



# Mental Health: School-Based Supports

REGIONAL MENTAL HEALTH POLICY BOARD



# State of our Schools' Mental Health

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**75%–80% of children and youth in schools in need of mental health services do not receive them.**

**Of those who do receive assistance, 70%–80% receive mental health services in schools.**

# Today's Agenda

- ▶ Overview of statewide picture
- ▶ Overview of CCSD picture
- ▶ Opportunities moving forward



# Who are school psychologists

School psychologists are trained in:

**Data-Based  
Decision-  
Making**

**Fostering  
Positive School  
Climates**

**Consultation  
and  
Collaboration**

**Social-  
Emotional  
Screening**

**Crisis  
Preparedness  
and Response**

**Prevention and  
Intervention**

# NVASP Priorities

- ▶ To improve Mental and Behavioral supports in Nevada
- ▶ Mental health pipeline and workforce development in Nevada
- ▶ Higher education program expansion
- ▶ Support for families and communities in need
- ▶ Decrease suicide completions, attempts, and ideations
- ▶ Decrease disciplinary referrals and student violence



# Statewide Picture

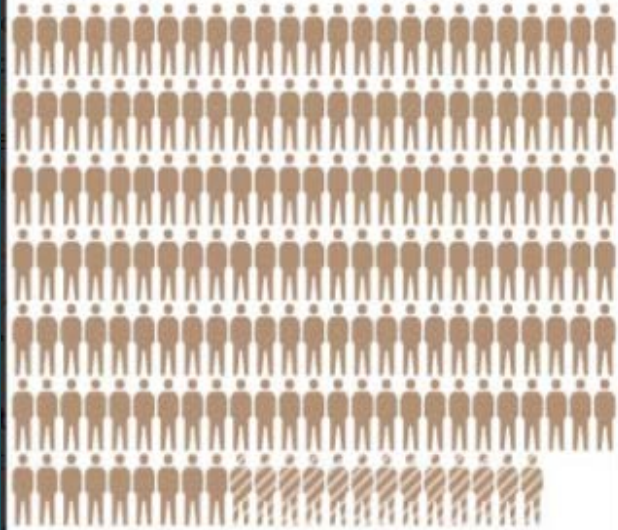
- ▶ Staffing
  - ▶ 1:500-700 National recommendation
  - ▶ 1:2200 Clark
  - ▶ 1:1800 Washoe
  - ▶ 1:1750 Humboldt
  - ▶ 1:1500 Nye
- ▶ Designated a “critically short” profession
- ▶ Non-competitive hiring packages



## School psychologist shortage

The number of school psychologists in the Clark County School District.

172 filled positions (159 full-time, 13 part-time)



18 vacancies (17 full-time, 1 part-time)  
9 percent of total positions



### Lowest starting salaries for school psychologists



Source: CCSD data as of Jan. 29, 2018; LAUSD; Washoe County School District; Nye County School District

Wes Rand Las Vegas Review-Journal

- ▶ Lack of **protective support structures** for our student population
- ▶ Lack of a universal social, emotional, and behavioral health **screening** in schools
- ▶ Increase in acts of severe **violence** and serious **suicide** attempts
- ▶ Psychologists unable to provide **comprehensive** school based psycho-educational services to students (*40,000 students in CCSD without access*)



# CCSD Picture

- ▶ Psychological Services and Mental Health Supports
  - ▶ Department of Student Threat Evaluation and Crisis Response
  - ▶ Mental Health Transition Team

# CCSD Picture

- ▶ Services
  - ▶ Threat Assessment
  - ▶ Suicide Ideation Assessment
  - ▶ Suicide Risk Assessment Training
  - ▶ Reentry Planning and Services
  - ▶ Postvention Support
  - ▶ Crisis Response
- ▶ Staff
  - ▶ 7 School Psychologists, 5 School Counselors, & 2 School Social Workers



# Collaboration

- ▶ Department of Juvenile Justice Services (DJJS)
- ▶ Child Protective Services (CPS)
- ▶ School Police Department
- ▶ Police Department Clark County
- ▶ Southern Nevada Counter Terrorism Center
- ▶ Coroner's Office
- ▶ Education Services
- ▶ Student Services Department
- ▶ Psychiatric Hospitals (valley wide)
- ▶ Mental Health Providers (valley wide)
- ▶ Mental Health Transition Team
- ▶ Mobile Crisis Response Team
- ▶ The Harbor Juvenile Assessment Center
- ▶ All CCSD Departments



