

MENTAL HEALTH POLICY

PURPOSE:

Mental health is defined as a person's emotional, psychological, and social well-being which can affect how a person thinks, feels, and acts including how a person handles stress, relates to others, and makes healthy choices.

Mental health is more than the absence of illness; it is an integral component of health and well-being. Promontory School understands the role mental health plays in the school context because it is central to our students' social, emotional, and academic success. When students' mental health is supported, they are better able to learn, make decisions, build relationships, cope with life's challenges, and thrive.

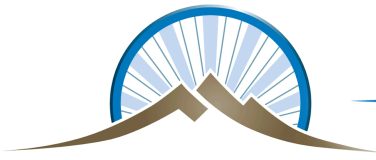
Mental health exists on a continuum and is determined by a complex interplay of individual, social and structural stresses, and vulnerabilities. Promoting mental wellness and reducing mental illness for all students is a priority that can be achieved by implementing school-based mental health policies and practices. These efforts are categorized by prevention, education, identification, intervention, and recovery.

PREVENTION

Prevention efforts at Promontory School include proactive strategies designed to promote student well-being and reduce future mental health challenges. These efforts focus on decreasing risk factors and strengthening protective factors such as resilience, feelings of safety and connection to school, healthy relationships with adults and peers, social-emotional competence, and developmental awareness.

Promontory School teaches the mental and emotional health standards outlined in the Utah Health Education Core Standards for grades K–8 and actively promotes social and emotional learning to support all students, including those who may be at risk or in need of additional assistance.

To support these goals, Promontory utilizes a tiered system of support to deliver social, emotional, and mental health interventions. Universal, school-wide programs—such as social-emotional learning and mental health literacy initiatives—aim to educate students and



reduce stigma. Targeted and individualized interventions are provided for students identified as needing additional support through established assessment processes.

Promontory School may also offer therapy services provided by licensed Promontory professionals and/or through contracted community mental health providers, in accordance with applicable state laws and regulations. The availability of these services is determined by student needs and available resources. Promontory School provides such services only with prior written parental consent, as required by state code.

Parental consent is not required when Promontory School staff believe a student may be at risk of suicide, self-harm, or harming others. In such situations, staff may engage with the student to assess immediate safety concerns and refer the student to appropriate support or prevention services. The student's parents are to be immediately informed should such an event occur.

In an effort to understand students', parents', school personnel's, and other stakeholders' feelings of safety and connectedness, Promontory School may administer a School Climate Survey every other year in accordance with Utah Administrative Rule R277-623. The results of the school climate survey help inform the Promontory School Administration and School Board about how to improve the school environment.

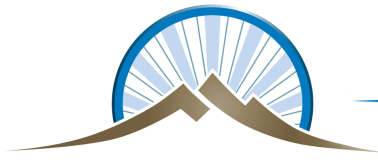
IDENTIFICATION

Mental Health Screening

Routine mental health screenings are a key part of understanding youth mental health. Mental health screenings in schools, with active, written consent from parents, allow staff to identify potential mental health conditions early and connect students with appropriate help.

Promontory School may provide mental health screenings for students within the school setting for the purpose of identifying if a student is experiencing, or is at risk of experiencing, issues related to the student's mental health. All mental health screenings will be conducted in accordance with state rules and laws. Mental health screenings are NOT a diagnostic tool or process but rather, a system or process used by a student's teacher to observe behavior for the purpose of targeted learning interventions.

According to Utah Administrative Rule R277-625, mental health screenings may only screen for depression, anxiety, and suicidal ideation. At this time, no other mental health conditions may be screened. While behavioral screenings are not equivalent to mental health screenings, a



screeners that include questions regarding depression, anxiety, or suicidal ideation does fall under the mental health screening program and must adhere to the same policies. USBE approved mental health screening tools are utilized by school professionals (53F-2-522 and R277-625).

SUICIDE INTERVENTION

PURPOSE: These procedures are intended to guide staff in responding to students' risk level for suicidal ideation.

