School-Based Mental Health Services: Navigating the Journey

Presented by Student Services Administrative Team

- Overview of SBMHS
- Process for receiving referrals
- Procedures upon entering a school
- Important VCS procedures
- Multi-tiered System of Student Support
- Understanding FAPE/ESE classifications and how these factors can impact on your services
- Educationally Relevant Services
- What to do if you encounter concerns

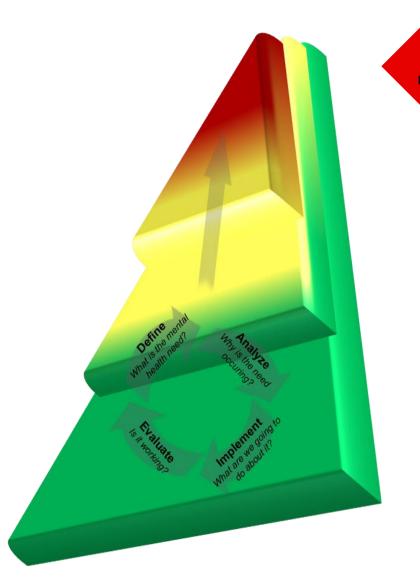


Mental Health Needs

- National data
 - 1 in 5 children experience signs of a mental health problem
 - ~ 2.7 million FL public school students
 - ~ ½ million children have a mental health problem/need
- District Response to mental health needs



System of Supports for School-Based Mental Health Services



Intensive, Individualized Interventions

Brief individual counseling Individual Educational Plan w/ Counseling as a Related Service

Behavior Intervention/Support Plan

Crisis Intervention

Multi-agency Network for Students with Emotional/Behavioral Disabilities

Targeted, Supplemental Interventions & Supports

Small group interventions

Anger management

Targeted social skills training

Peer counseling/peer mediation

Student Engagement/Attendance

Schoolwide, Preventive Systems of Support

Schoolwide Positive Behavior Support

Safe & Healthy Schools (School Climate)

Schoolwide Social Skills Training

Bullying Prevention

Social/Emotional Learning

SBMHS Process

- Student Services Administrative Team prioritizes the schools needing services
- Principal/SS team requests services or agency requests expansion of services
- Student Services liaison will contact principal and explain the opportunity
- Student Services liaison will set up meetings with all parties (principal, school counselors, therapist, ESE contacts, etc.) at the school site
- Principal provides confidential office space for therapist(s)
- Principal agrees to provide administrative support/coordination with Student Services/ESE staff/therapists and other district staff
- Mutual selection of school with District, Principal, and Agency input regarding the type of behavioral health care service(s) appropriate for school (counseling, parent education, etc.)
- Mutually decide number of days for initial services
- Student Service liaison will be the contact for issues/concerns

Referral Process

- 1. District Liaison will ensure Student Services Team members / schools are aware of agencies with whom we have cooperative agreements with
- 2. Agency will provide Liaison /schools with brief descriptor and services referral forms
- 3. School will:
 - 1. designate a school-based employee who be will handle counseling referrals,
 - 2. advise parent or guardian of the opportunity for SBMHS using the descriptor of services when school team feels services are needed,
 - 3. will complete the agency referral form and fax/scan referral to the agency's central office if parent agrees to services
- 4. Upon parental agreement for service, Agency will contact the parent or guardian to obtain consent using the agency consent form and VCS Consent for Mutual Exchange of Information

Referral Process cont'd.

- 5. Agency/Provider should notify the school contact within a week regarding the status of the referral
- 6. Agency/Provider contacts the parent or guardian and schedules an intake once insurance is verified
 - Counseling should generally take place within 2-3 weeks of the referral date
- 7. Agency/Provider will communicate with school contact that the case has been opened and provide the date of admission
- 8. Agency/Provider will ensure parent has signed the Consent for Mutual Exchange of Information so that communication can occur between agency & school personnel

VCS Campus Access Procedures

Provider must:

- have a security clearance letter on file in the front office
- wear agency badge while on school premise and sign in via the Raptor System / follow Safety and Health Protocols
- maintain professional conduct and language at all times
- know emergency procedures, rules about smoking, approved parking areas, opening and closing times of schools, and general regulations in school
- alert the school contact person if a call of suspected abuse or neglect must be placed so DCF does not show up and "surprise" school administration

VCS has procedures for Concern of Harm, Threat Assessment, and Baker Acting a student from school ground. If a student is suicidal or threatening when with you, immediately discuss it with your school contact so they can implement the district procedures.

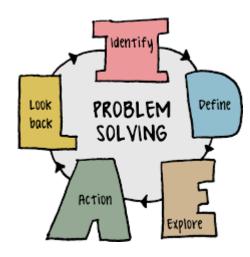
Student Classification

- Students are either classified as general education or Exceptional Student Education (ESE)
- Under the ESE classification there are several categories



Problem-Solving Process

- Multi-tiered System of Supports (MTSS)
- Problem Solving
 - Problem Identification
 - Analysis of the Problem
 - Intervention Implementation
 - Response to Intervention
- Exceptional Student Education (ESE) Criteria
 - Emotionally/Behaviorally Disturbed (EBD)
 - Other Health Impairment (OHI)
 - Autism Spectrum Disorder (ASD)
 - Specific Learning Disabled (SLD)
 - Others



Individuals with Disabilities Education Act (IDEA)/ADA 504

- Ensures that all children with disabilities, birth–21, have available a free appropriate public education (FAPE), in the least restrictive environment to:
 - Meet their unique needs
 - Prepare them for further education, employment, and independent living
- FAPE = special education and related services that:
 - Are provided at public expense
 - Meet state educational standards
 - Include an appropriate education
 - Are provided in conformity with an IEP.



