you were dead or wished you could go to sleep and not wake up?</u>		
2) <u>Have you had any actual thoughts of killing yourself?</u>		
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6.		
3) <u>Have you been thinking about how you might do this?</u> e.g. "I thought about taking an overdose, but I never made a specific plan as to when where or how I would actually do it....and I would never go through with it."		
4) <u>Have you had these thoughts and had some intention of acting on them?</u> as opposed to "I have the thoughts, but I definitely will not do anything about them."		
5) <u>Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?</u>		
6) <u>Have you ever done anything, started to do anything, or prepared to do anything to end your life?</u> Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc. If YES, ask: <u>Was this within the past 3 months?</u>	Lifetime	
	Past 3 Months	

C-SSRS Protocols

Protocol 1

- YES to Q 1 or 2, but NO to everything else
- Contact Parent/Guardian
- Provide packet of resources
- Complete safety plan with student and parent/guardian

Protocol 2

- YES to Q 1-3
- Contact Parent/Guardian
- Provide packet of resources
- Complete safety plan with student and parent/guardian
- Make referral to MH provider
- Consider consultation with Mobile Crisis Outreach Team

Protocol 3

- YES to Q 4, 5, or 6
- Contact Parent/Guardian for an emergency conference
- Refer for an immediate mental health risk assessment
 - Calling MCOT
 - Walk-in crisis services
 - Psychiatric hospital
 - ER



Parents should always be contacted, even when a student answers "no" to every question

Contact Parent/Guardian

Involving Parents/Guardians

- Best practice: Parent/Guardian comes to campus when a concern of suicide is present
- Telephone conferences may be considered in some circumstances
- Be empathetic, but direct
- Be collaborative, and educate them on what to expect
- Expect high emotions or pushback
 - Emphasize the common goal of safety and caring for the student
 - Better safe than sorry

Parent/Guardian Refusal

- Have guardian sign 'Refusal of Concern Notice'
- If appropriate, report to Child Protective Services
- Consider consulting with Law Enforcement or MCOT

Refugio ISD

Student Crisis Protocol Notice and Acknowledgement

I am the parent, guardian, or custodian of the student: _____ I acknowledge that I have been informed by _____ on _____ (date) that my student may be experiencing one of the following mental health crises (check/circle one):

- ☐ Thinking about suicide/Planning suicide attempt
- ☐ Engaging in non-suicidal self-injury
- ☐ Other: _____

I acknowledge that RISD staff explained the incident that led to this notification and recommended that I monitor my child for safety, and seek assistance from a mental health agency, or therapist as soon as possible. I understand that if my child is at **Protocol 2 or 3** for suicide that I am recommended to seek an **immediate crisis assessment** by a physician or a qualified mental health professional. I have been provided with resources/information for such and I will follow up with the school if I have any questions or concerns. I understand that _____ (name of staff member) will follow up with me and my student the next school day from this date and at other times as necessary. Finally, I acknowledge that any referral information provided to me by **Refugio ISD** that identifies medical, mental health, or related agency providers is simply information for me to consider. I am not bound to use such providers in the evaluation and treatment of my student and I may select other providers of my own choosing. Unless otherwise required by law, **Refugio ISD** is not responsible for any medical treatment or evaluation expenses whether I use the referred providers or use others of my own choosing.

Safety Plan

I _____ agree to make a commitment to staying safe.

- Warning signs, (thoughts, ideas, images, behaviors, moods and feelings) that would let me know that I need to use my safety plan:

1. _____
2. _____
3. _____

- Things I can do, on my own, to take my mind off my problems (relaxation techniques, physical activities):

1. _____
2. _____
3. _____

- People or places that could help me take my mind off my problems for a little while and distract me.

Name: _____ Phone: _____
Name: _____ Phone: _____
Place: _____ Place: _____

- Family members or friends I could talk to when I am in a crisis and need help:

Name: _____ Phone: _____
Name: _____ Phone: _____

- Professionals and agencies I can contact during a crisis:

<u>Emergency Number/ Refugio Police Dept.:</u>	<u>911/361-526-2351</u>
<u>National Suicide Prevention Lifeline:</u>	<u>800-273-8255 (TALK)</u>
<u>Gulf Bend Crisis Hotline:</u>	<u>877-723-3422</u>
<u>Crisis Text Line:</u>	<u>Text TX to 741741</u>

- Steps to keep my environment safe:

The one thing that is most important to me and worth living for:

