Connect and Collaborate: Mental Health Partnerships in Schools
Objectives

• Participants will identify the tools they need to identify at risk populations represented within their local school systems.

• Participants will learn strategies for collaboration with local school systems, in addition to operational targets for rapid response to need.

• Participants will learn proper billing and coding techniques for the school-based populations they serve.
Why School Based Mental Health?

• Mental wellness is crucial to successful life (and academics)

• Only about 40% of youth with behavioral health issues get help for their concerns
  • Of those who are getting help about 66% get services in an educational setting
  • Families are more likely to seek services when provided on a school campus

• Provides a full continuum of services

• Creating and sustaining outcomes and safe schools
<table>
<thead>
<tr>
<th>Why do some families not seek help?</th>
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<tr>
<td>No access to care</td>
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<td>Do not understand the system/how to get started</td>
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<td>Availability/capacity/wait times</td>
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<td>Unable to make appointments</td>
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<td>Stigma</td>
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<td>Fears (Department of Child Safety (DCS), undocumented)</td>
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<td>Transportation</td>
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<td>Benefits of Integrating Care with Schools</td>
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<tr>
<td>Improves school climate</td>
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<td>Increases access to care</td>
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<tr>
<td>Integrates with community and school initiatives</td>
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<tr>
<td>Additional support for crisis intervention</td>
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<tr>
<td>Increases opportunities to train education staff in mental health</td>
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<td>Increases access to therapy, behavioral interventions, and other adjunct supports</td>
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Steps to Integration

• Community-Based Organization Steps:
  • Needs assessment: Identify a school or district with an underserved population and/or lack of resources
  • Set up a meeting with Superintendent/District Official
  • Review
    • Census
    • Languages and cultures
    • Best practices in school-based mental health
    • Integration process
    • Referral process
    • Provide tools for schools to know who to refer
    • Space
Interconnected Systems Framework (ISF)

- An approach to integrating PBIS with an outside agency providing behavioral health support
- Helps PBIS team utilize data to be able to identify early youth needing behavioral health support
- School needs awareness of how to identify youth in need (through PBIS data, training, possibly screening tools)
- The provider agency should be using evidence based approaches
- Use data to monitor progress (agency and provider should be in alignment with each other)
Determining Appropriateness of Fit for a School Based Services Referral

• If you answer yes to any of the following questions, pursue a referral with your key contact:
  • If a youth is struggling behaviorally and even with consistent implementation school support
  • If a youth seems frequently sad, angry, anxious, withdrawn and/or becomes emotional over things that do not typically bother his peers.
  • If you are aware of a recent traumatic event that has occurred in the youth’s life or any impactful traumatic event that may be still impacting the youth?
  • Is the family voicing consistent concerns or seeking resources/support for additional help?
  • Is the youth engaging in consistent or severe substance abuse?
Service Implementation: School Components

- Memorandum of Understanding in place (prior to beginning services if possible)
- Identify key contact person/persons at each site to coordinate care
- School to work with staff on appropriate times to see youth
- Identified private space on campus
- Year round services
Communication/Partnerships with Schools

- Orientation Meetings
- Referral Submission
- Meetings to review administrative/programming needs, successes, barriers
- Staffing on enrolled youth at each site
- Child and Family Team Meeting participation
Service Implementation: Members/Youth

- Parent/guardian consent
- Provider on campus (as clinically needed)
  - Intakes
  - Engage families in services
  - Staff with schools
  - Living Skills
  - Direct Support
  - Therapy
Billing

• Coding under School location of service (03)
• Additional coding for other locations
• Common billing codes for SBS
  • H0004
  • H0031
  • H2014
  • T1016
  • S5110
• Funding options
  o AHCCCS
  o Private pay - sliding fee scale available
  o Block grants
  o Other funding
Considerations when working with schools

• Space is a premium at schools
• Communicate, communicate and communicate again
• Schools will expect quick responses
• Schools will need quick access to care, streamlined approaches
• Provider and school should have mutual expectations, and both have a shared vision of the program
• School officials may be overwhelmed, unable to participate
• Getting teacher buy in
• Ensuring there are boundaries
• Professional development, training needs of schools
• Training for staff on IEP, 504s, professionalism with working with schools
Outcomes will be assessed and may vary per provider agency.

Outcome measures could include:

- Academic performance
- Truancy
- Following school rules-referrals/suspensions
- School attendance
- Healthy school behaviors
- Self harm/suicidal ideation
- Emotional distress/regulation
- Peer relationships
- Impulsivity/aggression
- Inattention
- Substance abuse
- Family functioning
Creating Systemic Change

School Based Service address both the needs of the youth in schools, and the needs of the adults supporting them.

- Evidence Informed trainings help adults learn more ways to support the children they care for:
  - Suicide prevention & self harm
  - Bullying
  - Mental health awareness & Substance Abuse
  - Understanding trauma in students & secondary trauma in educators
  - Self-regulation for youth and for adults,

- Evidence-Based trainings provide critical tools to help keep young people safe and secure:
  - Youth Mental Health First Aid
  - SafeTalk
  - ASIST
**Becoming a Part of School Culture**

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<tr>
<th>Step</th>
<th>Details</th>
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<tr>
<td>Develop a Needs Assessment on training and support needs at school</td>
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<td>Agency staff introduced to all teachers, front office, and school</td>
<td>personnel</td>
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<td>Agency staff tables school events and presents at Coffee Talks &amp;</td>
<td>Parent Nights</td>
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<tr>
<td>Agency staff and school leadership attend partnership check-in</td>
<td>meetings</td>
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<tr>
<td>Agency staff holds a consistent schedule on campus, and the school</td>
<td>knows when to expect them</td>
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<td>School staff champions provide a bridge between agency personnel and</td>
<td>school personnel</td>
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<tr>
<td>Behavioral health &amp; healthcare services are more accessible and feel</td>
<td>friendlier</td>
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Touchstone Health Services’ School Based Services Program

