# Shrewsbury Public Schools Mental Health & Counseling

March 29, 2023



# Agenda Items:

Current Trends
Clinical Department Overview
District Data
Mental Health / SEL Screeners
Social, Emotional and Behavioral Academy
Training Highlights
Future Work / Recommendations



#### SHS Regional Youth Health Survey (RYHS) Data (2021 report): During the 12 months before the survey

**<u>38%</u>** felt so sad or hopeless almost every day for 2 or more weeks in a row that they stopped doing some usual activities;

- 22% females vs 50% males;
- 32% and 35% for Asian and White students, respectively as compared with 46% African American, 46% Multi-racial, 55% Hispanic and, 53% 'Other'

**<u>17%</u>** had seriously considered attempting suicide;

- 12% females vs 21% males;
- 15% white students as compared to ≥18% students of color

**<u>11%</u>** had made a plan about how they would attempt suicide;

- 8% females vs 14% males;
- 9% white students as compared to 11%
   Asian, 12% African-American, 17%
   Hispanic, 16% Multi-racial and 13% 'Other'

<u>5%</u> had actually attempted suicide one or more times

**<u>2%</u>** had made a suicide attempt resulting in an injury, poisoning, or overdose that had to be treated by a doctor or nurse

# SPS Clinical Department

#### **SPS** Clinical Department

#### School Psychologists (12):

Special Ed testing/evaluations.

1:1 counseling, groups.

Care coordination/collateral contact.

Crisis management.

Oversight of BSP.

Referrals.

#### <u>School Adjustment</u> <u>Counselors (18):</u>

1:1 counseling, groups.

Crisis management.

Care coordination/collateral contact.

Case consultation.

Referrals.

Oversight of BSP.

#### **District Social Worker (1):**

Foster Care Point of Contact.

**McKinney Vento** 

Care coordination/collateral contact.

Referrals.

Food insecurity.

Clothing needs.

#### Clinical Coordinator (4):

FBA

Clinical consultation for student behavior.

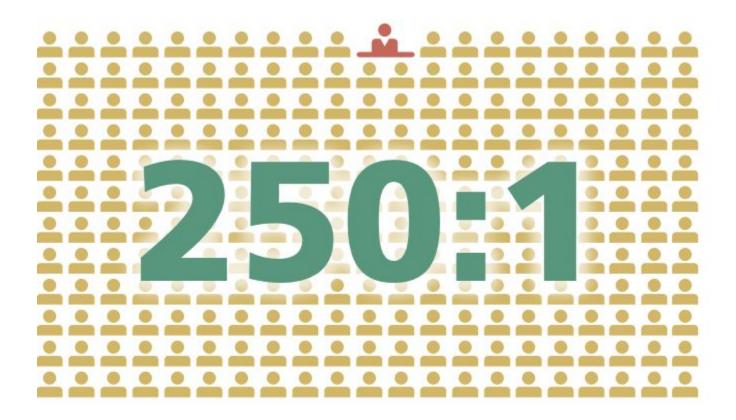
Clinical consultation for classroom management.

Development of Behavior Intervention Plans.

Care coordination/collateral contact.

Crisis management.

SPS Clinical Department Organizational Chart



Building:	Parker Road	Beal	Paton	Floral	Spring	Coolidge	SMS	Oak	SHS
Staff:	Psych	2 Psych 1 SAC	1 Psych 1 SAC	2 Psych 1 SAC	1 Psych 1 SAC	1 Psych 1 SAC	1 Psych 3 SAC*	1 Psych 4 SAC*	2 Psych 4 SAC*
Enrollment:	203	609	291	519	308	247	948	944	1823
Ratio Student:Staff	203:1	203:1	145:1	173:1	154:1	124:1	237:1	189:1	303:1