Student signature and Date

Witness signature and Date

Safety Plan

- Brief intervention to help those experiencing self-harm and suicidal thoughts with a concrete way to mitigate risk and increase safety
- Modeled after Barbara-Stanley Safety Plan
 - Best practice
 - Not a no-harm contract
 - Collaborative intervention
- Utilize with all levels
- For training on Safety Planning Intervention, contact your Local Mental Health Authority

Alternatives to paper Safety Plans:

- Index cards
- Apps
 - Suicide Safety Plan



Violent or Homicidal Ideation *in addition to* Suicidal Ideation

- Follow protocol for suicide risk levels
- IMMEDIATELY notify administrators and school resource officer
- Notify Behavior Threat Assessment Team
- Collaborate with student and their family to ensure safety

Non-Suicidal Self Injury

- Explore suicidal ideation, but NSSI does not always equate to suicidality
- NSSI is a maladaptive coping strategy, work with student on coping skills
- Contact Parent/Guardians and refer student to MH provider
- Create a safety plan
- Consider asking LMHA about presentations/training on NSSI

Psychosis

- If symptoms are severe and student is disoriented, or having command hallucinations: Call 911 if student is immediate danger to themselves or others, otherwise keep student calm, in a quiet room, until a guardian arrives and refer them to the ER or immediate crisis assessment
- If symptoms are not severe, notify parents and recommend they follow up with physician or mental health provider
- Note: Physicians and ERs are mentioned in the case of psychosis as medical diagnoses and substance abuse can also cause these symptoms

Other Mental Health Crises

Other Crisis Scenarios

- Student is 18+
- Student denies suicidal ideation entirely
- Responding to in-school suicide attempts
- Responding to out-of-school suicide attempts
- Responding to out-of-school expressed suicidal ideation
- Responding to concerning social media posts

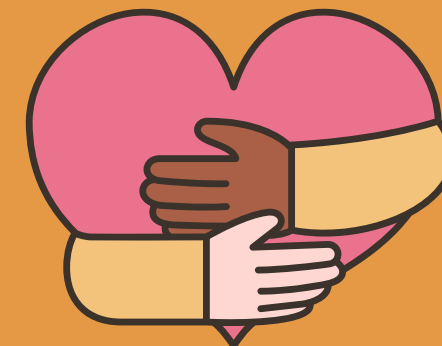
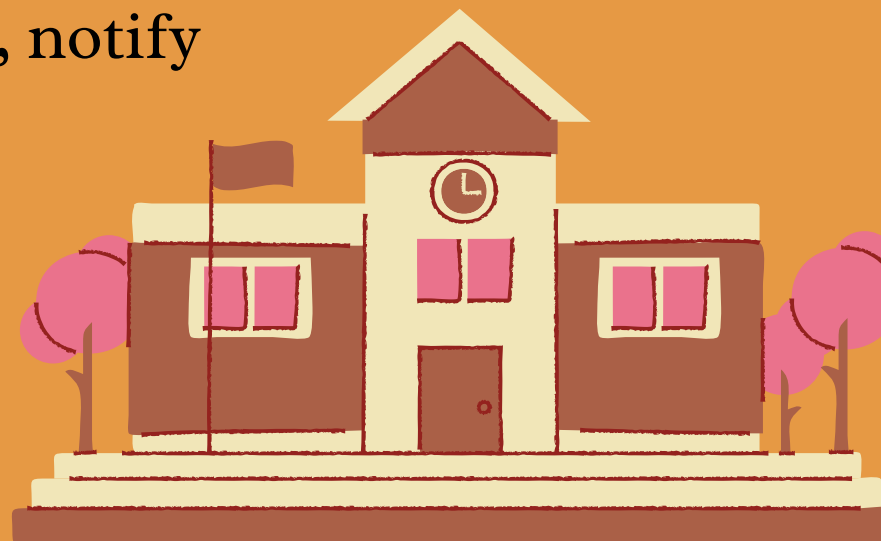
Planning Tips:

- Have regular planning meetings with your counselors to discuss possible scenarios and ways to respond.
- Consult with your Local Mental Health Authority on your protocol.

