



Expanded School Mental Health in West Virginia

www.schoolmentalhealthwv.org

FEBRUARY 2012

Early Identification

Tool Kit #3

RECOMMENDATIONS FOR A SCHOOL-WIDE FOUNDATION OF LEARNING SUPPORTS:

“A systematic and universal mechanism to identify students at risk for academic failure, dropping out, substance misuse, suicide and other social and family needs”

West Virginia Expanded School Mental Health Steering Team, 2011

Screening for Mental Health and Substance Misuse

“Screening, as part of a coordinated and comprehensive school mental health program, complements the mission of schools, identifies youth in need, links them to effective services and contributes to positive educational outcomes. . . . Youth with internalizing disorders such as depression, anxiety or suicide ideation are not as easily identified as those with acting-out or externalizing disorders. . . . For these reasons, formal screening . . . that detects depression and suicide ideation are recommended.”¹

Mental health screening in schools is not without controversy. Some perceive it as requiring all students to be screened, as government intrusion or a violation of a family’s right to privacy. In fact, mandatory universal screening has never been recommended. Screening should require active informed consent of parents and students, and should only be undertaken as part of a comprehensive mental health program that can address identified needs. The U.S. Preventive Services Taskforce recommends “screening of adolescents 12-18 years for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy and follow up.

Evidence is insufficient to warrant a recommendation to screen younger children.”

Behavioral health screening programs should adhere to the following principles:

- ◆ Screening must be voluntary and with parent consent
- ◆ Confidentiality must be protected
- ◆ Screening staff must be qualified and trained
- ◆ Mechanisms should be in place to address any immediate needs identified through screening
- ◆ Youth needing further evaluation should be offered a referral to an appropriate mental health provider.
- ◆ Parents of identified youth must be informed of screening results and referral recommendations and offered assistance to secure an appointment for further evaluation

Screening for Academic Failure and Dropping Out

The Everyone Graduates Center out of Johns Hopkins University has discovered the top three indicators that have the highest predictability of identifying students at risk as early as the sixth grade: **attendance**, **behavior** and **course failure**.

DEFINITION: “Expanded school mental health” refers to programs that build on core services typically provided by schools. It is a framework that:

- ◆ includes the full continuum of prevention, early intervention and treatment
- ◆ serves all students
- ◆ emphasizes shared responsibility between schools, mental health providers and other community partners

By setting up a system for tracking these indicators, known as the “ABC’s,” schools can readily identify students needing interventions and tailor those interventions to individual student needs.

For sixth graders:

- Below 90% attendance rate
- One or more suspensions
- Two or more semester course failures
- Failing math
- Failing English/Language Arts

For ninth graders:

- Below 85% attendance rate
- One or more suspensions
- One or more semester course failures
- Failing math
- Failing English

Early Identification

West Virginia Resources

- **WV Adolescent Suicide Prevention and Early Intervention Project (ASPEN)**—will provide training and resources for students and school personnel. Several curricula are offered depending upon interests, needs and audience. (www.wvaspen.com)
- **WVDE Student Needs Assessment Survey—High School:** <http://wvde.state.wv.us/forms/counseling-assessment/>
- **WVDE Student Needs Assessment—Middle School:** <http://wvde.state.wv.us/forms/counseling-assessment/?level=m>
- **Free Screening Tools**—currently used in some WV schools include the CAGE, the CRAFFT and the Personal Experience Inventory. The WVDHHR’s project - Screening, Brief Intervention, Referral and Treatment Project (SBIRT) – will provide training on screening for substance and alcohol misuse: Email James.A.Matney@WV.GOV

General Resources

- **Suicide Prevention and Screening—including Signs of Suicide**, a school based awareness, education and screening program: <http://www.mentalhealthscreening.org>
- **The Center for School Mental Health—**
 - Suicide Prevention and Schools Guide:** <http://csmh.umaryland.edu/resources/CSMH/suicidepreventionresources7.pdf>
 - Summary of Free Assessment Measures:** <http://www.schoolmentalhealth.org/Resources/Clin/QAIRsrc/Free%20Assessments%202.3.09.pdf>
- **Substance Use Screening and Assessment Database:** <http://lib.adai.washington.edu/instruments/>
- **The Texas Guide to School Health Programs** provides recommendations regarding screening in chapter 6, Mental Health in Schools: <http://www.dshs.state.tx.us/schoolhealth/pgtoc.shtm>
- **Teen Alcohol Risk Screening Guide:** <http://pubs.niaaa.nih.gov/publications/Practitioner/YouthGuide/YouthGuideOrderForm.htm>

REFERENCE

¹Weist, et al, Mental Health Screening in Schools, Journal of School Health, Feb 2007

The purpose of this series of information briefs is to provide a common framework and recommendations to assist schools and community mental health providers to more effectively develop a comprehensive approach to school mental health that is consistent with current West Virginia Department of Education policies.




These recommendations and resources have been reviewed and approved by West Virginia’s Expanded School Mental Health Steering Team. For more information contact info@schoolmentalhealthwv.org

For more information visit www.schoolmentalhealthwv.org

This information brief was prepared by the

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Bureau for Behavioral Health and Health Facilities