Continuing Education Credits

In support of improving patient care, this activity has been planned and implemented by the Ohio School-Based Health Alliance and Moses/Weitzman Health System, Inc. and its Weitzman Institute and is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This series is intended for Dentists, Nurses, Nurse Practitioners, Physicians, Physician Assistants, Psychologists, and Social Workers.

Please complete the post-session survey and claim your post-session certificate on the Weitzman Education Platform after today's session. OSBHA will be providing the instructions on claiming your credits.



Disclosures

- With respect to the following presentation, there have been no relevant (direct or indirect) financial relationships between the presenters or other activity planners and any ineligible company in the past 24 months which would be considered a relevant financial relationship.
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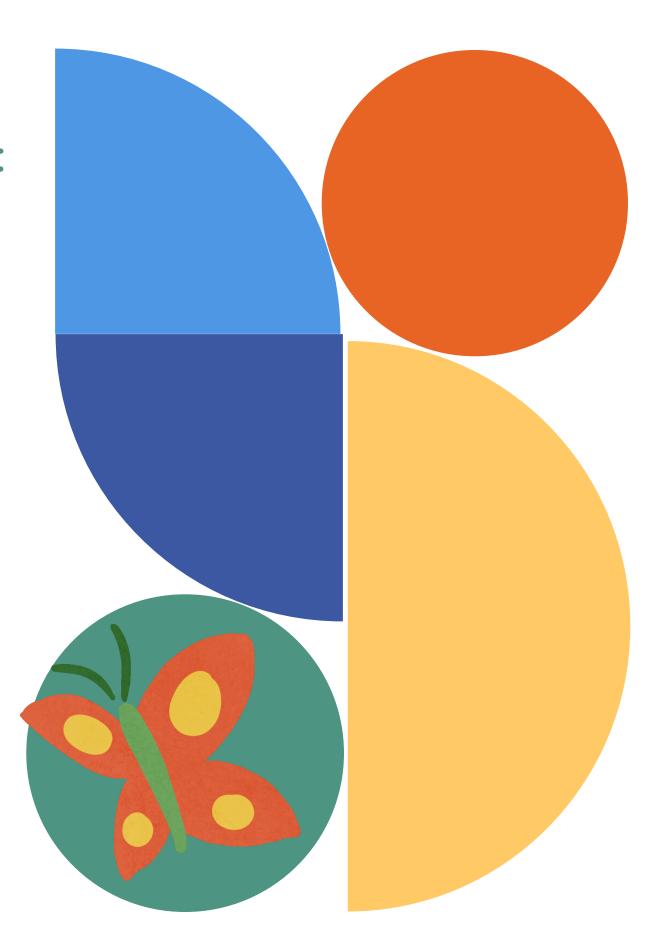
Tackling the pediatric behavioral health crisis:

Bene fits of Developing a School

Based Mental Health Program.

Cynthia Price MEd, LPCC - S





Who am



Who are

you?

What we'll discuss this afternoon





Why set up a school based mental health program



How and where to begin



Lessons learned the past 15 years



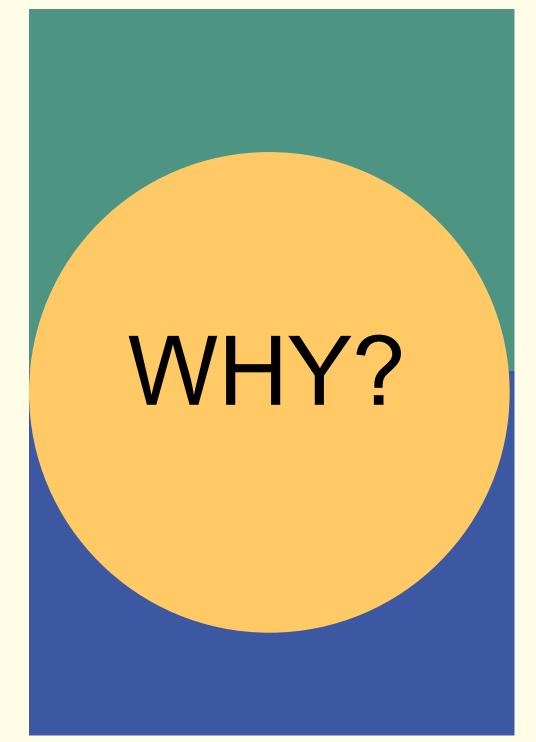
Sustainability



Questions



To improve access to comprehensive, integrated health services through school -based health care to advance equity and improve health and education outcomes for students, their families, and communities.