Supporting a Student after Hospitalization or Suicide Attempt

Returning day:

- Have Parent/Guardian escort student and meet in counselor's office for re-entry planning
- Complete a school-specific safety plan
- Address any contributing factors such as bullying
- Consider collaborating with student's current mental health care provider
- Modify academic programming, as appropriate
- If the student has been given medication, notify nurse



Continually:

- Identify a staff member that student enjoys and have regular check ins with student
 - Check in-Check Out System
- Watch for any warning signs that student is struggling
- Review safety plan and coping strategies with student
- Collaborate with student's MH provider
- Discuss any concerns with guardian

Resource Packets



Provide a resource packet to every guardian:

- Suicide Safer Home
 - Addresses access to lethal means
 - Caring conversation tips
 - Provides web resources
- Mental Health Resources/Referrals
 - Includes community and private resources
 - Crisis hotlines
- Coping skills
 - Provided mostly to student, but given to parent with recommendation for student and parent to try some together

Postvention

Plan

- Does your plan include death of student, staff, former staff, community member?
- Who will be in charge of formulating a statement?
- Considerations surrounding cause of death

Training

Psychological First Aid - Schools

PREPaRE Workshop 2

Skills for Psychological Recovery

Critical Incidence Stress Management

Prevent Suicide Contagion

Exposure that can increase suicidal ideation and attempts

- Review warning signs and risk factors with all staff
- Identify and monitor possible at-risk students
 - emotional proximity
 - physical proximity
 - pre-existing mental health issues or trauma
- Treat all deaths the same so as to avoid glamorization

Memorials

Treat each death the same way, regardless of the manner of death

- Avoid formal memorials on school grounds
 - Funerals, Celebrations of Life, & Memorials should be held off campus
- Allow students to attend funeral but do not cancel school
- Spontaneous Memorials
 - ie Decorating a locker, writing messages to the deceased, etc
 - Find balance between grieving and glamorizing - treat all the same
 - Set a definite period of time (5-7 days) for memorials to remain
 - Let the students know the memorials will be taken down after that and given to the family

Behavioral Threat Assessment

SB 11

TEC 37.115 Threat Assessment

District's Suicide Prevention Program *then (if threat)* Threat Assessment

(i) A team identifying a student at risk of suicide shall act in accordance with the district's suicide prevention program. If the student at risk of suicide also makes a threat of violence to others, the team shall conduct a threat assessment in addition to actions taken in accordance with the district's suicide prevention program.

Google Drive Access

FORMS



PROTOCOLS

RESOURCES

Recommended Training

AS+K

AS+K About Suicide to Save a Life training

<https://txspc.learnworlds.com/>

CALM

Counseling on Access to Lethal Means training

<https://zerosuicidetraining.edc.org/enrol/index.php?id=20>

YOUTH
MH
FIRST AID

Youth Mental Health First Aid

<https://www.hhs.texas.gov/about/process-improvement/improving-services-texans/behavioral-health-services/mental-health-first-aid>

C-SSRS

C-SSRS Screener Training

<https://cssrs.columbia.edu/training/training-options/>

SAFETY
PLANNING

Safety Planning Training

<https://practiceinnovations.org/resources/scorm/safety-planning>



Resources

PARENT
HANDOUT

Suicide Safer Home Handout

<https://texassuicideprevention.org/wp-content/uploads/2016/11/Suicide-Safer-Home-8-1-2016.pdf>

C-SSRS
CARD

C-SSRS Printable Card for School Staff

<https://cssrs.columbia.edu/wp-content/uploads/Community-Card-Teachers-1.pdf>

SAFETY
PLAN

Stanley-Brown Safety Planning Intervention

suicidesafetyplan.com

ROADMAP

Texas Advancing Suicide Safer Schools Roadmap

<https://txspc.learnworlds.com/course/texas-advancing-suicide-safer-schools-roadmap>

