

PROTOCOL: Teacher/Parent/Peer OR Student self-referral WHEN THERE IS A CONCERN Elementary/ Middle/ High School

Student		Grade	DOB	
School				
School Year	Date			
#1 REFERRING STAFF:				
Print Full Name				
Signature				
Phone	_Fax		_ Email	
#2 CRISIS RESPONSE TEAM MI	EMBER:			
Print Full Name				
Signature				
Phone	Fax		Email	
#3 PARENT / GUARDIAN:				
Print Full Name	-			
 Signature				
Address:				
Phone	_ Email			
Relationship: Biological parent	Relative	Othe	r:	

Name Phone Email

Crisis Response Team Member (CRT) proceeds with the following steps:

- 1) First, fill out the Concern Form for Elementary/Middle/High School.
- 2) If a Student Success or Study Team (SST) has not taken place, set up a meeting. Invite to the SST meeting the following appropriate staff: student, teacher, administrator, special education teacher (if appropriate), community liaison (if appropriate) and any other appropriate staff, parents and student.
- 3) The following steps will be taken at the SST meeting:
 - Note student's strengths, concerns
 - Solutions: Write down each solution and who is responsible for implementing solution
 - Does a referral need to be made to Primary Care Doctor, if so, send the Referral, Consent & Follow-up Form and the Health and Education Plan-Physician Report
 - Schedule follow up meeting in 2 weeks to discuss information received back from either Primary Care or Behavioral Health Doctor. Solutions put in place at previous meeting need to be discussed to see if they are working.
 - If the plan is not working, what are the barriers?
 - What new solutions/supports can be put in place based on the information and/or diagnosis received back from Primary Care or Behavioral Health Doctor
 - Schedule follow up in 3-4 weeks
- Plan not working;
 - Does student need an evaluation for the 504 Plan or for an IEP based on Team decision? The parent/guardian agreement is required for either evaluation.
 - If the 504 plan evaluation has been conducted, bring the team, parents and student back to review the results of the evaluation. Accommodations and supports need to be put in place based on the findings of the evaluation and any other medical/psychological reports. Determine if the student needs a 504 plan. The team will meet to review if the plan is working in one month.
 - If the 504 plan is not working, and the team agrees the student needs to be evaluated for an IEP, proceed with the evaluation with parental permission.
 - When the IEP evaluation is completed, review results to see if the student qualified. If they did not qualify for an IEP, implement a new 504 plan. based on new information.
 - If the student has an IEP in place, update the IEP with new evaluation results and any other documents.

- After completion of IEP evaluation Team meets with parents/guardian and student reviews results and supports put in place
- Student will be working with an IEP team which will be reviewed with parents and student as requested or every 3 years

NEW CONCERN: If staff SEE/READ/HEAR something from a student who threatens to hurt themselves the student will be seen by the Crisis Response Team (CRT) immediately; Crisis Response Team will follow the PROTOCOL: STUDENT IN DISTRESS

PARENT: I CONSENT to communication and exchange of information between referring staff and doctors: (Ed Code 49423.1)

Dr				
Location or Clinic _			_	
Phone	Fax	Email		
Dr				
Location or Clinic _			_	
Phone	Fax	Email		
Crisis Response To	eam Member			
Name			Role	
Cianatura			Date	