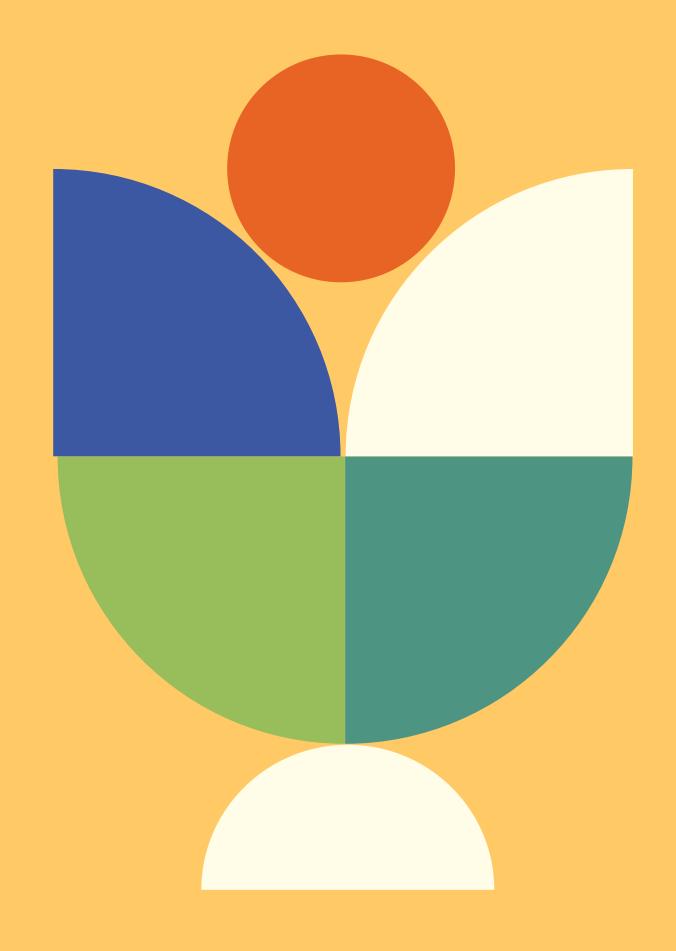


Our Mission is to provide access to affordable, high quality, integrated health care for all.

Access:

Permission, liberty, or ablity to enter, approach, or pass to and from a place or to approach or communicate with a person or thing *

Access removes Barriers



Barriers to mental health services:

