



Statewide Approach to Supporting Mental & Behavioral Health

**Indiana Department of Education &
Riley Hospital
June 5, 2024**

ABOUT US



INDIANA
DEPARTMENT of
EDUCATION

Rebekah Frazer, M.S. LHMC Eligible

School Counseling Specialist, IDOE

Former school counselor and director, private practice mental health counselor, juvenile justice, group home mental health caseworker. ASCA member, ISCA member and Communications Committee Chair.



Michelle Clarke, M.S., NCC, LMHC Eligible

Director of Student, School and Family Engagement, IDOE

Former Educator/ School Counselor/ HS SC Director, state school counseling specialist, Indiana School Counselor Association Board Member



ABOUT US

Rachael Fisher

Administrative Director - Behavioral Health, Riley Children's Health

Twenty years of experience working with children and families in the field of child welfare and behavioral health. She has led an array of services to include a residential facility, emergency shelter, group home and comprehensive community-based services and programs.



Leslie Caliz, B. Ed

Project AWARE III Specialist, Indiana Department of Education

Former high school Spanish teacher, Bring Change to Mind club sponsor, and SEL curriculum specialist. Currently pursuing master's degree in Social Work.





TODAY'S AGENDA

Learn more about Indiana youth's current mental health

Learn how IDOE and Riley are partnering to improve access to preventative-based services to reduce the needs for higher care

Learn how Riley, in partnership with IDOE, will provide training for current and future behavioral health workforce and how they can be involved

Imagine Lucas Oil Stadium filled to the brim, standing room only.



Now imagine that same stadium filled three times....with Indiana kids, **our students**, who are struggling with anxiety, depression or suicidal thoughts.

This is the youth mental health and substance use disorder crisis we are facing in Indiana.

MENTAL HEALTH IN INDIANA

- Indiana is facing a *youth* **mental health** and **substance use disorder** crisis.
- Suicide is the **second leading cause of death** for Hoosiers between the ages of 10-34.
- 85% of the Hoosier population lives in **mental health shortage** areas.
- It is imperative that this crisis is addressed *urgently* through a statewide strategic plan.





CURRENT DATA

- **3 out of 10** Hoosier high school students reported their mental health was *not good* most of the time or always. (Indiana Youth Risk Behavior Survey)
- **31.6 per 10,000** Indiana adolescents ages 10-17 were hospitalized for *major depressive disorders*. (ISDH Epidemiology Resource Center)
- **52.4%** of Hoosier youth with a mental health condition *did not receive treatment or counseling* in 2019 and 2020. (National Survey of Children's Health)
- **22%** of high school girls and **12%** of high school boys *seriously considered* attempting suicide in the last year. (Indiana Youth Risk Behavior Survey)

IDOE's Commitment to Student Well- Being

SCHOOL'S ROLE IN MENTAL HEALTH



Help promote the mental health and well-being of students through education, prevention, and early intervention efforts.



Establish safe and supportive environments.



Connect students to caring adults and positive relationships



Link students and families to community mental health services



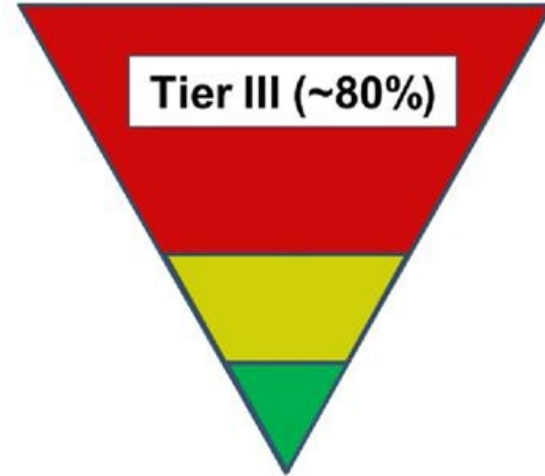
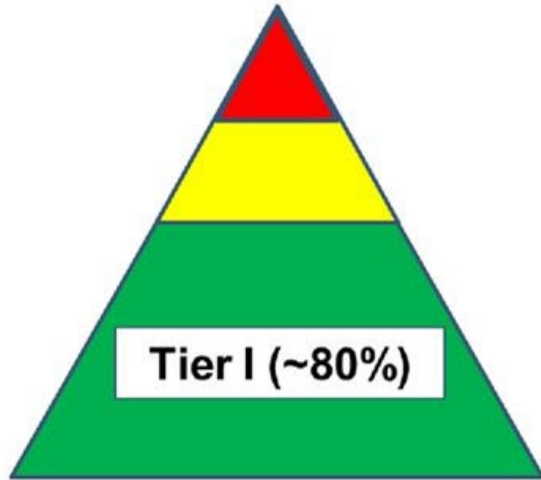
Promoting student well-being can improve student outcomes and academic success



