



TUCKER & POCAHONTAS COUNTIES

Two Rural School Systems

In partnership with Youth Health Service

5 SCHOOLS • GRADES PRE-K THROUGH 12 • 1,646 STUDENTS

MARCH 2013

Shortening Distance to Care through “Tele-Mental Health.” Youth Health Service works through the Student Assistance Teams to provide counseling for individual students or small groups of students in five schools. Because of the rural, isolated nature of the region and the distance to specialists, Youth Health Service (YHS) developed a telehealth component that connects students and families to the psychiatrist through the schools’ Internet.

Program Strategies.

Telemental health, education of school staff and the community, and YHS’ Family Specialist Social Service Model to wrap services around students are important strategies employed in the program. Parents and families are critical partners in this endeavor.

Programmatic interventions include social skills groups; violence reduction, anger management; family support; grief and loss, suicide / depression screening; short term counseling and stress management, crisis intervention, cognitive behavioral therapy, and family therapy. Licensed therapists and social workers are trained to deliver evidence based practices with fidelity and are local experts in child mental health services. A psychiatrist, pediatrician, psychologist and supervising therapist oversee mental health services provided in the schools.



Benefits to Surrounding Counties. Although funded only for two counties, YHS IS working with Randolph, Upshur and Barbour County Schools to develop ESMH programs in these counties. This year they have provided school staff trainings on suicide prevention and childhood trauma, and some telemental health services.

“I could go to work not worrying about how my daughter was going to get to her appointments.”

Tucker County Parent

SUCCESS STORY:

Last fall, our entire ESMH Team and other clinical staff were called on by a school superintendent to provide psychological first aid to students and staff related to a student homicide. Our therapist, psychologist and social workers moved into action rapidly, with crisis stabilization and support to student groups and school personnel. Our psychologist and our project director met with school and board staff to coordinate and plan crisis intervention for students and staff. We think our rapid and highly professional response to this crisis has helped to sell school personnel on the value of ESMH programs. The school counselors are now very aware of how strong teamwork between school personnel and mental health professionals can be beneficial.

ESMH HIGHLIGHTS FOR YOUTH HEALTH SERVICE:

“For All” (Tier 1):	“For Some” (Tier 2):	“For a Few” (Tier 3):
<ul style="list-style-type: none"> ESMH team provided evidence-based “Signs of Suicide” training to entire student body (350 students) at one high school School staff in all five counties trained on childhood trauma and suicide prevention. 	<ul style="list-style-type: none"> Group Supportive Intervention Crisis Intervention 15 students served in first year of implementation 	<ul style="list-style-type: none"> Treatment Planning Psychiatric Evaluation Individual Therapy (Cognitive Behavioral Therapy) Group & Family Therapy 77 students served in first year of implementation

Visit

www.schoolmentalhealthwv.org

Or click link below to

[DOWNLOAD MORE INFORMATION \(Youth Health Service: Expanding School Mental Health Service in Rural Communities, Power Point\)](#)



This publication was prepared by the West Virginia School Health Technical Assistance Center at Marshall University.

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Leadership for the West Virginia School Mental Health Initiative is a shared commitment of the West Virginia Department of Health & Human Resources, Bureau for Behavioral Health & Health Facilities; and the West Virginia Department of Education.