Transportation

• Communication

• Cultural/comfort level

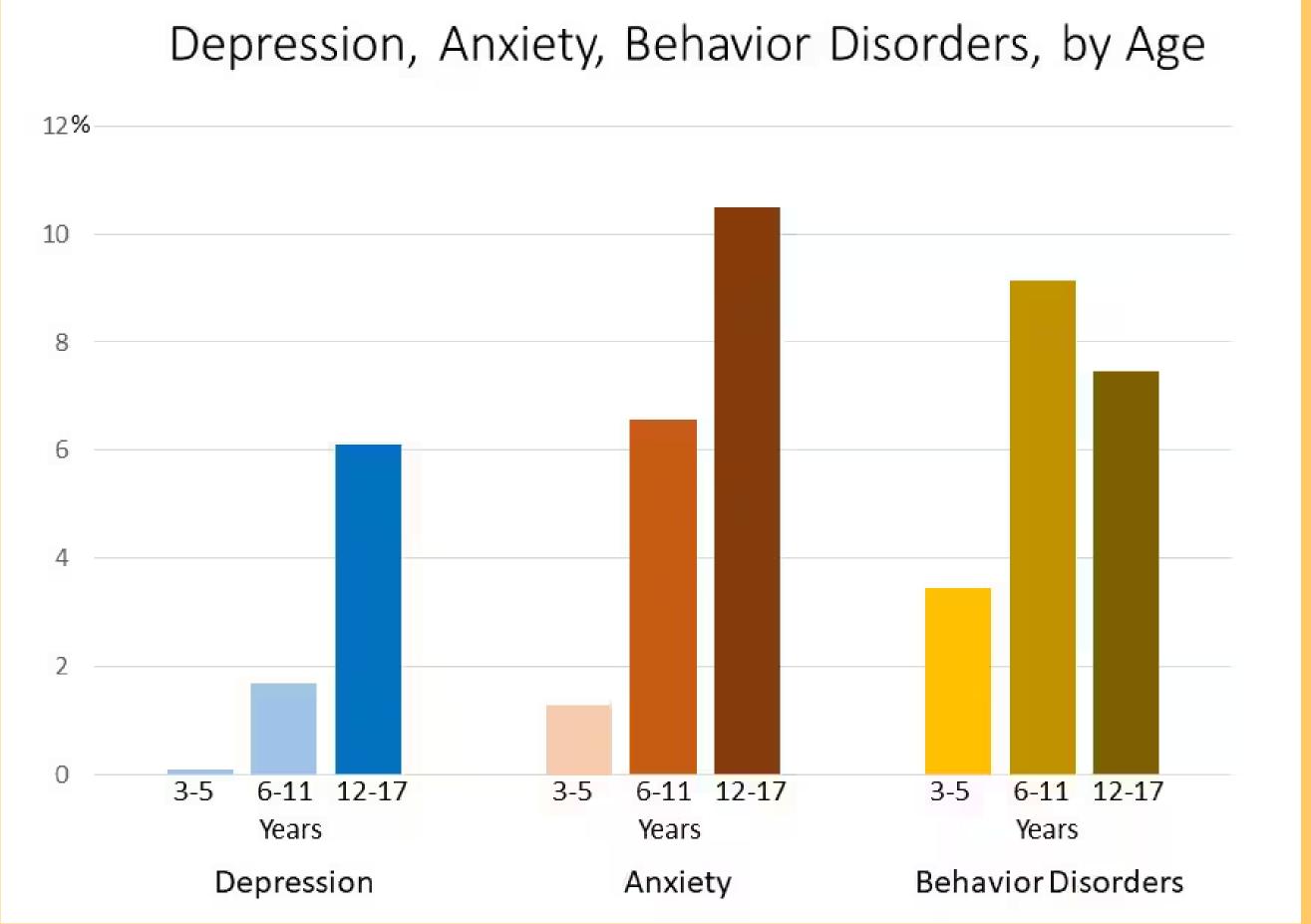
• Financial

• Literacy



Statistics

- In 2018-2019: 1 in 7 children ages 3 to 17 (13%) had a current, diagnosed mental or behavioral health condition.
- Anxiety problems, behavior disorders, and depression are the most commonly diagnosed disorders in children. Based on US data from 2021–2022
- 10 % of children ages 3-17 had current, diagnosed anxiety (9 % of males and 11% of females)
- 7% of children ages 3-17 had current, diagnosed behavior disorders (10% of males and 5% of females)
- 4% of children ages 3-17 had current, diagnosed depression (3% of males and 6% of females)
- Some of these mental health conditions commonly occur together. In 2018–2019, among children with a current mental health condition, more than 1 in 3 (37%) had two or more conditions https://www.cdc.gov/children -mental -health/data -research/index.html



In 2021 and 2022, 19.0% of US children aged 2 to 8 years had 1 or more mental disorders. Of these children, 9.1% reported not receiving any needed health care in the previous 12 months, and of these, 45.8% reported not receiving mental health services when needed. The primary reasons for not receiving needed health care were problems getting an appointment (72.1%), issues related to cost (39.3%), and services needed not being available in the area (38.5%).







Meng JF, Wiznitzer E. Factors Associated With Not Receiving Mental Health Services Among Children With A Mental Disorder in E Childhood in the United States, 2021 —2022. Prev Chronic Dis 2024;21:240126. DOI: http://dx.doi.org/10.5888/pcd21.240126

How?