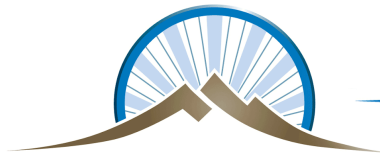
If a school employee believes a student is at-risk for suicidal behavior or physical self-harm the school employee will immediately make a report to the school director or their designee, such as the school counselor and/or school social worker. The director and/or their designee may intervene and ask a student questions regarding the student's suicidal thoughts or physically self-harming behavior for the purposes of referring the student to appropriate prevention services and informing the student's parent or legal guardian. Queries should be conducted under the philosophy of "minimal intrusion" to the student, that is, only to the extent necessary to gather enough information to accomplish appropriate referral and parental notification, and in accordance with state law.

Assessing Suicidal Ideation Risk Levels:

The director and/or their designee will assess a student's risk level using the teacher/school edition of the Columbia-Suicide Severity Rating Scale (C-SSRS). Staff response will be determined based on the student's answers to Questions 1-6 on the C-SSRS. Staff should always ask Questions 1, 2 & 6, but will only ask Questions 3, 4, & 5 if the student answers "Yes" to previous questions.

Questions:

1. Have you wished you were dead or wished you could go to sleep and not wake up?
2. Have you actually had any thoughts about killing yourself?
3. Have you been thinking about how you might do this?
4. Have you had these thoughts and had some intention of acting on them?
5. Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?



6. Have you done anything, started to do anything, or prepared to do anything to end your life?

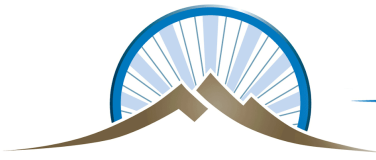
Staff response if the answer is “Yes” to the following questions:

- Q1, Q2 (Yellow): Parent/Guardian contact, provided mental/behavioral health resources, discussion of healthy coping tools and supports.
- Q3 or Q6 (Orange): Parent/Guardian contact (includes counsel and other precautions), provide mental/behavioral health resources, discussion of healthy coping tools and supports
 - Consider evaluation by crisis response team (see below)
- Q4, Q5, Q6b (Red): Parent/Guardian contact (includes counseling and other precautions), provide mental/behavioral health resources, discussion of healthy coping tools and supports.
 - Attempt to obtain permission for evaluation by a crisis response team.
 - Contact the emergency department if there is an imminent risk of harm.

In-School Crisis Response for a High-Risk Student:

If the student is determined to be “High Risk” (Red) while in the school setting, then staff will attempt to obtain permission for evaluation by a crisis response team. All actions taken, including contact attempts, time stamps, referrals provided, and any communication with parents/guardians, school personnel, or law enforcement, shall be documented

- A. Parent/Guardian APPROVES crisis response evaluation:
- a. School mental health professionals, administration, school board member(s), and outside professionals as needed meet at school with parents to assess risk and develop a student safety plan.
 - b. Director is contacted accordingly, and a school safety plan created if necessary.
 - c. When a student indicates suicidal intent, the school shall attempt to discuss safety at home, or “means counseling” with parent or guardian, limiting the student’s access to mechanisms for carrying out a suicide attempt (e.g., guns, knives, pills, etc).
- B. Parent/Guardian DECLINES crisis response evaluation:
- a. Provide recommendations (including “means counseling” and other precautions), and provide mental/behavioral health resources.
 - b. Discussion with student on healthy coping tools and supports, including mental/behavioral health resources.



- c. Document refusal of crisis response to the director and parent/guardian.
- d. Any credible signs of wanting to harm self or others will follow with a referral to DCFS if precautions are not being taken by parent/guardian(s) or a safe environment does not seem available to the student.

Out-of-School Ideation Response Protocol

If school personnel receive information that a student may be experiencing suicidal ideation or self-harm concerns while the student is not in school, the following procedures shall be followed:

1. Parent/Guardian Notification

- a. School personnel shall immediately contact the student's parent or legal guardian to notify them of the concern.
 - i. If the parent/guardian cannot be reached after reasonable attempts, school personnel shall proceed to contact the designated emergency contact(s) listed in school records.
 - ii. If neither the parent/guardian nor emergency contact can be reached in a reasonable and timely manner and there is credible concern of imminent risk, school personnel shall:
 1. Contact local law enforcement to request a welfare check at the student's residence or known location.
 2. Provide law enforcement with the necessary information required to ensure student safety in accordance with FERPA emergency disclosure provisions.

