Identifying trained on-call counselors who will be able to provide direct and consultative crisis intervention.

The management expectations of each stakeholder within athletics during a crisis situation.

Specific steps to be taken after an emergency situation has resolved to support the student-athlete who has experienced the mental health emergency.

A procedure for reviewing preventive and emergency procedures after the resolution of the emergency situation.

A formal policy for when student-athlete family members will be contacted in the event of a mental health emergency.

Communication about mental health management plans:

MHEAMPs are provided to all stakeholders within athletics who work with student-athletes, clearly specifying each stakeholder's role in managing a crisis situation.

Annual communication is conducted with all stakeholders within athletics who work with student-athletes about the importance of reviewing their role in all emergency action plans – specifically the MHEAMP.

All stakeholders within athletics who work with student-athletes are provided with written instructions about the practitioners to whom student-athletes with potential non-emergency mental health concerns should be referred.

Routine mental health referral plan that specifies:

Situations, symptoms or behaviors that may indicate a possible nonemergency mental health concern.

The licensed mental health professional to whom student-athletes with possible nonemergency mental health concerns should be referred.

Who should be responsible for making the referral to a licensed practitioner who is qualified to provide mental health services.

3. Pre-Participation Mental Health Screening

Screening questionnaire(s) for mental health disorders are considered as part of the pre-participation exam.

A procedure is established for when and to whom symptomatic or at-risk student-athletes identified through this screening process will be referred.

All decisions related to what approach will be taken to screening (including what screening instrument to consider and what responses or scores on this instrument warrant further follow-up) will be made by the primary athletics health care providers (athletic trainers and team physicians) in collaboration with the licensed practitioners who are qualified to provide mental health services. Examples may include those listed in Appendix F.