# Suicide Statistics

- ▶ Nevada: 558 deaths by suicide in 2015
- ▶ Suicide is the 10<sup>th</sup> ranking cause of death in US
- ▶ *Suicide is the 2<sup>nd</sup> leading cause of death for ages 15-24 (CDC, 2015)*
- ▶ Average of 1 youth every 1 hour and 36 minutes take their own life
  - ▶ White males 24.6%
  - ▶ Non-White Males 10.0%
  - ▶ Black Males 9.4%
  - ▶ Hispanic 5.8%
  - ▶ Asian Pacific Islanders 6.6%
  - ▶ White females 7.2%
  - ▶ Non-White Females 2.9%
  - ▶ Black Females 2.1%
  - ▶ Native Americans 12.6%



# CCSD Suicide Prevention

- ▶ State mandated prevention programs in 8<sup>th</sup> and 9<sup>th</sup> grades
- ▶ Many schools choose to include 6<sup>th</sup> and 7<sup>th</sup> grades
- ▶ We support this prevention effort on a regular basis

# CCSD Suicide Intervention

- ▶ Site-based Intervention Team Members
  - ▶ School Psychologist
  - ▶ School Counselor
  - ▶ School Nurse
  - ▶ School Social Worker
  - ▶ School Police
  - ▶ Administrator



# CCSD Suicide Intervention

## ▶ Training

- ▶ All site-based intervention teams year-round in Suicide Risk Assessment
- ▶ More intense training when school administration seeks additional support
- ▶ CCSD Suicide Risk Assessment Protocols have been distributed to other School Districts throughout the state of Nevada and Idaho in partnership with the Office of Suicide Prevention

# Postventions

- ▶ It is an intervention that occurs when there is a death at a school to help alleviate distress on impacted students and promote a healthy recovery for the school
- ▶ When a student or staff member dies
  - ▶ Grief activities
  - ▶ Grief counseling
  - ▶ Resources provided to families/students/staff
  - ▶ Screening for contagion (suicide)
  - ▶ Provide school administration with follow-up activities and assistance



# CCSD Mental Health Transition Team (MHTT)

- ▶ Staff: 1 School counselor, 2 school social workers, 1 school nurse
- ▶ Assists over 2,000 students each year transition from Mental Health Treatment Facilities back to CCSD schools in the last 3 years
- ▶ Role and Function

# CCSD MHTT

- ▶ Issues resulting in hospitalization:
- ▶ Serious suicide attempts (significant increase over last year reported)
- ▶ Depression
- ▶ Homicidal ideation
- ▶ Reports of being bullied
- ▶ Overall school problems
- ▶ Family issues
- ▶ Psychosis
- ▶ Behavioral problems
- ▶ Medication management



# CCSD MHTT Alliances

- ▶ Critical partners include:
  - ▶ School-based intervention team
  - ▶ Student and families
  - ▶ Hospital/treatment center representatives
  - ▶ Student-aligned community service providers
  - ▶ Mental Health Transition Team

# Hospital Participation

- ▶ Spring Mountain Treatment Center
- ▶ Montevista Hospital
- ▶ Desert Parkway Hospital
- ▶ Desert Willow Treatment Center
- ▶ Seven Hills Hospital
- ▶ Department of Juvenile Justice Services



# The Harbor

- ▶ Who: Juvenile assessment center that collaborates with outside agencies as a referral source
- ▶ What: Targets at-risk youth and their families
- ▶ How: Drug screenings, analysis of home/school/community behavior, in-depth interviews
- ▶ Services: Tutoring, mentoring, drug education, conflict resolution, anger control, social skills training, job skills development, counseling, cognitive behavioral therapy
- ▶ Managed by DJJS
- ▶ Staffed by DJJS, CCSD, Mobile Crisis Team, Adult Mental Health, and DCFS



**Unaddressed mental health needs increase risk for suspension, expulsion, dropout and entering the juvenile justice system.**



**School psychologists are uniquely positioned to provide mental and behavioral health services in schools.**



SOLUTIONS

# The Issues

- ▶ Lack of **protective support structures** for our student population
- ▶ Lack of a universal social, emotional, and behavioral health **screening** in schools
- ▶ Increase in acts of severe **violence** and serious **suicide** attempts
- ▶ Psychologists unable to provide **comprehensive** school based psycho-educational services to students (*40,000 students in CCSD without access*)