Reach a large number of youth to lessen the impact of negative experiences

CDC Guide- Promoting Mental Health in Schools

INVERTED PYRAMID PROBLEM





Frameworks for Comprehensive School Mental Health Support

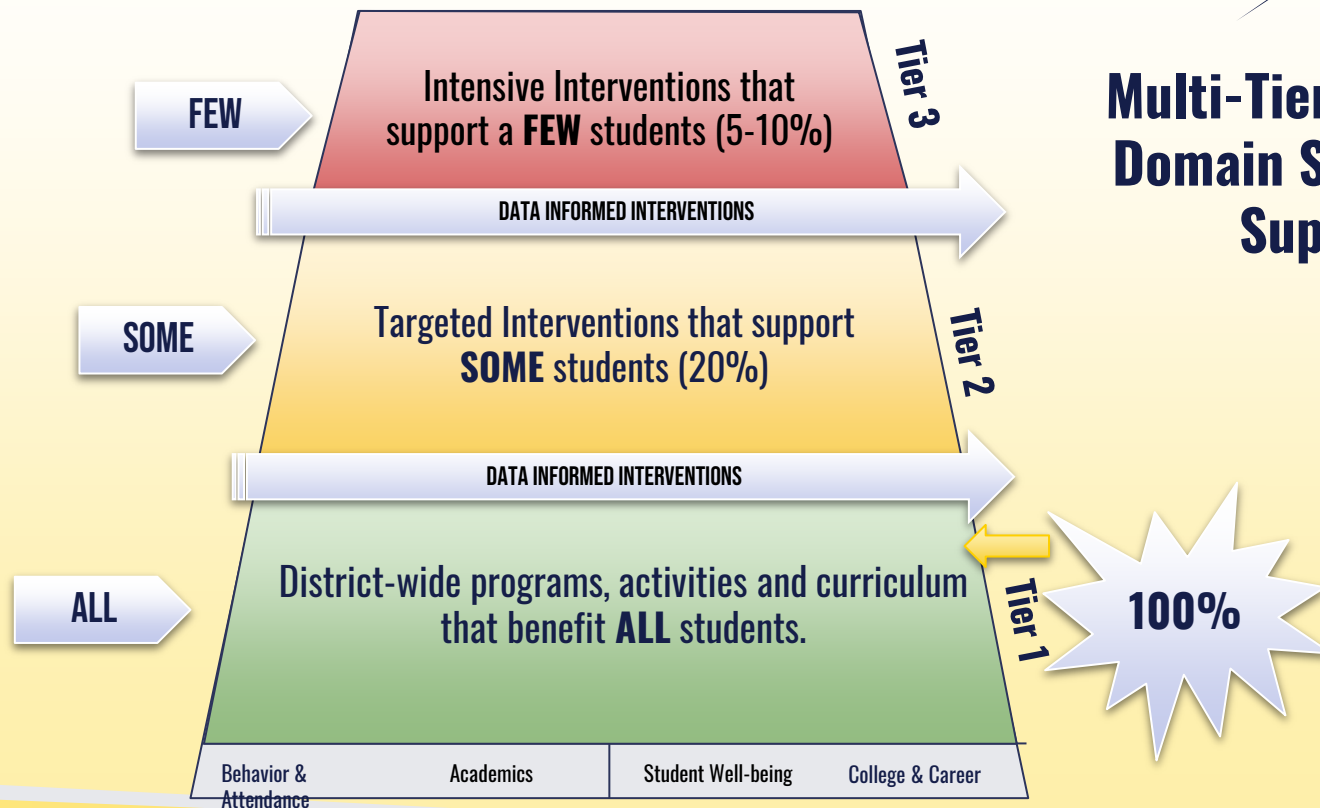
PROJECT AWARE

All Indiana Project AWARE sites are working, in **collaboration** with IDOE, DMHA, and other community partners, to create **sustainable** school-based mental health **systems and supports** for future **statewide** implementation.

- Increase access to programs, services, and supports
- Increase the capacity of school staff
- Increase early identification, interventions, and referral pathways
- Increase student/family awareness and engagement
- Reduce stigma associated with mental health needs



WHERE COMPREHENSIVE SCHOOL COUNSELING PROGRAMS FIT WITHIN A **WHOLE CHILD APPROACH**



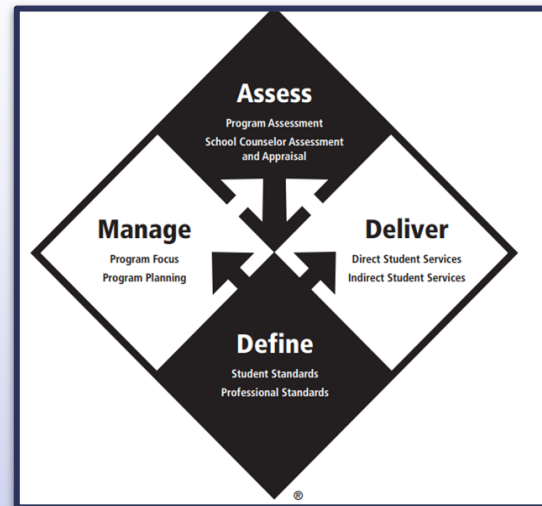
Multi-Tiered, Multi-Domain Systems of Support

COMPREHENSIVE SCHOOL COUNSELING MODEL

School counseling programs are **collaborative efforts** benefiting students, parents, teachers, administrators, and the overall community.

School counseling programs should be an **integral part** of students' daily educational environment, and school counselors should be **partners in student achievement**.

American School Counselor Association (ASCA) National Model



ASCA National Model
4th Edition

MODEL FOR COMPREHENSIVE SCHOOL COUNSELING

<https://carryingthetorch.org/>



INDIANA
DEPARTMENT of
EDUCATION
Comprehensive School
Counseling

Login

CARRYING THE TORCH TO STUDENT SUCCESS

ARE YOU INTERESTED IN:

- ✓ Having a school counseling program that's data-driven?
- ✓ Increasing satisfaction with your school counseling job?
- ✓ Increasing student proficiency rates in ELA & Math?
- ✓ Spending more time with students and less time on non-counseling duties?



IF YOU ANSWERED YES TO ANY OF THESE QUESTIONS:

It's time to start developing a comprehensive school counseling program through Indiana's new **Carrying the Torch to Student Success!**

Through this program, you will be provided with:

- *Optional Professional Development Opportunities*
- Implementation Resources/Guides
- An online Learning Platform for easy step-by-step guidance

For more information, read on! You can also contact Rebekah Frazer at rfrazer@doe.in.gov or (317) 233-5440.