- In 9 districts in Phoenix Metro region, serving over 57 schools
- Evidence based treatments and living skills
- Summer programming
- Intensive outpatient program
- Evidence based parenting Classes
- Robust training program
- Therapist and interventionist team approach
- Partnering with grant funding

Mirroring multitiered social-emotional approaches in schools
Summary of School Feedback

- 96% of all sites responded agreed/strongly agreed that they were satisfied with School Based Services Program (4.5 rating on a 5-point scale)
- 89% of all sites responded agreed/strongly agreed that they saw positive outcomes with youth enrolled in School Based Services (4.2 rating on a 5-point scale)
- 96% of all sites responded agreed/strongly agreed that they were satisfied with the School Based Services referral process (4.5 rating on a 5-point scale)

- “Once a student is enrolled, they will visibly improve—sometimes extremely quickly. The therapist does a wonderful job making sure students feel seen and acknowledged and it makes an immediate difference... Quite often grades will improve... parent concerns are quickly addressed.”
- “Knowledgeable, professional and most importantly passionate and dedicated staff. Students feel supported and loved”
- “Overall, SBS had made a significant difference in the lives of our students and families. Providing them the opportunity to receive services with the convenience of supporting students in a school setting has made it possible for many barriers to be eliminated.”
Community Reception

- Address stigma reduction and other barriers
- Kids talk to each about the program and how it has helped them
- Parents/community - parents encourage other parents to seek help due to impact on their own youth
- Viewing and discussing mental health services as a friendly thing
- Important to thoroughly explain the services to families
  - Not linked as punitive
Spectrum Healthcare’s School Based Services Program

• In 7 districts in Yavapai County, serving about 15 schools
• No formal MOU at this time
• Utilizing Medicaid and grant funding
• Family coming to schools for intake or family therapy
• Students can keep reoccurring appointments during school breaks
• CFTs in schools or homes as needed
How Does this Apply to a Rural Community?

• Even further limits on staff and resources. “All things to all people.”
  • “Who do I refer to?”
• Responding to immediate needs to build relationships (Milestones program and Crisis follow-up.)
• We move from informal to formal as needs arise.
• Preventative presentations using school funds.
School Based Services in 2020

Implications for increased need due to crises, and adjustments in delivery of behavioral health services
Studies from SAMHSA studies from previous natural disasters:

- Majority of children eventually return to their typical functioning after experiencing trauma when they receive consistent support from their care providers
- Others are at risk of developing significant mental health problems
- Children with prior trauma or pre-existing mental, physical, or developmental problems—and those whose parents struggle with mental health disorders, substance misuse, or economic instability—are at especially high risk for emotional disturbances
During the first months of the outbreak in China, studies revealed that the average posttraumatic scores were four times higher among children who were quarantined than those who were not.

- COVID-19 related news which could alleviate their anxiety and panic, parents need to create direct conversations with children about these issues to avoid panic and reduce anxiety.

- More children than usual may witness substance abuse, neglect, violence or abuse

- Increased stress-related cognitive impairment and diseases” and probably increased toxic stress- Dr. Nadine Burke Harris

- Higher risk are children who have experienced untreated trauma before this outbreak

- American Academy of Pediatrics have stated that, “Schools are fundamental to child and adolescent development and well-being."
Teenagers and Impact of COVID

- 81% of teens say mental health is a significant issue for young people in the U.S., and 64% of teens believe that the experience of COVID-19 will have a lasting impact on their generation’s mental health.
- In this stressful climate, 7 in 10 teens have experienced struggles with mental health.
- 55% of teens say they’ve experienced anxiety, 45% excessive stress, and 43% depression.
- 61% of teens said that COVID-19 pandemic has increased their feeling of loneliness.
- Teens today report spending 75% of their waking hours on screens during COVID-19.
- 82% of teens calling on America to talk more openly and honestly about mental health issues in this country.
- 79% of teens surveyed wish there was an inclusive environment or safe space for people in school to talk about mental health.
- (4-H Study)
Impact of COVID on Suicide Rates

- Concerns of an increase, perfect storm-increase in stress, disruptions in routines, access to services, isolation, increase in firearm sales, and other factors could lead to an increase
- Could take up to two years to know true impact
- Suicide is preventable, and people are more resilient than we give them credit for
- Pandemic could have a pull together effect, and create social connectedness
Impact on Parents/Guardians

• Larger impact on families of color, lower income, immigrants:
  • more likely to have lost their job/income
  • more likely to be essential workers and get ill
  • more likely to die/get seriously ill from COVID

• Half of all parents with youth under the age of 18, reported high levels of stress during COVID, attributing a big portion to virtual schooling during pandemic
  • Only 28% of nonparents reported the same level of stress
  • With virtual school/distance learning and when parents are working, 71% of parents say managing their children’s learning is a significant source of stress
  • Parents are more likely than those without children to say basic needs are a significant source of stress (70% vs. 44% without children)
School Based Services in “New Normal”

- Greater need but how to reach families with “social distancing”?
- Each district has a different plan for the upcoming year
- Review their needs, procedures and protocols
- Plan for contingencies (school closures, reopening further in person)
- Staffing considerations and what safety protocols need to be followed
- How to raise awareness directly to parents that there is help for their families and youth
- Schools will need options for:
  - Telehealth only
  - Hybrid- alternating between in person and telehealth
  - In person- with strict health precautions
• If interested in Touchstone’s School Based Services or for any questions regarding the program:
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