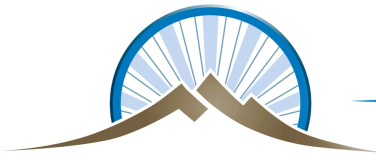
2. Documentation

- a. All actions taken, including contact attempts, time stamps, referrals provided, and any communication with parents/guardians, school personnel, or law enforcement, shall be documented.

RESPONSE TO SUICIDE ATTEMPTS

In-School Suicide Attempts

In the case of an in-school suicide attempt, the physical and mental health and safety of the student are paramount. In these situations:



1. First aid shall be rendered until professional medical services and/or transportation can be received, following school emergency medical procedures.
2. School staff shall supervise the student to ensure their safety.
3. Staff shall move all other students out of the immediate area as soon as possible.
4. Staff shall immediately notify the director and/or appropriate front office staff member.
5. The Director shall contact the student's parent or guardian.
6. The school shall engage a crisis team as necessary to assess whether additional steps should be taken to ensure student safety and well-being, including those students who may have had emotional or physical proximity to the victim.
7. Staff shall request a mental health assessment for the student as soon as possible.

Out-of-School Suicide Attempts

If a staff member becomes aware of a suicide attempt by a student that is in progress in an out-of-school location, the staff member shall:

1. Call 911 (police and/or emergency medical services)
2. Inform the student's parent or guardian
3. Inform the director

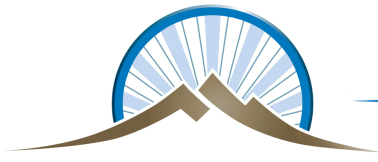
RETURN TO LEARN

Students may need to leave school temporarily to access more intensive mental health support. Promontory School supports students returning to school by partnering with community providers, parents, the student, and legal counsel if necessary to develop a transition plan.

The Student Return to Learn Safety Plan helps students and families work with the school to plan a safe and positive return after time away. A sample template can be found at the end of this policy document.

SUPPORTING THE SCHOOL COMMUNITY AFTER A DEATH

The director or designee shall confirm the death and determine the cause of death through communication with the student's parent or guardian, the coroner's office, local hospital, or police department.



If confirmed, the school will communicate with the parents or guardian to determine their preference about information released to the school community. If the cause of death has been confirmed as suicide, but the parent or guardian prefers the cause of death not be disclosed, the school may release a general statement without disclosing the student's name (e.g., "We had a ninth-grade student die over the weekend"). If the parents do not want to disclose cause of death, an administrator or mental health professional from the school who has a good relationship with the family shall be designated to speak with the parents to explain the benefits of sharing mental health resources and suicide prevention with students. If the family refuses to permit disclosure, schools may state "The family has requested that information about the cause of death not be shared at this time." Staff may use the opportunity to talk with students about grief, loss and suicide, and offer available resources.

Contact the crisis team leader at your school:

- Alert the crisis leader to the situation. Determine a time/location to meet as a team (could be face-to-face or online)
- Assign crisis leader to activate the team
- Review notification procedures and action items with the team

Contact the family with the following goals:

- Express sympathy and condolences
- Ask if information can be shared with students and parents in the community
 - It is best for the healing of kids to know the truth of the situation. In the case of death by suicide, ask if the death can be referred to as a death by suicide.
- Inform parents of the role of the crisis team at the school (to support the well-being and grief of the school community). As such, gather the following:
 - Names of their child's best friends/significant others
 - Names of students who may have been with their child before or at the time of the death
- Invite the parents to clean out their child's locker in a private time after school

Organize student records and belongings:

- Contact the registrar to inactivate the student's record.
- Locate file records, test scores, schoolwork, gather belongings, etc.
- Keep the student's locker intact until the family can come and remove belongings. If necessary, move the locker partner to another locker.