Partnership and Collaboration



From small beginnings...



of mental health support



Available/adabtable space



Point Person to coordinate referrals in the beginning

Mental Health Agency:



Staff member to pilot program



Flexibility and Adaptability



Good independent worker

How do you determine need?



- Principals
- Dean of Students

School Counselors

- Mental Health Provider: Who struggles with access and barriers?
- Collaborative Agencies :
 Juvenile Court, Children Services



Referrals



Elements needed:

- Referral Page/Packet
- ROI for school
- Informational page









School Based Therapeutic Services

Hopewell Health Centers Inc. (740) 753-6240

Our Mission

To ensure every student has the supports and strategies needed to attain his or her potential in school and life. To provide mental health services, work with school personnel and families so that each student in our care has opportunities for growth mentally, emotionally, socially and spiritually,

making way for academic and life successes.

- 1. To increase accessibility to services for children and families in a non-stigmatizing
- 2. To provide trauma-informed mental health programs that address mental health Early intervention and prevention for school and the community.
- 3. To provide consultation for teachers and other school staff on mental health issues.
 4. To increase partnerships within the school and the community.

Our Servic Individual, Family and Group trauma-informed counseling and case management for enrolled youth Crisis Intervention for emergency situations Staff Development Workshops	Consultations with School Staff Referral to Community Services Advocacy and support at IEP and other parent-teacher meetings
Typical Referrals Might Include Childr Problems adjusting to major changes Traumatic experiences Disruptive behaviors Aggression or violence Questions? Please contact Cindy	Attention Deficit/Hyperactivity Disorder (ADHD) Anxiety disorders or extreme worry Deep sadness or depression

cindyprice@nybucks.org.







Student Mental Health & Counseling Referral Form

Student Information

Student Name:		
Date of Birth: Grade Level:		_
Address:		_ Home
Phone: Cell Phone:	Parent/Guardian:	
Is student engaged in counseling services with another	YES NO	
agency?		
If yes, agency name:		
School Referral Information		
Referral School/Staff Member:		School
Phone: Location:	Schoo	ol Contact
Person:		
Release of Information Signed? YES NO Attached	YES	NO
?		
Referral Reason		
Date of referral:		
Student is seeking assistance with:		
Behavioral concerns Mental health concerns Academic co Suicidal thoughts/self-harm Peer/bullying issues Alcohol and/or co		
Other		
If other – please explainHHC_school_referral		
form_8/2022		

Referral Sources:

- Self/Family
- School staff: Principals, teachers, counselors, other
- PCP-fax
- NP at SBHC
- Mental Health Clinic
- Collaborative agencies: Juvenile Court, Children Services
- Speaking at school 'All Staff' each year

How to Grow

- Start small with what you already have
- Relationships: community awareness
- Interns
- Summer Hours: Yearround program
- Keep track of waiting list and refer overflow to clinic in times of growth
- Supplemental services: Medicaid Subcontracts
- Utilize School Counselors and Outreach/Community staff
- Grants
- Grant funded programs: Early Childhood Mental Health
- Expand into other schools: Elementary, Middle, High
- Screening programs: NCH Signs of Suicide (SOS)



Cyour mistakes it means you're

Lessons Learned:

- Relationships are everything: Two heads are better than one
- Be creative with providing support
- Build in educational moments for staff and students: this creates awareness and generates referrals
- Interns help build the program with no cost and can lead to staff that are already trained
- Instead of 'No', think 'How can this work and result in program
 - growth?'
- Be creative
- Flexibility is key

Sustainability 101



Relationships



Collaboration





Benefits

- Creates easy access to mental health services
- Removes barriers: transportation, financial, cultural, communication
- Improves communication and collaboration with the school
- Provides access to working with children 'in the moment'
- Provides opportunities to bill when someone is absent or cancels
- Coordination of care: SBHC, community partners at school
- Creates and enhances community awareness of mental health se
- Sustainability of services through completion of treatment goals



There is no such thing as too small!!



Questions





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