# State Level Solutions

- ▶ Create a Student Loan Forgiveness Program specific to school psychology
- ▶ Expand higher education school psychology training programs
- ▶ Establish Community-Based K-4 programs
- ▶ Revise Read by Grade 3

# State Level Solutions

## School Psychologist Ratio Improvement Plan (SPRIP)

- ▶ Require districts to establish a SPRIP to increase the impact school psychologists have on student mental-behavioral health, school safety, and school culture
- ▶ Incentivize hiring of school psychologists
- ▶ *Offer dedicated funding through the Governor's budget for School Psychologists and Psychological Assistants.*



# State Level Solutions

## Multi-Tiered Systems of Support (MTSS) for Social-Emotional Behavioral (SEB) Health

- ▶ Require schools to establish MTSS for SEB in each school, to teach students how to use positive pro-social interactions, coping skills, and cognitive-behavioral reasoning to thrive in life and at school.
- ▶ Reduce violence and increase mental health functioning
- ▶ *Project Healthy Minds* in Clark County is one such comprehensive model that has proven successful.



# District Level Solutions

- ▶ Establish a Multi-Tiered System of Support: Social, Emotional, and Behavioral Health in Schools program, such as *Project Healthy Minds*, on every elementary and secondary campus
- ▶ Work toward staffing each school with one school psychologist (minimally)
- ▶ Create new positions specifically for psychological assistants to facilitate comprehensive services
- ▶ Make hiring and pay packages more competitive
- ▶ Fill the existing 19 vacant school psychologist positions



# WHAT IS PROJECT HEALTHY MINDS?



# Project Healthy Minds

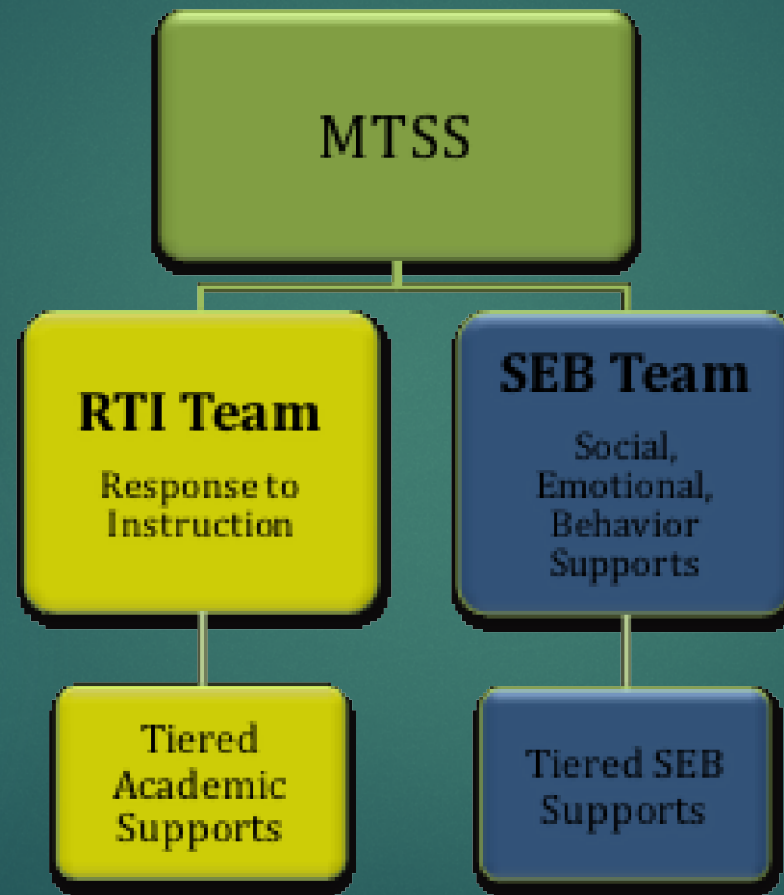
*Goal: Manage severe student behavior in the short-term and prevent it long-term.*

- ▶ Addresses student social-emotional and behavioral (SEB) functioning at all levels:
  - ▶ Tier 1
  - ▶ Tier 2
  - ▶ Tier 3
- ▶ *Elementary and Secondary* campuses

