**Community Crisis and Counseling Resources**

Crisis Resources

-Blue Ridge Behavioral Healthcare Crisis Hotline (24 hours per day crisis assistance) 540-981-8181

-CONNECT Crisis Services (admissions to Roanoke Memorial Rehab) 540-981-8181

-Respond Crisis Services (admissions to Lewis-Gale Pavilion) 540-772-2801

Lewis Gale Emergency Room (1900 Electric Rd, Salem, VA 24153) 540-776-4470

Roanoke Memorial (1906 Belleview Ave SE, Roanoke, VA 24014) 540-981-7000

Roanoke Valley Mental Health Collaborative (free counseling and psych, for uninsured) 540-344-0931

 10 East Church Avenue, Suite 300, Roanoke, VA 24011

Family Service of the Roanoke Valley (individual counseling, sliding scale fee basis) 540-563-5316

 360 Campbell Avenue SW, Roanoke, VA 24016

Pastoral Counseling Center of Roanoke Valley (counseling, fees start at $10) 540-343-5455

 214 Mountain Avenue SW, Roanoke, VA 24016

Commonwealth Catholic Charities (counseling) 540-344-5107, 540-342-2885, 540-342-8627

 820 Campbell Avenue SW, Roanoke, VA 24016

Blue Ridge Behavioral Healthcare (counseling, case management, etc.) 540-981-1102

 611 McDowell Avenue, Roanoke, VA 24016

Protocol for Handling Suicidal Ideation

* Gather information:
	+ Ask validating questions like “What’s been going on to make you feel this way?”
	+ Assess if the situation presents immediate danger. Does the person have **intent, plan, and means?**
		- If no: work to find a solution to the problem. How can we help you feel better? Refer to REAPS in the staff manual for ideas of how to help the child work through the problem.
		- If yes: take the child to APC and fill out an incident report.
* If a child is brought to an APC,
	+ Delve more into the intent, plan, and means
	+ Form a plan with the child. How can we help you feel better?
		- Be very sure not to “counsel” the child. If something were to happen, there would be liability risk for practicing outside of profession.
	+ When the child is okay to go back to the unit, assign the child a one-on-one staff member (counselor or otherwise). This person should be with the child at all times and should check-in every 15 minutes on the stability of the child. Check-ins should be subtle: questions like “How are you feeling?”, observation of presenting mood, statements, and expressions, etc. APC should check in with the child subtly at meal times, or every 3-4 hours, to assess wellbeing.
	+ Notify the parents/legal guardians. Call the guardian to inform them of the incident. Give the parent the option of the child going home or staying at camp based on the severity of the issue. Have resources for local crisis and counseling services for the parent to take home.
	+ If symptoms persist, have the parent come pick the child up OR take the child to the Emergency Room (the one that would be best for the child).
		- If parents/guardians are not cooperative, inform them that if the ER is the best option for the child’s safety, camp staff will take the child to the ER. Call parents/guardians back to inform them the child will be going to the ER.