\*does not include BRYT clinicians

# District Mental Health Data

Collected through 3/2023

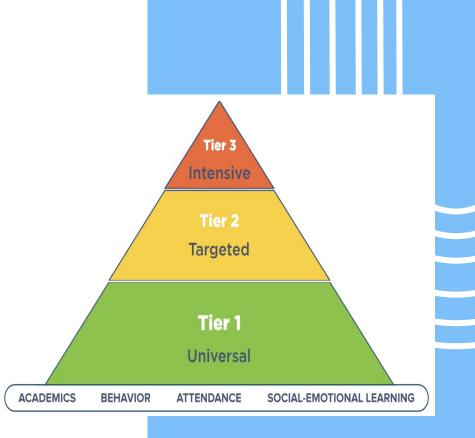
# Behavioral Health Multi-Tiered Systems of Support (MTSS)

# **SEL/MH MTSS**

Tier 3 = intensive support (1-5%)

Tier 2 = targeted supports (5-15%)

Tier 1 = universal supports (80+%)





### Tier 1 = Universal

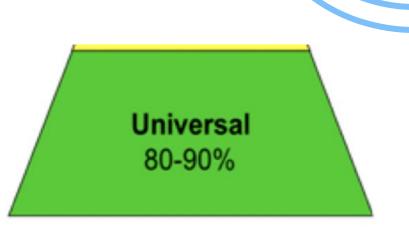
For All Students

**CASEL** Standards

Integrated into daily classroom life

**Examples:** CharacterStrong, Advisory, Universal Mental Health Screeners, Panorama SEL Screeners

Who is responsible: everyone!



# Tier 2 = Targeted Interventions

Targeted interventions for students identified via EIT, SST, attendance, observable behavior, discipline reports or other data points.

IEP, 504, or Gen Ed. Students

**Examples:** small therapeutic solution focused targeted groups (CBT, DBT, Mindfulness, social skills, emotional regulation)), TACOS lunches at SHS (Taking Advantage of Comfort Opportunities), drop in/as needed counseling support, short term counseling (less than a trimester).

*Who is responsible:* Counselors (SHS), School Adjustment Counselors, and School Psychologists.



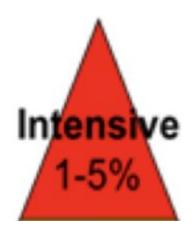
### Tier 3 = Intensive Interventions

Most at risk students.

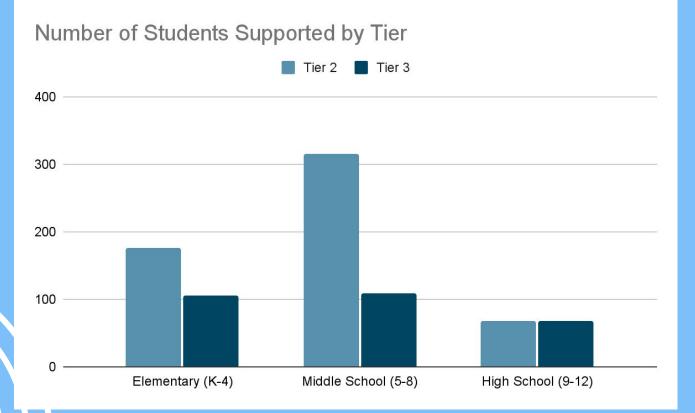
IEP, 504, or Gen. Ed Students

**Examples:** 1:1 longer term counseling, long term skill deficit targeted groups, intensive case management, BRYT programs, Clinical Coordinator Support.

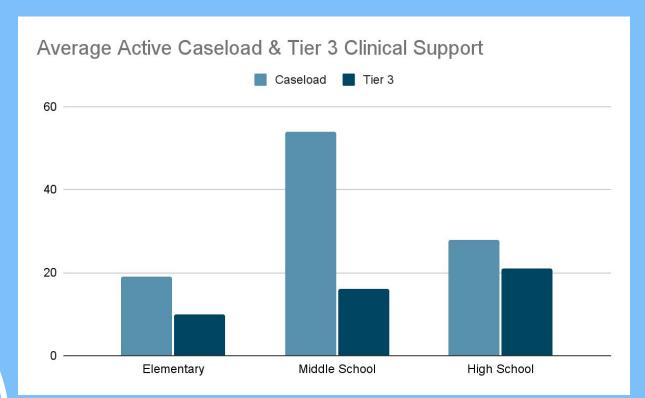
**Who is responsible:** School Adjustment Counselors, School Psychologists, District Social Worker



#### Tier 2 / Tier 3 Support by Level School Adjustment Counselors & Psychologists



#### Active Caseloads (Tier 3 Support) by Level School Adjustment Counselors & Psychologists



# BRYT:

### Bridging Resilient Youth in Transitions

Programs offered at SMS/Oak (with shared clinical coordinator, two dedicated academic coordinators) & SHS (full time clinical coordinator, full time academic coordinator).