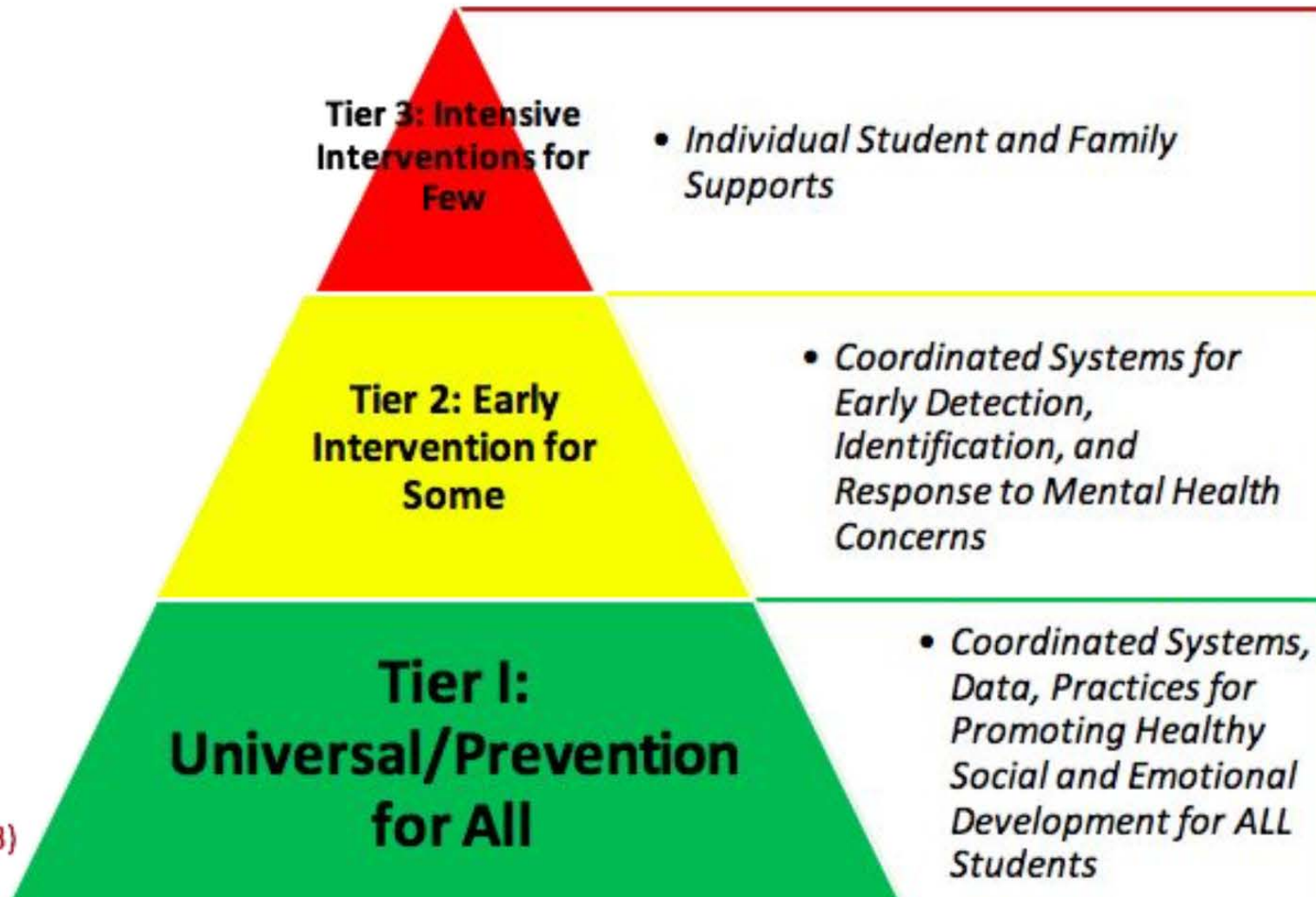




# Overview



# Tiered Model of School Mental Health



(Barrett, Eber, & Weist, 2013)