- Contact the school photography company and order a bereavement package. These pictures should be shared with the family to use at the funeral or as a keepsake.

External Communication

Please refer all media requests to the Director. The spokesperson shall:

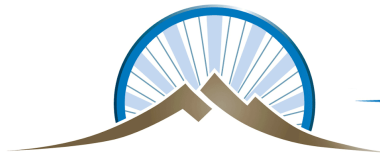
- Keep the director and school crisis response coordinator informed of school actions relating to the death.
- Prepare a statement for the media, which may include the facts of the death, postvention plans, and available resources. The statement shall **not** include confidential information, speculation about victim motivation, means of suicide, or personal family information.
- Answer all media inquiries. If a suicide is reported by news media, the spokesperson shall encourage reporters to follow safe messaging guidelines, including:
 - Avoid making it a front-page story
 - Do not use pictures of the suicide victim
 - Avoid using the word “suicide” in the caption
 - Do not describe the method of suicide
 - Avoid using the phrase “suicide epidemic”
- Encourage media not to speculate about the reason for suicide and instead provide information on suicide risk factors, warning signs, and available resources.

Notification Procedures

- **NEVER** use social media or PA announcements to announce the death of a student or staff member.
- Do **NOT** announce at the end of the school day when there is no time to provide services and support.
- **NEVER** mention the means used in the suicide, as this can create additional trauma for staff and students.

Messaging

- Approved messages will be drafted by school staff to inform the Promontory community via Parent Square.
- Work with the Director to contact families before school if possible. Facts may be challenging, but rumors are harder; timely notification is essential.



- For deaths by suicide, parental permission is required before labeling it a suicide. If parents do not disclose, refer to it as an “unexpected death.”

Notify Staff

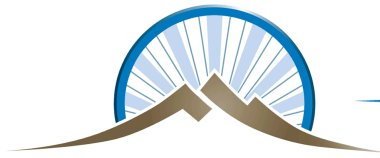
- Administrators shall personally call teachers who currently have the student in their classes or coaches/advisors who work directly with the student.
- Administrators shall send an e-mail to all faculty and staff.
- Be mindful of staff for whom this could be particularly triggering (e.g., recent losses, prior experiences with suicide).
- Hold an emergency faculty meeting (face-to-face or online) to process the crisis before faculty share information with students:
 - Review confirmed details vs. rumors
 - Allow discussion of feelings, concerns, and support
 - Answer questions
 - Provide handouts on warning signs, resources, and healthy coping
 - Express that the situation may be difficult and that the crisis team is available
- Prepare a statement for teachers to share with students at the beginning of the school day:
 - Relate only confirmed facts
 - Direct students to the school crisis center for support
 - Do not resume classwork until needs are met
 - It is appropriate to share emotions (sadness, shock, grief) but avoid lecturing or religious answers
 - Monitor students for additional support needs
 - Share funeral date/time if available

Notify Parents of All Students

- Notify parents of highly impacted students via phone before sending electronic communication.
- With permission from the deceased student’s parent, contact all parents electronically.
- Sensitive communication is key—only share information with permission.

Notify Students

- If possible, notify close friends personally before group announcements.
- Share information at the beginning of school, the day following the crisis.



- Ensure staff are informed first.
- Create a statement for class:
 - Only include known facts approved by the family
 - Share once at the start of the school day; avoid repeating in multiple classes
 - If the teacher is impacted or absent, a crisis team member or administrator may read the statement

Supporting Students

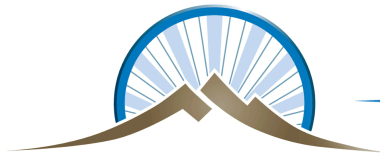
- Assign a service provider to attend every class period for the deceased student.
- Decide which counselor/adult will follow the student's schedule; choose a well-known counselor/crisis team member if possible.
- Follow up individually with highly impacted students, considering:
 - Clubs, sports, or teams involvement
 - Names provided by parents (friends, relatives)
 - Fragile students, recent losses, previous suicide attempts, ongoing mental health support
- Invite the most highly impacted students to the crisis center before classroom announcements.
- All adults should monitor wandering, highly emotional, or isolated students; crisis team members patrol halls/restrooms.