SCHOOL
MENTAL
HEALTH

Texas School Mental Health

<https://schoolmentalhealthtx.org/>



Resources

TXT LINE

Crisis Text Line- Mental Health School Supplies

<https://www.crisistextline.org/school-mental-health/>

SPRC

Suicide Prevention Resource Center

<https://www.sprc.org/settings/schools>

AFSP

American Foundation for Suicide Prevention

<https://afsp.org/bring-suicide-prevention-to-your-school>

SCREENING

Student Risk Screening Scale- Internalizing & Externalizing

<https://www.ci3t.org/screening>

TOOLKIT

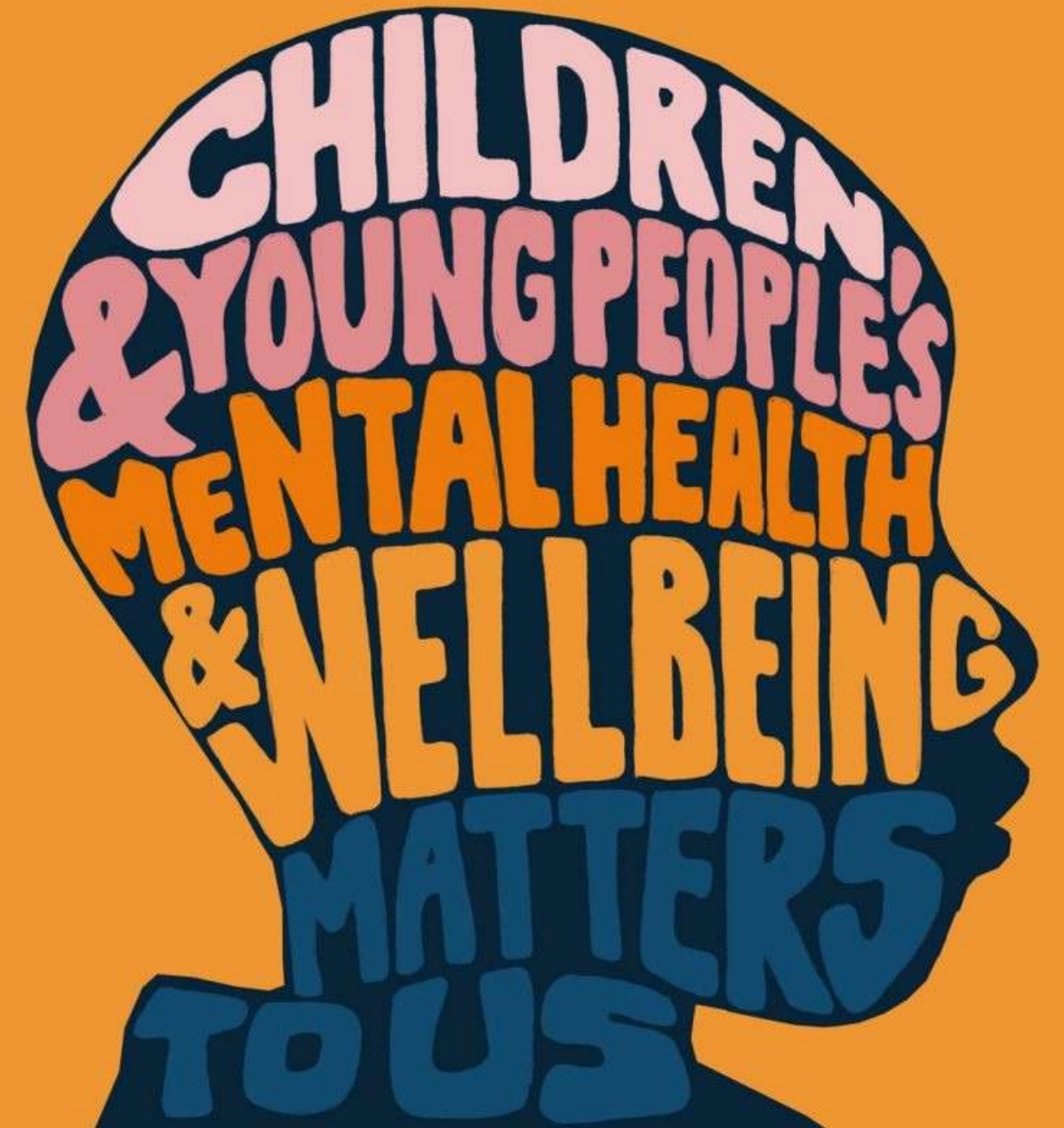
Preventing Suicide: A Toolkit for High Schools

<https://store.samhsa.gov/product/Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669>

**TX
SUICIDE
PREV.**

Texas Suicide Prevention

<https://texassuicideprevention.org/>



References

- 1 Gould MS, Marrocco FA, Kleinman M, et al. Evaluating Iatrogenic Risk of Youth Suicide Screening Programs: A Randomized Controlled Trial. JAMA. 2005;293(13):1635–1643. doi:10.1001/jama.293.13.1635
- 2 <https://cssrs.columbia.edu/the-scale-in-action/schools/>
- 3 Stanley-Brown Safety Planning Intervention (suicidesafetyplan.com)
- 4 Palo Alto ISD Case Study <https://www.crisistextline.org/wp-content/uploads/2020/03/PAUSDCrisisTextLine.pdf>
- 5 Recommendations for media reporting of suicide <https://reportingonsuicide.org/>



Questions?

Contact Information

- ➔ Melissa Gonzales, Superintendent Refugio ISD
melissa.gonzales@refugioisd.net
- ➔ Laura Hernandez Gold, HHSC, Suicide Prevention &
AWARE Co-coordinator
Laura.Gold02@hhs.texas.gov
- ➔ Tammy Gendke, LSSP AWARE State Coordinator
tammy.gendke@tea.texas.gov