

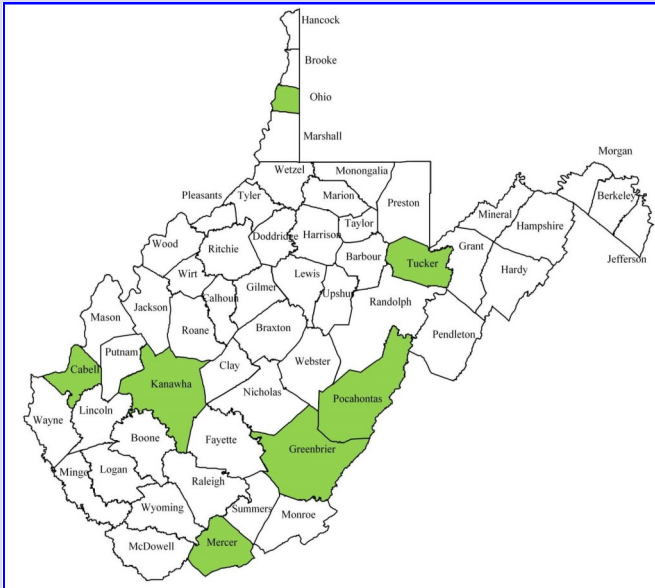


## Dashboard:

# West Virginia Expanded School Mental Health Pilot Programs

This report summarizes the Expanded School Mental Health programs funded by the West Virginia Bureau for Behavioral Health and Health Facilities, Division of Child & Adolescent Mental Health, from July 2012 through June 2013—the first full year of implementation.

## Program Summary



- Fifteen schools participated: five elementary, six middle, three high schools, and one alternative school.
- Staff include eleven Masters-level licensed clinicians (8.5 FTE), one mental health educator and three case managers.
- Total student enrollment in the 15 schools is 4,429: 81% Caucasian; 9% Black/African Ancestry; 9% Biracial/Multiracial. Ages served were from 5 years to 19 years.
- Most prevalent presenting problems: Attention Disorders (44), At Risk (27), Mood Disorders (18), Family Relationship Problems (15), Abuse/Neglect (14).
- All programs maintained services during the summer.

The map on the left depicts the counties served by these programs.

## An Integrated Approach

Expanded School Mental Health (ESMH) is an integrated approach that builds on core services typically provided by schools. It is a three-tiered framework that includes the full continuum of prevention, early intervention and treatment.

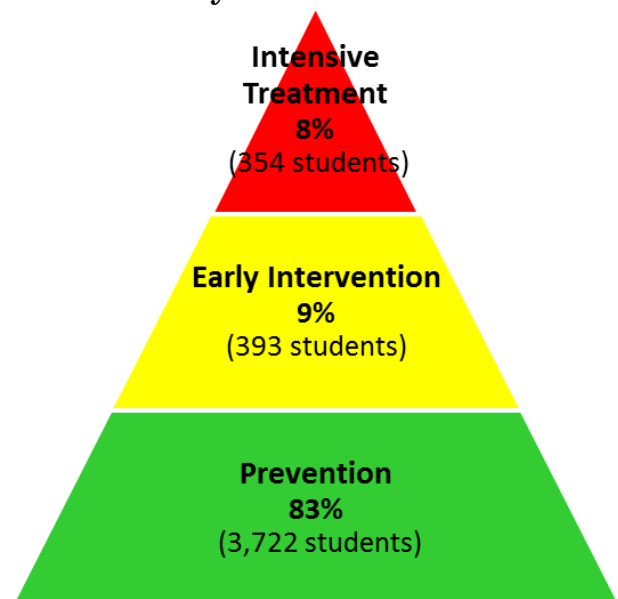
Four expected outcomes of this approach are:

- **Reduced barriers to learning**
- **Improved academic performance**
- **Improved attendance**
- **Improved school functioning/behavior**

The triangle on the right depicts the number of students served by tier between July 2012 and June 2013.

## Youth Receiving ESMH Services

July 2012-June 2013



West Virginia School Health  
Technical Assistance Center

For more information, please contact: [info@wvshtac.org](mailto:info@wvshtac.org)

[www.schoolmentalhealthwv.org](http://www.schoolmentalhealthwv.org)

