Adopted June 12, 2023

# Student Mental Health Protocol

Model Policy Guidance 70 O.S. § 24-159

This protocol template was prepared in collaboration with the Oklahoma Department of Mental Health and Substance Abuse Services.



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## **Statement of Purpose**

This model policy guidance is provided to school districts in accordance with the provisions of the <u>Student Mental</u> <u>Health Protocol</u> at 70 O.S. § 24-159. Local school districts and school boards may use this policy guidance as a model or develop their own policies that comply with its requirements. Districts may develop their own policy using the language below

Nowata Public Schools supports student health and wellness protocols to include mental health supports. It is the policy of Nowata Public Schools to align access to mental health support by providing community resources for students and guardians focused on mental health treatment options and crisis response intervention. It is also the policy of the Nowata Public Schools to provide mental health and crisis response training to school personnel. This process will involve consistent collaboration between Nowata Public Schools and community mental health partnerships. This policy shall extend to all schools in Nowata Public Schools.

## **Definitions**

#### Mental Health

Includes emotional, psychological, and social well-being and affects how individuals think, feel, and act. Mental health also determines how individuals handle stress, relate to others, and make healthy choices. (Information obtained from <u>CDC, 2021.</u>)

#### Mental Health Crisis

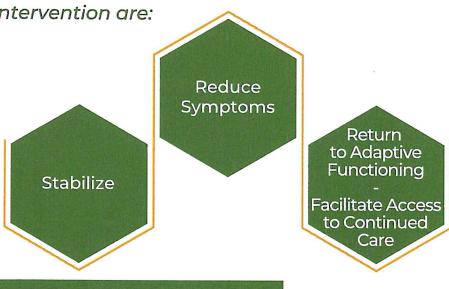
Any situation in which a person's behavior or verbalized distress puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community. The 988 Mental Health Lifeline operates 24/7, offering anyone who dials 9-8-8 access to mental health crisis services.

## **Crisis Response**

Refers to the advance planning and actions taken to address natural and manmade disasters, crises, critical incidents, and tragic events. Of course, in an emergency, it is always best to call 911.

## **Crisis Intervention**

Can mitigate adverse reactions, facilitate coping and planning, assist in identifying and accessing available support, normalize reactions to a crisis, and assess capacities and need for further support or referral to the next level of care. The three main goals of crisis intervention are:





## **Privacy Requirements**

All district/site protocols must comply with the privacy requirements of the Family Educational Rights and Privacy Act (FERPA) and the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

## The Family Educational Rights and Privacy Act

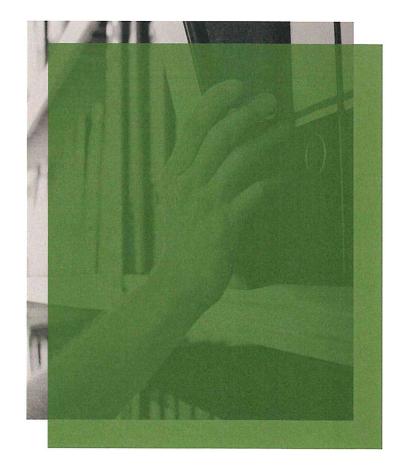
(FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the students when they reach the age of 18 or attend a school beyond the high school level.

#### HIPAA

Also known as Public Law 104-191, HIPPA has two main purposes: to provide continuous health insurance coverage for workers who lose or change their job and to ultimately reduce the cost of health care by standardizing the electronic transmission of administrative and financial transactions. Other goals include combating abuse, fraud, and waste in health insurance and health care delivery, and improving access to long-term care services and health insurance.

The HIPAA Privacy Rule establishes national standards to protect individuals' medical records and other individually identifiable health information (collectively defined as "protected health information") and applies to health plans,

health care clearinghouses, and those health care providers that conduct certain health care transactions electronically. The rule requires appropriate safeguards to protect the privacy of protected health information and sets limits and conditions on the uses and disclosures that may be made of such information without an individual's authorization. The rule also gives individuals rights over their protected health information, including rights to examine and obtain a copy of their health records, to direct a covered entity to transmit an electronic copy of their protected health information in an electronic health record to a third party. and to request corrections. The Privacy Rule is located at 45 CFR Part 160 and Subparts A and E of Part 164.



## **Recognize Warning Signs**

Signs of a mental health crisis episode may not always be apparent in a student/child. Keeping the following warning signs in mind, teachers, principals, and other staff members can begin to identify the need for intervention.

#### Abusive Behavior

Often a student in mental distress will show abusive behavior to themselves and others. This may include self-harm, substance abuse, physical abuse, etc.

## Inability to Perform Daily Tasks

This can include even the most simple tasks such as bathing, brushing teeth and/or hair, and putting on clean clothes.

## **Increased Agitation**

Children showing signs of increased agitation may use verbal threats, be violently out of control, destroy property, and more.

### Isolation

Children and young adults in mental health crisis tend to isolate themselves from family and friends at school and at work.

## Loses Touch with Reality (Psychosis)

Psychosis encompasses the following behaviors: showing signs of confusion, having strange ideas, thinking they're someone they're not, not understanding what people are saying, hearing voices, and seeing things that aren't there.

#### Paranoia

Paranoia manifests in suspicion and mistrust of people or their actions without evidence or justification.

## Rapid Mood Swings

Increased energy levels, the inability to stay still, pacing, sudden depression and withdrawal, and becoming suddenly happy or calm after a period of depression may be indicative of a student in crisis.

## Other warning signs may include:

- Changes in school performance
- Pulling away from people and things
- Having low or no energy
- Having unexplained aches and pains, such as constant stomachaches or headaches
- Feeling helpless or hopeless
- Excessive smoking, drinking, or drug use, including prescription medications

- Eating or sleeping too much or too little
- Worrying a lot of the time feeling guilty but not sure why
- Having difficulty readjusting to home or work life
- Thinking about suicide
- Inability to perceive changes in their own feelings, behavior, or personality (lack of insight or anosognosia)



# Safeguard Student Health and Safety

It is important to establish a culture of support and safety to enhance student health and prevent barriers to effective crisis response. Districts can assist with this process by fostering healthy relationships built on a foundation of trust, respect, and care in schools. These safeguards help to positively affect student-teacher relationships, increase engagement for students and families, and improve two-way communication between all parties. A culture of safety and support works to replace fear, uncertainty, and punishment as motivators with belonging, connectedness, and willingness to change.

Every school employee with reason to believe any student under the age of 18 years is a victim of abuse or neglect is required by law to report the matter *immediately* to the Oklahoma Department of Human Services (OKDHS) and local law enforcement.(70 O.S. § 1210.163; 10A O.S. § 1-2-101). The OKDHS Hotline number is 1-800-522-3511, and the online reporting link is <a href="https://www.OKHotline.org">www.OKHotline.org</a>. Districts are encouraged to develop a streamlined process for documenting calls placed to OKDHS. The Oklahoma State Department of Education (OSDE) has created a <a href="https://child.com/ch

Beginning with the 2022-2023 school year, pursuant to Maria's Law, all schools are required, as part of any health education curriculum, to include instruction in mental health, with an emphasis on the interrelation of physical and mental well-being. School districts may enter into agreements with nonprofit entities and other community partners to assist with or provide mental health education to students if the nonprofits and community partners are approved by the Oklahoma State Department of Education (OSDE) and the Oklahoma Department of Mental Health and Substance Abuse Services.