Encourages school counseling programs to be data driven and ensure **positive student outcomes for ALL.**

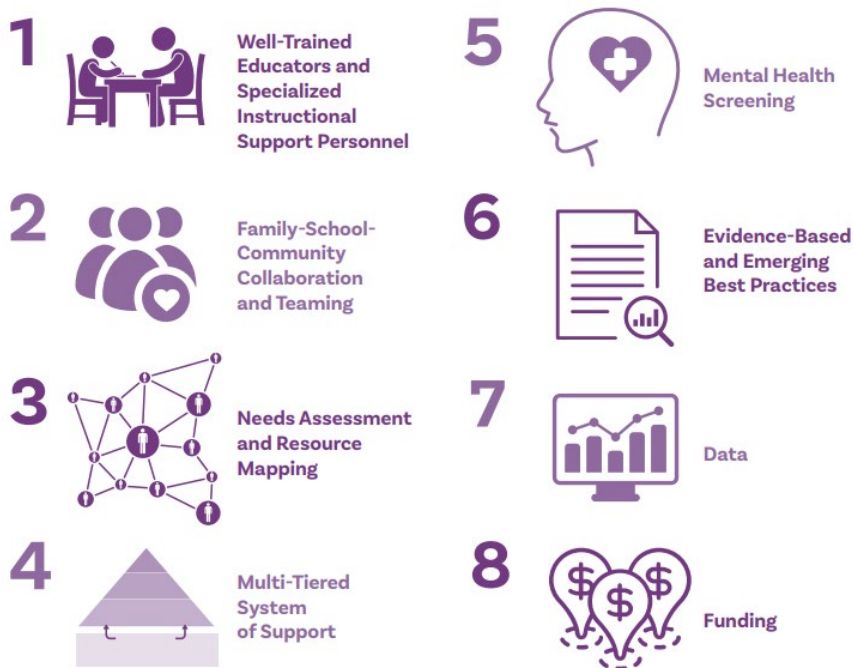
COMPREHENSIVE MENTAL HEALTH FRAMEWORK

The value of Comprehensive School Mental Health:

- Better academic outcomes
- Access to care
- Early identification and intervention
- Positive school climate and safety
- Youth, family, educator and peer engagement
- Continuum of services
- Better psychosocial outcomes

www.schoolmentalhealth.org

Figure 3. Core Features of a Comprehensive School Mental Health System





Riley's Commitment to Youth Mental & Behavioral Health

RILEY'S VISION



STRATEGIC PRIORITIES FOR INDIANA

Core strategies are the initiatives that will enable Indiana to effectively address and mitigate the growing mental health crisis, with a focus on prevention, early intervention, and ensuring access to the right levels of care across the state.

Enabling strategies are the critical infrastructure that Indiana must build to ensure that the core strategies can be implemented and sustained into the future.

Core Strategies

1

Expand early intervention and prevention resources

2

Increase access to outpatient services

3

Ensure safe interventions for kids in crisis

4

Ensure the right type and distribution of inpatient services

Enabling Strategies

1

Sustainable Funding

2

Expand the Workforce

PEDIATRIC BEHAVIORAL HEALTH GAPS AND OPPORTUNITIES

Workforce Development <ul style="list-style-type: none">Workforce supply is limited across the state across all types of roles., There is an opportunity to look at other types of roles, new degree programs to strengthen the workforce. <div>More high-quality people on the ground doing the work</div>	Advocacy & Awareness <ul style="list-style-type: none">Insurance coverage, quality and safety oversight, and financial sustainability is lacking in behavioral health. Stigma continues to be a major challenge. <div>A better infrastructure to sustain youth mental health programs and services.</div>	Prevention & Early Intervention <ul style="list-style-type: none">Parents, educators, and primary care physicians need to be better trained and equipped to recognize, manage, and treat behavioral health conditions before they escalate to more serious conditions. <div>Earlier access to services and better support for parents and educators to identify and manage conditions before they become a crisis. .</div>
Outpatient Access <ul style="list-style-type: none">Wait times to get into outpatient therapy is incredibly long and it's a challenging environment to navigate for families and referring providers. <div>Reduced wait times and easier, more equitable access to evidence-based outpatient services.</div>	Crisis Services <ul style="list-style-type: none">The emergency department is often the front door for patients in a mental health crisis, which often aren't equipped to manage patients safely and effectively. <div>Someone to call, someone to respond, and somewhere safe to go when a BH crisis does occur.</div>	Acute Care <ul style="list-style-type: none">Patients are often left waiting in emergency departments for hours or days as staff search for the most appropriate bed across the state. Not every inpatient unit can handle every type of condition. <div>The right types of beds in the right places based on condition and the facilities to meet future demand and changing care models.</div>