# THE TIERS: Tier 1



# Tier 1

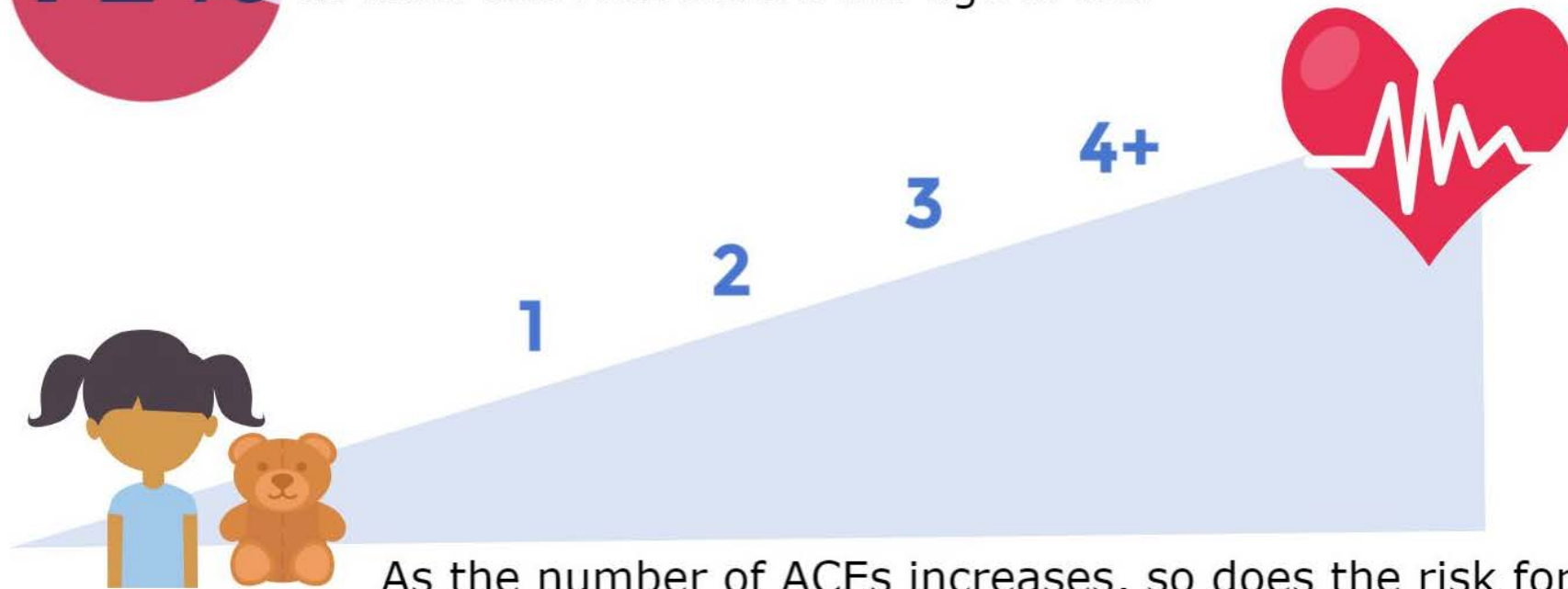
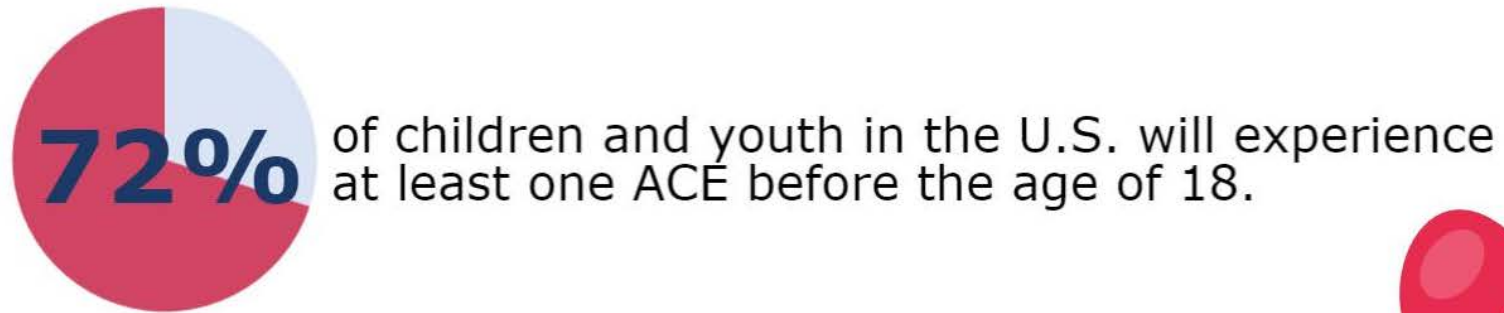
- ▶ Universal Social, Emotional, and Behavioral (SEB) curriculum
  - ▶ Sanford Harmony, SLANT
- ▶ All students screened
  - ▶ Identify students at risk
  - ▶ Identify students who may need monitoring or intervention
  - ▶ Inform decisions about services needed
  - ▶ Identify strengths/wellness
  - ▶ Identify risk factors/emotional distress
- ▶ Assess effectiveness using feedback looping





# Adverse Childhood Experiences (ACEs)

ACEs are stressful or potentially traumatic experiences, including abuse, neglect, and exposure to community violence.



