

APS BEHAVIORAL HEALTH RE-ENTRY PROCEDURE FOR STUDENTS – *NOT TO BE USED IF HOSPITALIZED FOR SUICIDE ATTEMPT*

Students returning to school from out of school placements, including residential treatment centers and inpatient behavioral health facilities, require a Return to School Plan upon enrollment or return. Short-term and long-term out of school placements pose challenges upon re-entry, and students benefit from coordinated planning and support when returning. Schools will implement the Return to School Plan Checklist in the following ways:

- A. School registrar receives dis-enrollment/discharge paperwork from treatment facility.
or The discharging facility notifies the Behavioral Health Resource Nurse (BHRN) of a student's planned release. The discharging facility notifies the student's family/guardian of need to request Re-Entry Plan upon return or enrollment to school.
- B. School registrar notifies school nurse, school counselor, AND administrator when dis-enrollment/discharge paperwork is received from treatment facility.
or The BHRN notifies school nurse, school counselor, AND administrator at student's school of origin of the discharge/dis-enrollment date. If a signed release of information or other discharge information is available, the BHRN will provide this information. The BHRN also notifies the District Principal Support Specialist for review of SPED status and IEP if applicable.
- C. If student enrolls or returns to schools without prior notification from discharging facility, and informs clerk, registrar, or other school personnel of recent behavioral health treatment, the informed staff member will notify school nurse, school counselor, AND administrator. School will contact BHRN for data tracking and for assistance if needed.
- D. School nurse, school counselor, or designee work together to initiate the Behavioral Health Return to School checklist. **If the student or family/guardian discloses that the student was hospitalized related to a suicide attempt, please discontinue the re-entry process and the counselor will proceed with their suicide postvention procedure.**
- E. School nurse, school counselor, or designee will work in partnership to get a ROI to communicate with student's non- APS social worker, contract therapist, or SBHC (only if student is already engaged in services with the provider).
- F. If student is in CYFD custody, ESSA Best Interest Determination must be completed prior to enrollment.
- G. The Return to School meeting is held the day of the student's return, or as soon as is feasible. If unable to hold meeting or family/guardian declines, alternate transition plan meeting may be substituted (i.e. Health and Wellness Team, 504 meeting if requested, IEP if appropriate). If the family/guardian declines to meet, it should be well documented.

Guidelines for completing checklist:

1. If student was enrolled in a non-APS school while receiving treatment, request transcript records if applicable. If student attended Mimbres School at UNM CPH for more than 14 days, a Summary and Recommendations form is available.
2. **SPED:** If student receives SPED services, review IEP as soon as possible and schedule update or transition IEP meeting if needed.
SAT: If student is in the SAT process, ensure teachers are continuing data collection. Consider inviting SAT chair to Behavioral Health Return to School meeting to update or amend SAT documents based on new needs. If student does not receive SPED services and is not in SAT process, consider beginning the process for student assistance if student needs warrant further intervention.



504: If student has a 504 in place, review and update if needed. If student does not have an IEP or a 504, consider holding a 504 meeting to address any new accommodations the student may need.

HEALTH: Consult with school nurse regarding student health conditions. The nurse will need to speak with the student and parent/guardian regarding medications the student is taking at home or at school and any new or changed diagnoses or health needs. Refer student to Health and Wellness Team for further support planning.

Gender Support Plan: Work with student and family to identify if the student would benefit from a gender support plan. This plan is appropriate for those who identify as gender fluid or transgender.

BIP: If student has a BIP, review and update to meet the current needs of the student.

Ensure staff members have updated plans as needed.

3. Consider a modified school day or modified class schedule to support student success, when appropriate. The student's ability to complete a full school day may be impaired after return to school. If school day is modified, student **will** need a plan for gradual return to school and team will need to reconvene within two weeks to address the progress towards return to full day. If student receives SpEd services, consult with the IEP team prior to making modifications. Modifications may also be documented in a current BIP. The student's schedule may need alteration if the current schedule creates a barrier to successful school return, i.e. concentrating core classes in the morning or moving a class period. Schedule changes should occur only if feasible and clearly in the student's best interest.
4. Students will have missed course work and assignments during the absence. Consider alternatives to make-up work, including assignment modification or forgiveness if the amount of missed work creates a barrier to successful school re-entry.
5. Request permission to share information with the treatment facility and ongoing health providers through a release of information, if parent/guardian consents.
6. If a student does not have an outpatient provider, consider a referral to a school based therapist or provide resources to parent/guardian. *Create a plan for future absences due to the student accessing outpatient support services.*
7. Include the student in creating a plan for support that includes a designated staff person for regular check-ins, updating the Return to School plan as needed, and identifying supportive spaces and personnel that student can access during the day.
8. Ask the discharging facility, student, and family/guardian to describe coping skills and how these can be implemented in the school setting. Similarly, discuss triggers for challenging behaviors and how these can be mitigated in the school setting. Elicit information from family/guardian and student regarding concerns about the re-entry process. If student received treatment from UNM CPH, the Family Crisis Safety Plan is a helpful document. Make a plan for check-ins with the family/guardian as needed and encourage frequent communication as student's needs change. Discuss how student will address the recent absences with peers and staff, if this is a concern for student. Provide support and resources to the family.
9. Staff members should receive the "Action Plan for Teachers" only, not the entire Return to School Plan document. Information regarding student's return to school and accommodations should be provided on a need to know basis, with the goal of protecting the student's privacy and providing a safe and supportive learning environment.

KEEP ORIGINAL. Copy to Behavioral Health Resource Nurse (City Center 385W) or e-mail to ruth.golar@aps.edu for data tracking purposes; copy will be destroyed after entry into database.