Establish a Temporary Crisis Center

- Provide a primary location (counseling office, library) for support.
- Identify smaller spaces (conference rooms, offices) for individual or small-group support.
- Counselors, psychologists, social workers remain in the crisis center as needed.
- Keep the crisis center open as long as necessary; stock tissues, water, snacks; provide lunch for staff if needed.
- Have students sign in; share sign-in with the attendance secretary at the end of the day.

Debriefing and Follow-Up

- Reconvene faculty meetings for highly impactful crises:
 - Assess faculty/staff needs
 - Address rumors
 - Share names of struggling students and monitor them
 - Plan for the next day



- Offer community crisis team services
- Reconvene the crisis team within a few days:
 - Reflect on practices
 - Identify strengths/weaknesses of intervention
 - Review students needing additional attention
 - Plan follow-up actions and family support
 - Allow emotional debriefing

Funeral Arrangements

- School remains open during the funeral
- Send representatives to viewing/funeral (administrator recommended)
- Arrange faculty/staff attendance (with subs if needed)
- Allow parental excuse for students attending
- Actively check in with siblings, faculty, and at-risk students as needed
- Proactively support students and staff during milestones (birthdays, graduation, anniversaries of death)

Cross References

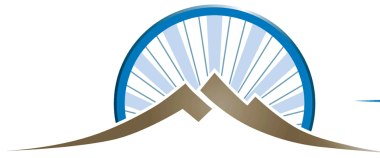
- Attendance Policy (see sections on absenteeism, truancy, and dropout prevention.)
- Bullying, Cyberbullying, Hazing & Retaliation Policy
- Child Abuse and Neglect Reporting Policy
- Gang Prevention Policy
- Substance use prevention



Student Return to Learn Safety Plan

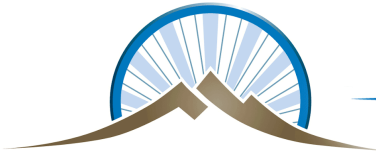
Student Name:	Grade:
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What warning signs can you spot? (<i>Places, emotions, thoughts, behaviors, physical signs</i>)
What ways of coping have you used in the past that could help you now?
Who will you reach out to for help and support? <i>Counselor or Trusted School Adult:</i> <i>Friend:</i> <i>Family Member:</i> <i>Health Professional:</i> <i>SafeUT App:</i> <i>Other:</i>
What is the best way for these people to support you?



<p>Where is a safe place for you to go at school?</p>
<p>Who do you need to check in with before you go there?</p>
<p>What would you say to a friend who was feeling this way?</p>
<p>Additional Information:</p>

Useful Supports	Online Supports
<p>SafeUT App:</p> <ul style="list-style-type: none">● Find in App Store or Google Play● Free access to professionals 24/7 for intervention or emotional support <p>National Suicide Lifeline:</p> <ul style="list-style-type: none">● 988● Available 24/7 <p>Bear River Mental Health Crisis:</p> <ul style="list-style-type: none">● (435) 752-0750● Locally available 24/7 <p>Stabilization & Mobile Response Services:</p> <ul style="list-style-type: none">● (833) SAFE-FAM (833-723-3326)● A mobile crisis response team can help address urgent challenges your child is having.	<p>National Alliance on Mental Illness</p> <ul style="list-style-type: none">● https://www.nami.org/● Crisis Assistance, Education, and Information <p>Suicide Prevention Lifeline</p> <ul style="list-style-type: none">● https://988lifeline.org/● Crisis Assistance, Education, and Information● 24/7 Lifeline: 988 <p>The Trevor Project / LGBTQ</p> <ul style="list-style-type: none">● https://www.thetrevorproject.org● 24/7 Crisis Line: 1-866-488-7386



PROMONTORY

school of expeditionary learning

Student Signature:	Date:
Parent Signature:	
School Representative Signature:	

A copy of this plan was given to the school and parents: YES NO

Student was given a copy of this Return to Learn Plan: YES NO

ADA Compliant December 2022