Support: Clinical, Academic, Family Engagement, and Care Coordination.

#### BRYT SMS/OAK

#### (as of 3/15/2022)

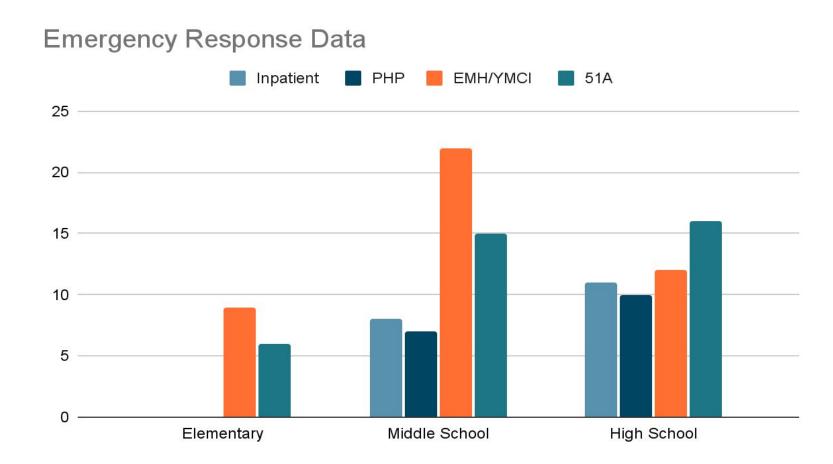
	# of active students:	Total Referrals (to date)*	% referred for mental health	% referred for school refusal	% referred for functionally absent	% referred due to medically related absence
Oak (7-8)	6	20 2 referred twice	50%	5%	25%	10%
SMS (5-6)	5	9 2 referred twice	33%	0%	44%	0%

#### **BRYT SHS** Data

#### (mid year data)

# of active students:	# of students accessing the program	# referred for concussio ns	# referred for medical (surgery, extended illness)	% referred for mental health	% admission to preventative	% re-entry from absence
19	48	10	6	68%	53%	47%

### **Emergency Response Services**



**PHP:** Partial Hospitalization. **EMH/YMCI:** Emergency Mental Health/Youth Mobile Crisis Intervention **51A:** Mandated report to DCF due to suspected abuse and/or neglect.

#### **Clinical Coordinators**

The **Clinical Coordinators** serve as district consults to support staff in the implementation of evidence-based behavioral strategies and prevention interventions to support struggling students more successfully engage in learning. Interventions may include offering classroom management strategies and resources including appropriate progress monitoring tools, completing an observation or follow up consultation.

# **Clinical Coordinator Data**

*To date 3/2023* 

Referrals: <u>37</u>	<mark>Active Caseload (Tier 3 Support): <u>65</u></mark>
PK-4: <b>17</b>	РК-4: <u><b>29</b></u>
5-8: <u><b>14</b></u>	5-12: <u><b>36</b></u>
9-12+: <b>6</b>	

#### **Clinical Rounds**

Clinical consultation 2x monthly with Dr. Kim Kusiak and UMass Fellow.

