

## **Behavioral Health Concerns Referral Policy**

The Bullis Charter School (“BCS”) Board, at its regularly scheduled meeting held on January 26, 2026, hereby adopts the following policy on referral protocols for addressing pupil behavioral health concerns in grades 7–8 at Bullis Charter School. This policy has been developed in consultation with school and community stakeholders and establishes the adopted procedures relating to referrals to behavioral health professionals and support services.

### **Addressing the Needs of High-Risk Groups**

The Board recognizes the importance of ensuring equitable access to behavioral health supports for all students. The Board hereby adopts this policy to address the needs of high-risk pupil groups, which include but are not limited to the following:

- Pupils with disabilities, mental illness, or substance use disorders
- Foster youth and youth placed in out-of-home settings
- Homeless youth
- Pupils experiencing bereavement or loss of a close family member or friend.
- Pupils for whom there is a concern due to behavioral health disorders, including common psychiatric conditions and substance use disorders such as opioid and alcohol abuse
- Lesbian, gay, bisexual, transgender, or questioning pupils

The support staff who oversee the mental and behavioral health needs of students are responsible for coordinating implementation of these group-specific referral protocols, in collaboration with the Managing Director of Special Education, Foster Youth & Homeless Liaison, and administrators.

School leadership may also identify additional pupil groups at local discretion, such as English learners or recently immigrated students, if local data show increased behavioral health risks.

### **Student Privacy**

Bullis Charter School recognizes and agrees to abide by the variety of federal and state student data privacy laws and regulations (including but not limited to the Family Educational Rights and Privacy Act [FERPA], EC Section 49073, et seq., etc.) with which BCS must comply in connection with its policy on referral protocols for addressing pupil behavioral health concerns and in connection with implementation of its policy and protocols, including but not limited to any of subsets of its policy, such as those listed below.

## **Referral Protocols and Procedures**

The BCS Board hereby adopts the following referral protocols and procedures relating to referrals to behavioral health professionals and support services:

### **Needs Assessment**

- The Executive Director or designee shall conduct an annual needs assessment to:
  - Identify behavioral health trends;
  - Review available resources; and
  - Detect service gaps within the school community.
- Support staff shall review referral volume, response times, and outcomes on a quarterly basis and shall submit findings to the Executive Director or designee for continuous improvement.

### **Capacity Building**

- Bullis Charter School shall:
  - Provide professional development on referral pathways and staff roles;
  - Clarify responsibilities among certificated and classified staff; and
  - Maintain partnerships with school-linked behavioral health professionals and community providers, as appropriate

### **Planning**

- The Executive Director or designee shall:
  - Define referral pathways for crisis and non-crisis concerns;
  - Establish goals and assign responsible roles for each step in the referral process; and
  - Enter into memoranda of understanding (“MOU”) with external partners, where appropriate, to support referral handoffs and information-sharing

### **Implementation**

- Bullis Charter School shall establish step-by-step procedures to:
  - Initiate referrals;
  - Document concerns;
  - Notify parents/guardians as consistent with law;
  - Triage level of need;
  - Link pupils to appropriate services; and
  - Schedule follow-up checks

## **Evaluation and Continuous Improvement**

- Bullis Charter School shall conduct an annual evaluation of referral protocols that includes:
  - Data collection and analysis;
  - Input from staff, families, and community stakeholders; and
  - Targeted improvements based on results
- Evaluation monitors outcomes such as:
  - Median time to first contact;
  - Percentage of follow-ups completed within ten school days;
  - Referral closure rates; and
  - Results for the pupil groups identified in EC Section 49428.2(b)(3)
- A summary of results is reported to the BCS Board annually to support transparency and continuous improvement.

### **Training (EC Section 49428.2(b)(4), (c)-(e))**

Bullis Charter School shall ensure that teachers of pupils in grades 7–8 receive training on pupil behavioral health. Training materials approved by BCS shall include:

- How to identify appropriate contacts for behavioral health evaluation, services, or both evaluation and services, at both the school site and within the larger community; and
- When and how to refer pupils and their families to those services

Optional elements may also include:

- Recognizing the signs and symptoms of youth behavioral health disorders.

Subject to EC Section 49428.2(d), BCS shall certify, on or before July 1, 2029, to the CDE that 100 percent of its certificated employees and 40 percent of its classified employees who have direct contact with pupils in grades 7–8 have received youth behavioral health training at least once, in accordance with EC Section 49428.2(c)(1)–(5).

### **Authorization and Scope of Practice (EC Section 49428.2(b)(5))**

In order to ensure that all school employees act only within the authorization or scope of their credential or license, Bullis Charter School shall:

- Provide training and guidance to staff clarifying their roles in the referral process and the limits of their credential or license
- Direct employees to refer pupils to appropriately credentialed or licensed professionals when behavioral health concerns are identified

- Maintain referral protocols that specify which staff positions are authorized to act at each stage of the referral process
- Review job descriptions and assignments to confirm they align with credentialing and licensing requirements
- Inform staff clearly that only licensed or credentialed professionals are permitted to diagnose or treat behavioral health conditions

Consistent with *EC* sections 49428.1(b)(8) and 49428.2(b)(5), nothing in this policy shall be construed as authorizing or encouraging school employees to diagnose or treat youth behavioral health disorders unless they are specifically licensed and employed to do so.