

Lewis Center for Educational Research

BP 5141.8: STUDENTS BEHAVIORAL HEALTH REFERRALS

Adopted: May 18, 2026

Revised:

The Board of Directors of The Lewis Center for Educational Research (which operates the Academy for Academic Excellence and Norton Science and Language Academy – collectively, the “LCER”) adopts the following policy on referral protocols for addressing student behavioral health concerns in grades 7–12. This policy has been developed in consultation with school and community stakeholders and school-linked behavioral health professionals and establishes the adopted procedures for referrals to behavioral health professionals and support services.

LCER will comply with all state and federal student data and privacy requirements, including but not limited to the Family Educational Rights and Privacy Act (“FERPA”) in the administration of this Policy.

Whenever possible and practicable, the protocols and procedures below will be used in lieu of disciplinary actions, and students who may be subject to disciplinary action will be able to access them and will not be prohibited from doing so.

All protocols will reflect evidence-based and culturally appropriate approaches to student behavioral health referrals.

Addressing the Needs of High-Risk Groups

LCER recognizes the importance of ensuring equitable access to behavioral health supports for all students, including the unique needs of high-risk student groups, which include but are not limited to the following:

- Students with disabilities, mental illness, or substance use disorders, foster youth, and youth placed in out-of-home settings.
- Homeless youth.
- Students experiencing bereavement or loss of a close family member or friend.
- Students 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 students.

LCER 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 Director of Student Services (IEP/504), Foster Youth Liaison, Homeless Liaison, and LCER administrators.

LCER may also identify additional student groups, such as English learners or recently immigrated students, if local data or partner input show increased behavioral health risks.

Referral Protocols and Procedures

1. Needs Assessment

The President/CEO or designee shall conduct an annual needs assessment to:

- Identify behavioral health trends;
- Review available resources; and
- Detect service gaps within the school community.

LCER shall review referral volume, response times, and outcomes quarterly to support continuous improvement.

2. Capacity Building

LCER 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

3. Planning

The President/CEO 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 with external partners, where appropriate, to support referral handoffs and information-sharing.

4. Implementation

LCER shall establish step-by-step procedures to:

- Initiate referrals;
- Document concerns;
- Notify parents/guardians consistent with law;
- Triage level of need;
- Link students to appropriate services; and
- Schedule follow-up checks.

5. Evaluation and Continuous Improvement

LCER 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.

A summary of results is reported to the LCER Board annually to support transparency and continuous improvement.

Staff Training

LCER shall ensure that teachers of students in grades 7–12 receive at least one training session on student behavioral health. Training shall include the following:

1. Instruction around the unique risk factors and warning signs of behavioral health problems in adolescents,
2. Understanding the importance of early intervention,
3. How to help an adolescent in crisis or experiencing a behavioral health challenge, including guidance on when to make referrals consistent with this Policy

4. Instruction on recognizing the signs and symptoms of youth behavioral health disorders, including, but not limited to, psychiatric conditions and substance use disorders such as opioid and alcohol abuse.
5. Instruction on how to maintain student privacy and confidentiality in a manner consistent with federal and state privacy laws.
6. Instruction on the safe de-escalation of crisis situations involving students with a youth behavioral health disorder.

Training materials approved by LCER shall include:

- How to identify appropriate contacts for behavioral health evaluation, services, or both evaluation and services, at both LCER and within the larger community; and
- When and how to refer students and their families to those services.
- Recognizing the signs and symptoms of youth behavioral health disorders.

LCER shall provide certification of compliance with staff training requirements to the California Department of Education (“CDE”) on or before July 1, 2029.

Authorization and Scope of Practice

To ensure that all school employees act only within the authorization or scope of their credential or license, LCER shall:

- Provide training and guidance to staff clarifying their roles in the referral process and the limits of their credentials or licenses.
- Direct employees to refer students 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.

No LCER staff will diagnose or treat youth behavioral health disorders unless they are specifically licensed and employed to do so.