



# Kamehameha Schools

Mālama Ola Behavioral Health Department

---

## Behavioral Health Readmission Checklist

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Your child has been placed on medical leave and needs to be assessed for safety by a licensed mental health professional before they are able to return to school. The purpose of this evaluation is to ensure that your child does not pose a risk of harm to self or others. To help facilitate this process, we have included a checklist of the necessary steps for readmission. Your child's Behavioral Health Specialist will be the primary point of contact.

- An evaluation conducted by a Licensed Mental Health Professional (e.g. psychologist, psychiatrist, other licensed clinician).
- Following the evaluation, have the above provider complete the Behavioral Health Readmission forms. If your child is evaluated at the Emergency Room, readmission will only be accepted by a Licensed Mental Health Professional.
- All documents should be directed to the Behavioral Health Specialist via email or fax. If additional documentation is needed, your Behavioral Health Specialist will contact you directly.
- Once all required documentation has been received, the Behavioral Health Specialist will schedule a mandatory meeting with the student, parents, behavioral health supervisor, school administrator, nurse, and boarding representative as applicable prior to the students return to school. Please be advised that a boarding student readmitted to school may or may not be readmitted to the boarding program at the same time; boarding students are not allowed to return to the dormitory until after the Readmission meeting has been completed.
- During your child's leave from school, administration and teachers will be notified that your child is out on medical leave. Attendance will be excused until they return to school.
- Your child may need to continue therapeutic counseling sessions and/or medication management. We recommend that you continue working with your child's mental health professional to determine the best course of action for him/her. We are available and committed to supporting your child while at school.
- Other Requirements:

Behavioral Health Specialist(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_



# Kamehameha Schools

Mālama Ola Behavioral Health Department

---

## Safety Instructions for Parents and Guardians

Parents and Guardians are best able to maintain the safety of their children by maintaining a supportive and involved relationship with their child. Here are a few important items to consider reviewing and if your child is imminently at risk of suicide, **get help immediately by calling 911**.

- Understanding the warning signs and risk factors for suicide:
  - Risk Factors:
    - Mental illness including depression, conduct disorders, and substance abuse.
    - Family stress/dysfunction.
    - Environmental risks, including presence of a firearm in the home.
    - Situational crises (e.g., traumatic death of a loved one, physical or sexual abuse, family violence).
  - Warning Signs:
    - Suicidal threats in the form of direct ("I am going to kill myself") and indirect ("I wish I could fall asleep and never wake up again") statements.
    - Suicide notes and plans (including online postings).
    - Prior suicidal behavior.
    - Making final arrangements (e.g., making funeral arrangements, writing a will, giving away prized possessions).
    - Preoccupation with death.
    - Changes in behavior, appearance, thoughts and/or feelings.
- Concrete actions to be taken by the caregiver:
  - If the student is expressing suicidal ideation:
    - **Remain calm. Provide constant supervision. Do not leave the youth alone.**
    - Ask the youth directly if he or she is thinking about suicide (e.g., "Are you thinking of suicide?").
    - Focus on your concern for their well-being and avoid being accusatory.
    - Listen nonjudgmentally and reassure them that there is help and they will not feel like this forever.
    - Remove means for self-harm, if you are able.
    - Call the National Suicide Prevention Lifeline at 1-800-273-TALK, Crisis Text Line (text "ALOHA" to 741741) or the 24-hour Crisis ACCESS Line of Hawaii 1-800-753-6879.
    - Have someone call 911
  - If the student has lethal means on their person or is expressing homicidal ideation:
    - **Remain calm. Provide constant supervision. Do not leave the youth alone.**
    - Do not attempt to take a weapon by force
    - Clear area of any dangerous items to ensure the student's safety
    - Call the 24-hour Crisis ACCESS Line of Hawaii 1-800-753-6879
    - Have someone call 911





**Kamehameha Schools**  
Mālama Ola Behavioral Health Department

---

2. Recommendation regarding student's readiness to return to boarding:

- Not Applicable - Student is not a boarding student.
  - Student is NOT cleared to return to boarding.
  - Student is cleared to return to boarding without any restrictions.
  - Student is cleared to return to boarding with the following restrictions and/or considerations:
- 
- 

3. Recommendation regarding ongoing care:

- Continuing treatment is not necessary at this time.
- Student will remain under my care.  
Date of next appointment: \_\_\_\_\_ Frequency of appointments: \_\_\_\_\_
- Student is being referred to another treatment provider:

4. Additional Comments:

---

---

---

**III. Licensed Mental Health Professional Completing This Report**

Name of Mental Health Professional: \_\_\_\_\_

Are you currently licensed in Hawai'i?     No     Yes    License Number: \_\_\_\_\_

- Clinical Social Worker (LCSW)
- Marriage & Family Therapist (LMFT)
- Mental Health Counselor (LMHC)
- Psychiatrist
- Psychologist

Business Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Clinician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_