THROUGH THE EYES OF A CHILD AND PARENT

PATIENT STORY

The gaps in the mental health system are often manifested in multiple settings throughout a child's life. This example story shows the impact of those gaps on the overall outcome of a child struggling with a mental health condition.





In 2nd grade, teacher notices child struggling to read while also noticing an **increase in disruptive behavior** – child is labeled bad kid and he begins to express anxiety about school to mom



By 5th grade child is in the Principal's office on a regular basis and has given up on school due to inability to keep up with peers. **Child's anxiety and depression are increasing.**



By middle school child is **experimenting with substances and skipping school** and continues to experience depressive episodes that culminate in an attempt to take his own life



In high school, **He winds up in ED** where he waits for days for an inpatient bed and upon discharge is **sent home without a follow-up plan**. Mom tries on her own to find an appointment but can't find anything available for several months.

Two months later he dies by suicide.



Riley + IDOE Partnership Proposal

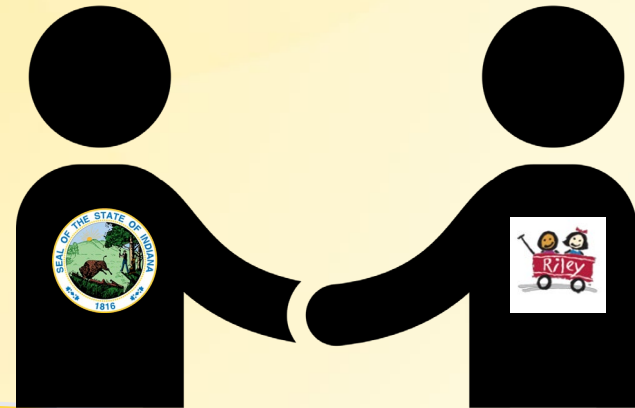


OUR SHARED GOAL



Riley Children's Health + Indiana Department of Education:

Ensure Indiana youth receive the mental and behavioral health support they need to thrive and make the academic growth necessary to reach their full potential.





EXPAND PREVENTION & EARLY INTERVENTION SERVICES

Goal: Improve access to preventive and primary-care based services to reduce the need for higher levels of care.

Initiatives:

- 1) Develop content available through the Indiana Learning Lab and Educational Service Centers on student well-being, trauma-informed approach, and MTSS
- 2) Create a mental health literacy toolkit
- 3) Develop peer-to-peer support training resources for educators and students





***TRAIN* CURRENT WORKFORCE**

Goal: Train the current and future behavioral health workforce in the most effective, evidence-based practices.

Initiatives:

- 1) Longitudinal, competency-based training
- 2) Virtual case-based learning (ECHO Model)



COLLABORATION IS *KEY*

Partnering within state government, as well as external stakeholders, ENSURES SUSTAINABILITY AND LONG-TERM SUCCESS in SUPPORTING HOOSIER STUDENTS WITH THEIR BEHAVIORAL HEALTH NEEDS.



COLLABORATION IS *KEY*

Partnering within state government, as well as external stakeholders, ensures sustainability and long-term success in supporting Hoosier students with their behavioral health needs.





STUDENT, SCHOOL & FAMILY **ENGAGEMENT**

Office of Student, School and Family Engagement Moodle Community

- Moodle - moodle.doe.in.gov
 - Find page by searching the course “student, school family and engagement”
 - Click on the “Enroll” button using the enrollment key **engagement**
 - Email engagement@doe.in.gov with questions

Indiana Learning Lab



THANK YOU!

**Contact us for more information or
questions at: IDOE Student, School and Family
Engagement**
engagement@doe.in.gov