# First Year Outcomes

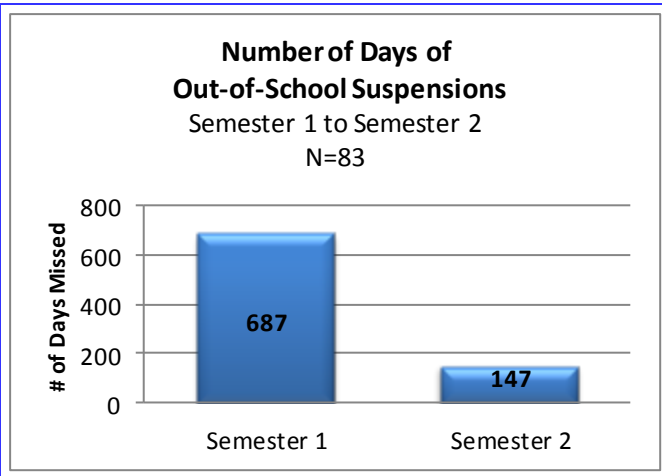
The following data represent students served through Tier 2 (early intervention services) and Tier 3 (intensive individual intervention services). Note: Outcome data for the Cabell County Alternative School are not reflected in the Behavior and Attendance charts because suspension and attendance data is not collected while the students are enrolled at the alternative school.

## Mental Health Symptoms

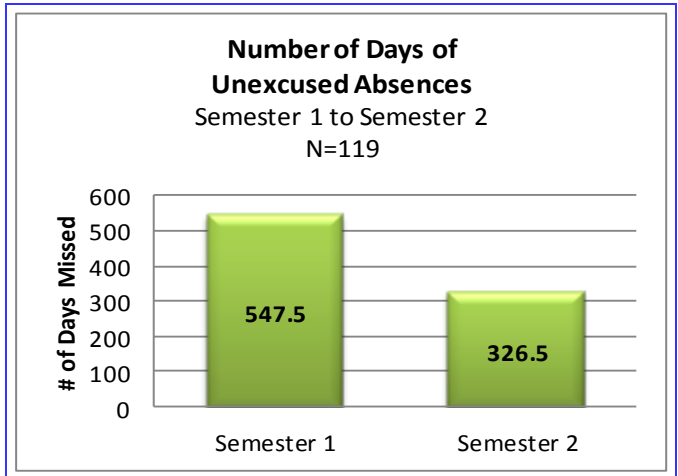
The Strengths and Difficulties Questionnaire (SDQ) was used to measure mental health symptoms. SDQs were completed at the start of services, with follow-up completed every 6 months until case closure.

**78% of the students improved or maintained their scores at follow-up**, which indicates that students were able to successfully remain in school and avoid more intensive services.

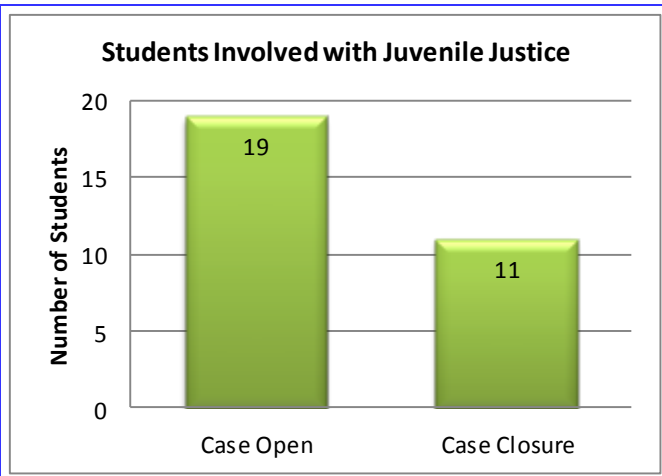
## Behavior



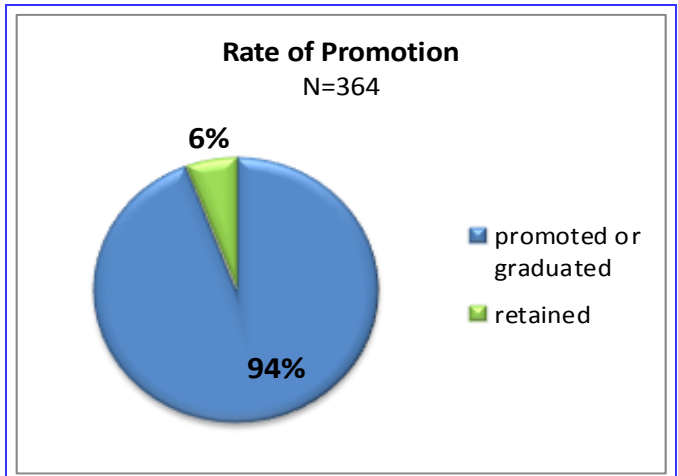
## Attendance



## Juvenile Justice Cases



## Rate of Promotion



## Success Story

*“Two students who participated in ESMH counseling since middle school have graduated this year with firm plans to attend college in the fall. Both students had IEPs with counseling as a part of their treatment plan. To support their transition to college, both students were referred to the Division of Rehabilitation Services, and will be served by that agency through their college career and into their first jobs. We are very proud of these young men and wish them every success in their endeavors.”*—Kay McCoy, ESMH Therapist, Greenbrier West High School