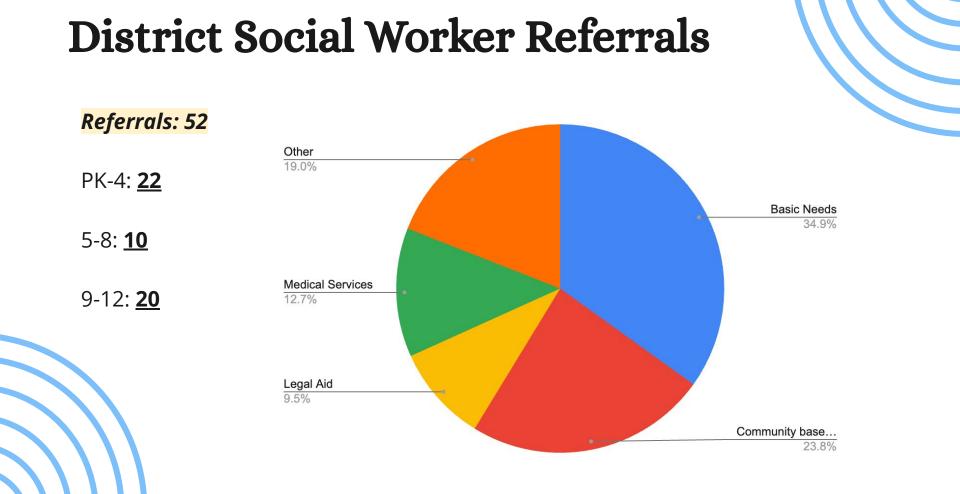
16 Total Referrals

4 requiring follow up rounds



#### District Social Worker

The role of the district **Social Worker** is to provide strategies and prevention intervention, referrals, and wraparound support. This may include issues surrounding substance abuse, physical, emotional, and sexual abuse or neglect concerns, foster care, violence, health, access to healthcare, and changes in the family system (e.g., food insecurity, homelessness). The social worker is also the designated point of contact for foster care students and McKinney-Vento Liaison.

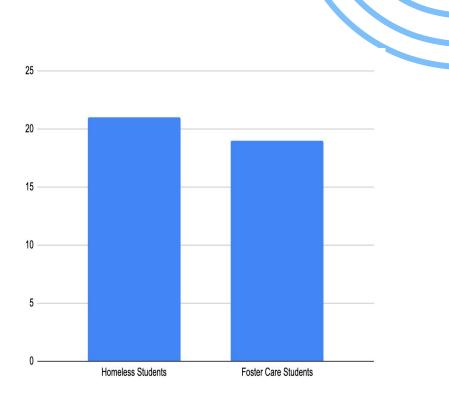


### Foster Care and Homeless Students

SPS has **21** students in foster care and **19** students known to be homeless, as defined by the Department of Elementary and Secondary Education.

Students who are in 24-hour out-of-home care, away from their parent(s)/legal guardian(s) and for whom DCF has care and placement responsibilities

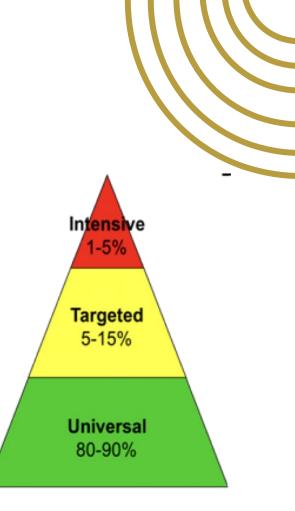
Students who lack fixed regular and adequate nighttime residence including those who are sharing the housing of others due to economic hardship, loss of housing or similar reason.



# Universal Mental Health Screeners

# Purpose:Why do them?

- Provide multi-tiered systems of social, emotional, and mental health services and support.
- SEL vs. Mental Health Supports
- Identify AT RISK students for anxiety = TIER 1 (Universal).
- Provide resources to students.
- Connect students to trusted adult(s) in the building.
- Break stigma surrounding mental health.
- Many organizations that endorse universal mental health screeners in public school settings: SAMHSA, ASCA, NCSMH, SSWAA, NASP



# **Procedure:**

COST = FREE for the district

Letters sent home to parent/guardians with the option to OPT their child out.

Information gathered will be confidential, but not anonymous as elevated scores will require follow up by clinical staff.

Parent/guardians will be notified in the event of a safety concern. Student or parent/guardians have the right to reach out to clinical staff to review scores (even if they do not "screen in".

