

# Behavior Mental Health Specialist Services

*"The purpose of funding under 31n (6) is to expand the availability of mental health services and supports to K-12 students with mild to moderate mental health issues and provide appropriate referrals for students in need of more intensive services through the Community Mental Health system."*

## How do Students Qualify for Services?

- School Districts **administer mental health screeners 2-3x** yearly using a parent survey (grades K-2), or a student survey (grades 3-12), plus a teacher survey (grades K-12)
- Surveys currently supported in Clinton County are:
  - Social, Academic, Emotional, Behavioral Risk Screener (SAEBRS)
  - Revised Children's Anxiety and Depression Scale (RCADS-25)
  - Pediatric Symptom Checklist (PSC-17)
  - Student Risk Screening Scale (SRSS)
- Survey data is organized; students are grouped based on their identified area(s) of risk
- Behavior Mental Health Specialist(s) meet with the school to review survey data
- A list of students who meet criteria for Behavior Mental Health Specialist services is created, based on the survey data and input from the school
- Behavior Mental Health Specialist(s) contact qualifying students' parents/guardians to determine interest in services, and gather written consent

## Our Team



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## What Should Students Expect?

- Meet with one of the Behavior Mental Health Specialists at school for an initial assessment
- Develop a treatment plan with input from the student and their parents/guardians
- Receive social-emotional-behavioral interventions to enhance the student's overall functioning
- 15-30 min. sessions between, 1-4x monthly
- Generally, 25-30 min. sessions, 1x weekly
- Complete 12-15 total sessions
- Monitor progress through use of valid and reliable assessments/screening tools
- Services are no cost, and insurance benefits are not needed/utilized

## Common Concerns Addressed, with Examples

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| • Anxiety Symptoms <ul style="list-style-type: none"><li>◦ Racing, worried thoughts</li><li>◦ Physical symptoms when medical conditions are ruled out (e.g. chest pain, stomach aches)</li></ul> | • Social Skills and Relationships <ul style="list-style-type: none"><li>◦ Making new friends</li><li>◦ Communication strategies</li><li>◦ Boundary-setting</li></ul> |
| • Depressive Symptoms <ul style="list-style-type: none"><li>◦ Decreased energy</li><li>◦ Low motivation</li><li>◦ Loss of interest in activities previously enjoyed</li></ul>                    | • Self-Esteem <ul style="list-style-type: none"><li>◦ Body image</li><li>◦ Identity exploration</li><li>◦ Impact of peer/social pressures</li></ul>                  |
| • Executive Functioning Skills <ul style="list-style-type: none"><li>◦ Time-Management</li><li>◦ Organization</li><li>◦ Self-monitoring</li></ul>  | • Sleeping Habits <ul style="list-style-type: none"><li>◦ Sleep/wake routine</li><li>◦ Falling asleep</li></ul>  |

## Concerns Warranting a Community Referral

Students who are experiencing higher severity concerns need more intensive services (e.g., longer sessions, more frequent sessions, different interventions) than what the Behavior Mental Health Specialists can offer. In these instances, the student is offered referral information for community providers that can more adequately meet their needs. Listed below are several examples of concerns that would warrant a community referral:

- Current or recent (within the last 3 months) suicidal ideation
- Current self-harming behaviors
- Extensive behavioral issues
- Trauma history and traumatic stress symptoms
- Truancy issues