DOCUMENTED ACTIONS LIST
SUPPORTING DOCUMENT TO
IDAHO PROTOCOLS FOR SCHOOL-BASED SUICIDE INTERVENTION

____1. Documented referral and filed any related materials.
____2. Interviewed youth.
____3. Administered screener. If not, please explain why.
____4. Determined risk level.
____5. Notified parent/guardian.
   a. Contacted parent for low risk.
      i. Gave relevant materials and referral to parents.
      ii. Followed up with youth/parent the next day.
      iii. Thanked person who made referral.
   b. Asked parents to come to school for medium or high risk and in-person sign documents.
      i. Had parents sign that they received related materials including means restriction pamphlet.
      ii. Ascertained where/when child will receive mental health assessment and ask for confidentiality release.
      iii. Or called appropriate agency if parents refused to pick up youth or refused to take youth for mental health.
      iv. Thanked person who made referral.
____6. Shared incident and steps taken with principal and/or crisis team.
____7. Documented all steps taken.
____8. Followed up with family ______________________ (date/time).
____9. Followed up with mental health provider if appropriate ______________.
____10. For self-care, __________________________________________________.
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