As the number of ACEs increases, so does the risk for psychological, behavioral, or emotional problems; substance abuse; academic failure; social maladjustment; and poor medical health.

# Strengths and Difficulties Questionnaire

S 11-17

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain . Please give your answers on the basis of how things have been for you over the last six months.

Your name.....

Male/Female

Date of birth.....

	<b>Not True</b>	<b>Somewhat True</b>	<b>Certainly True</b>
I try to be nice to other people. I care about their feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am restless, I cannot stay still for long	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get a lot of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually share with others, for example CD's, games, food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get very angry and often lose my temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would rather be alone than with people of my age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually do as I am told	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I worry a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am helpful if someone is hurt, upset or feeling ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am constantly fidgeting or squirming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have one good friend or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fight a lot. I can make other people do what I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





# MTSS Checklist for Behavior Support

Attendance History since Kindergarten (# absences per year)

- K \_\_\_\_\_
- 1<sup>st</sup> \_\_\_\_\_
- 2<sup>nd</sup> \_\_\_\_\_
- 3<sup>rd</sup> \_\_\_\_\_
- 4<sup>th</sup> \_\_\_\_\_
- 5<sup>th</sup> \_\_\_\_\_

Family and developmental history (birth trauma, resides with whom, custody issues, etc.)

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List all flags on Infinite Campus

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Has the student been retained? Yes No

Any known history of special education supports? Yes No

Health Screening attached

Type of Out of Class Think Time Non-Violent Defiant Violent

Out of Class Think Time dates

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_

Description of primary behavioral concern

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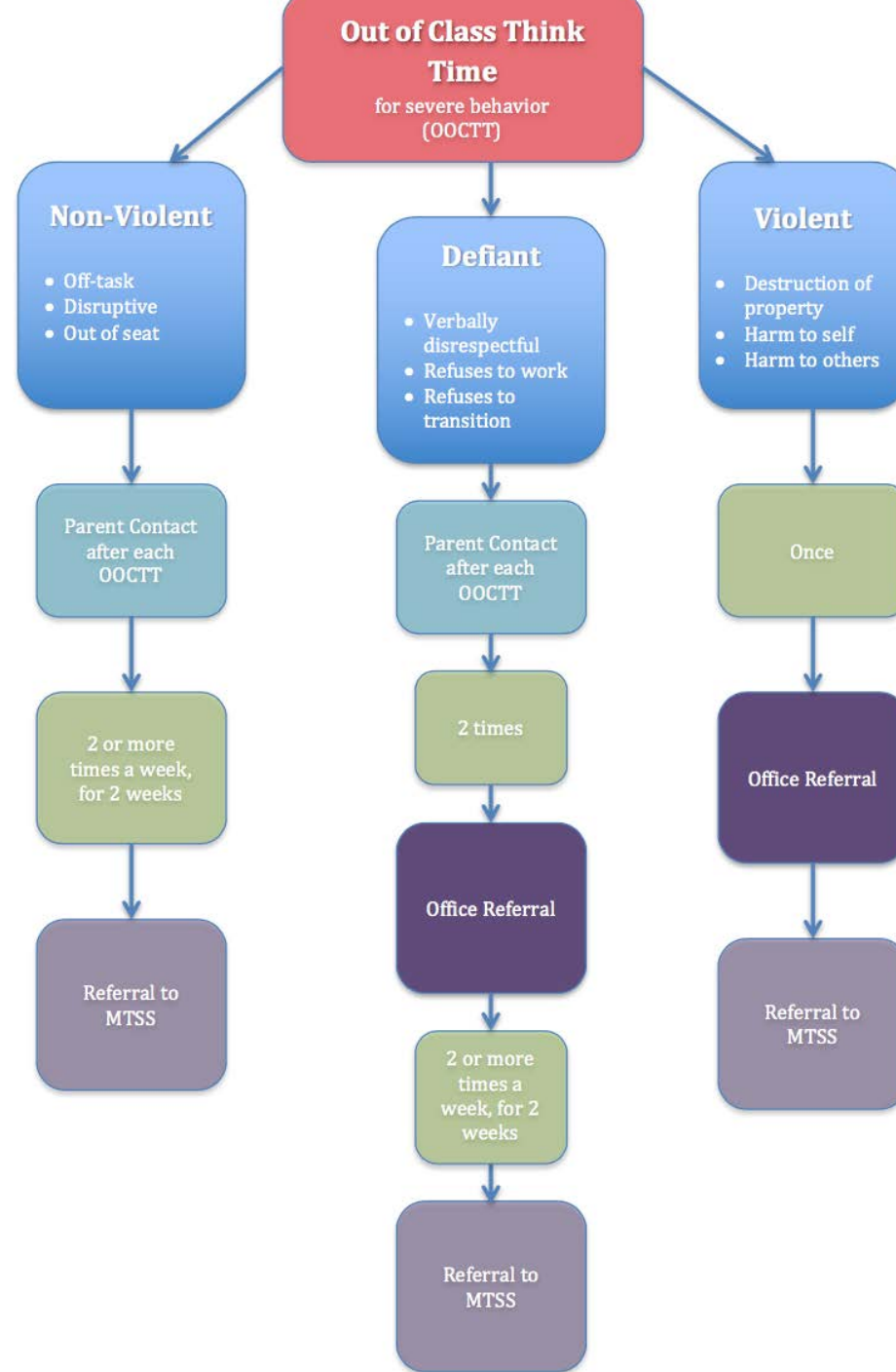
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Can Do/Won't Do Assessment completed and attached