Related Services

Related Services (e.g., speech therapy, occupational and physical therapy [OT/PT], Counseling as a Related Service, and transportation, etc.) help children with disabilities benefit from their special education by providing extra help and support in needed areas.

The student must have a recognized disability or disorder which adversely affects his/her educational performance which included developmental, academic and functional skills.



Data Collection

- Concern of Harm, Baker Act, Report Card Screening, Discipline data
- Clinical data collected along with school data to show impact of services on school functioning
 - Mental Health Provider Monthly Summary (Survey Monkey or FORMS)

	VCS - Student Services Summary - DRAFT
	Month in Review:
1.	Number of students seen this month:
2.	Number of sessions this month: (Combined total for both in-home and in-school)
3.	Location(s) of sessions this month: Home School
4.	If cancellations or No-Show, what was the reason? Student absent Family cancelled Student refused Other
5.	Areas of focus in session this month: Coping skills Anxiety reduction Respect for authority Anger management Increase focus/concentration Expression of thoughts/feelings Improve peer relationship Other
6.	Service plan for upcoming month: Discharge Transfer Continue services as they stand Add services. Explain:
7.	If student was discharged, what is the reason?



Educationally Relevant Mental Health Services

Terminology to Know:

- "Educationally Relevant": related to the student's success in the academic environment
- "Academic Engaged Time (AET)": the amount of time a student spends actively engaged in the learning
- "Social Emotional Learning": the process through which children learn to recognize and manage emotions



What are the goals of counseling in the school setting?

- Increase school success
- Prepares students for the challenges of the 21st century
- Develops decision-making and problem-solving skills
- Assists in developing effective interpersonal relationship skills
- Fosters resiliency factors for students
- Assures equitable access to educational opportunities

In order to reach these goals, a student needs to be able to sit in a classroom (attendance/hyperactivity), remain focused on the instruction (concentration), interact with peers/authority (respect/social skills), and follow rules in a way that allows him/her to function in the school setting (behavior/accountability)

Communication



- Providers cannot establish an effective treatment plan for school based mental health services without knowing how a student's issues are impacting his/her ability to learn.
- Obtain information from the school contact, the classroom teacher, student services staff, administration, a review of the IEP (if one exists), and from the student/parent themselves.
- Establish a relationship with your school-based contact and meet regularly to provide updates and obtain relevant information
- The referral sources is also a great resource.

How to get the information that you need from the school

- Review the referral form to find out who made the referral. Maybe a school counselor, social worker, school psychologist, behavior staff member, etc.
- Ask that person for the information you need and if there is anyone else you should speak with in order to get more information on the student's issues/struggles.
- Ask if the student has an IEP, and if social emotional goals are listed on the IEP. If so, then find out what those goals are so you can incorporate them into your treatment planning.
- Find out who the student's teacher(s) is and how to best contact them.

How to get the information that you need from the school cont.

- Work with the school-based contact to ensure the best times to pull the student for counseling services
- Ask the teacher if there are other behavior supports for the student, such as a school behavior specialists. If so, see how to contact that person and get a copy if possible of the behavior plan they are using with the student.
- Discuss with school personnel the attendance rate and disciplinary referral rate of the student.
- Inform the parent that they can ask school staff to invite you to meetings that are relevant to your services (IEP meetings, PST meetings, etc.)



If you have a concern....

- If you are have any problems with school staff or accommodations issues that you have not been able to resolve with the school-based contact, please contact your agency supervisor who can discuss the issue with the District Liaison. We want to try and resolve any issues/concerns as soon as possible!
- If you see something in a school you are concerned about, discuss it with your agency supervisor, who will know the appropriate action to take.
- Remember that principals have the authority to decide who is allowed to see a student on school grounds, and when that student can be seen.

Tips for Success



- Encourage a cooperative team atmosphere. Be careful of triangulation between you, client/parent, and school.
- Be aware that there is a process in classifying students. Don't make educational recommendations that are outside of the scope of your expertise.
- If working with multiple students in a school setting, make sure you maintain confidentiality of each client
- Communicate regularly with your school-based contact
- Contact the district liaison about concerns before they become problems

There's a Better Way



Effective Partnerships with Families, Schools and Community

The outcomes cannot be overstated

Greater parent involvement results in:

- Higher student achievement
- Improved student attendance
- Higher aspirations for post-secondary education and career development
- Improved social competence
- Lower rates of at-risk behavior for adolescents

Greater school/community partnerships result in:

- Decrease student drop-out
- Decrease suspension and expulsion
- Increase student graduation rates
- Increase post-school outcomes

We're All in this Together!

- Schools are not just a convenient location to render counseling services. Your agency partnership with Volusia County Schools is a cooperative agreement created so the counselors in the schools PARTNER with the school to serve the students who are at-risk and experiencing issues that are affecting school functioning
- Effective services take knowledge of procedures and a team approach



District Contacts

- District Liaison and Coordinator, School Social Services, Dianne C. Martin-Morgan, (386) 734-7190, X20765
- Coordinator, School Psychological Services, Troy Radford, X20757
- Coordinator, Health Services, Debbie Fisher, X20525
- Behavior Initiatives Specialist, Amanda Ellzey, X34776