Follow up recommendations may include:

- Introduce/reinforce coping strategies
- Encourage student to continue utilizing out of school supports.
- Help the student identify trusted adults in the building.
- Provide information about INTERFACE or Mass Behavioral Health Helpline.
- Schedule follow up with school counselor
  - Tier 2 group support.

	РК	К	1	2	3	4	5	6	7	8	9	10	11	12
SBIRT/ CRAFFT														
SOS/ BSAD								SY 23-24						
GAD-7									SPRING 2023					
PSWQ-C						TBD								
PANORAMA: STUDENT SEL														

CRAFFT: adolescent substance abuse

BSAD: brief screen for adolescent depression

GAD-7: generalized anxiety symptom screener

PSWQ-C: penn state worry questionnaire for children

PANORAMA STUDENT SEL: social awareness, self-efficacy, emotional regulation

### Social Emotional Behavioral (SEB) Academy



# **SEB: SEL/MH Track**

3 Year Commitment

Team members include: School Adjustment Counselors, Psychologists, Gen. Ed Teachers, Special Ed. Teachers, Directors, Jane Lizotte, Meg Bartlett, and Meg Belsito.

Monthly Meetings as team internally.

Meetings with Technical Assistant (Educational Development Center) several times throughout the year.

Peer Support Calls / Webinars on various topics: Equity Approach to SEL, Integrating SEL into Academic Instruction, Culturally Responsive SEL Practices

Completion of the following tools: Self Assessment, MTSS Inventory, & Data Inventory

Next Step: Prioritize Action Plan



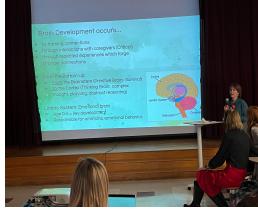
Trauma Informed Education Training

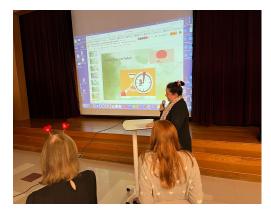
10/7/2022: Paraprofessional PD Day

2/14/2023: Elementary Faculty Meetings











# Mental Health & Athletics/ After School Activities

SHS Clinical Staff, Athletic Director, and building Administration partnered to develop after school mental health protocol for coaches and after school activity leaders.

Senior student-athlete Alexa Johnson presented to coaches at Spring athletic department meeting and at Spring parent/athlete night.



#### **Community Partnerships**



#### **Recommendations:**

Universal Mental Health & SEL Screeners K-12

Strengthen Social, Emotional, and Behavioral Health MTSS

Provide additional Trauma Informed Training Opportunities

Universal policies and procedures for discipline, truancy, and chronic absenteeism.

Universal policies and procedures for mental health crisis management.

Pilot electronic health record systems for clinical department.

#### Reminders to the Community

Please monitor any behavioral changes you may observe with your loved ones. This may include the following warning signs.

- Severe sadness or moodiness. Long-lasting sadness, mood swings, and unexpected rage
- Hopelessness
- Withdrawal/ Feeling Isolated
- Changes in personality or appearance
- Dangerous or self-harm Behavior
- Recent Trauma or Life Crisis
- Talking about being a burden to others
- Increasing the use of alcohol and/or drugs
- Acting Anxious, agitated, or reckless
- Looking for a way to end their lives, such as searching online for methods
  - Visiting or calling people to say goodbye
  - Giving away prized possessions

### Immediate Help is Available

If you or someone you know is experiencing a mental health emergency please access community supports.

- Youth Mobile Crisis Intervention Worcester: 1-866-549-2142
- Emergency Mental Health Services (EMH): 1-508-334-3562;

UMass Memorial Hospital

National Suicide Prvention Lifeline: 1-800-273-8255

July 1st, dial 988

- Crisis Text Line- text **HOME** to 741741
- <u>Massachusetts.networkofcare.org/mh/</u> is a resource directory that is searchable by zip code and type of service needed
- William James Interface Referral interface.williamjames.edu/community/shrewsbury-public-school-students
- Handholdma.org Mass based website with information around Children MH
  - Shrewsbury PS Well-Being Guide <u>schools.shrewsburyma.gov/district/well-being-guide</u>