If receiving academic supports, Plan(s), Log(s), and Graph(s) attached





# Tracking Students

- ▶ Excel spreadsheet
- ▶ Identifying information
- ▶ ACES, SEB (SDQ), and academic benchmark screener scores
- ▶ Interventions in place
- ▶ Recommendations and notes



# SEB Rainbow Report

First Name	Teacher	Social Behavior Risk	Academic Behavior Risk	Emotional Behavior Risk	Notes
Student 1	A	Risk	Risk	Risk	Self-Control with School Counselor
Student 2	A	Risk	Risk	Risk	Self-Control with School Counselor
Student 3	B	Risk	Risk	Risk	Self-Control with School Counselor
Student 4	B	Risk	No Risk	Risk	Friendship/social skills group-MHP
Student 5	B	Risk	No Risk	Risk	Friendship/social skills group-MHP
Student 6	C	Risk	Risk	Risk	Talk with teacher for more information
Student 7	C	Risk	Risk	Risk	Self-Control with School Counselor
Student 8	D	Risk	No Risk	Risk	Friendship/social skills group-MHP
Student 9	D	Risk	Risk	Risk	In Special Education



# Tier 2 Interventions

- ▶ Small group skills counseling
- ▶ Leadership opportunities
- ▶ Intervention in risk domains
  - ▶ Facilitate family engagement
  - ▶ Provide social work supports



# Tier 2 Decision Points

- ▶ When to move students to Tier 3?
  - ▶ Rainbow report
  - ▶ Severe incident
  - ▶ Chronic or abnormal truancy
  - ▶ Re-entry plan students
  - ▶ Students in criminal justice system
  - ▶ Counselor referral





# Tier 3 Interventions

- ▶ Functional behavior assessment
- ▶ Individual behavior intervention program
- ▶ Short term one-on-one counseling on campus
- ▶ Connect family to more intensive wrap around community supports
- ▶ Increase time in class
- ▶ Reduce threats to self and others

# Iterative Reflection

- ▶ At minimum each benchmark period
- ▶ Continuous Improvement Model
  - ▶ Implement
  - ▶ Review
  - ▶ Review
  - ▶ Repeat



# MOVING FORWARD TOGETHER

## State Level

- ▶ School Psychologist Ratio Improvement Plan (SPRIP)
- ▶ Multi-Tiered Systems of Support (MTSS) for Social-Emotional Behavioral (SEB) Health.

## District Level

- ▶ Implement a MTSS SEB program, such as *Project Healthy Minds*
- ▶ Create new positions specifically for psychological assistants
- ▶ Make school psychologist hiring and pay packages more competitive
- ▶ Fill the existing 19 vacant CCSD school psychologist positions

# Thank You

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