
Mental Health Matters: Every Student Matters

Improving access to care within Riverside School District

October - December 2024

January 13, 2025

Riverside School District

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Mental Health Matters: Every Student Matters

Fourth quarter: October through December 31, 2024 Summary

The district counseling team continues to prioritize the program activities outlined in Grant ID 38311: School Mental Health & Safety & Security as awarded by the Pennsylvania Commission on Crime and Delinquency (PCCD) and the Bureau of Justice Assistance (BJA) STOP School Violence Grant for FY2022 focusing on school safety strategies for Riverside School District (RSD).

The STOP Grant reporting requirements that began January 18, 2023, in conjunction with these quarterly **Mental Health Matters** reports highlight the action steps related to improving access to mental health services, promoting student health and well-being, and improving school climate such as:

Key Objectives

- (a) continued integration within the school culture and expansion of the role for each Licensed Professional Counselor (LPC) and supervisory staff promoting health
- (b) securing sustainable funding for LPCs (ex. Medical Assistance (MA) provider status; School Based Access Program (SBAP) billing for Special Education students)

Action Steps

1. Both Shannon Wells and Samantha (Valente) Carlin have continued their group offerings based upon identified needs within their respective schools, as solicited through team supervision and discussion with school staff, leadership, and parents;
2. Ongoing meetings between Mr. Brennan and administrators focused on supplying necessary data to support targeted mental health grant funding, and identification of relevant on-line learning via Vector Solutions for all staff in 2025;
3. Weekly supervisory team meetings with the LPCs to support creative and proactive school based interventions, in partnership with LIU18 outpatient and CSBBH services within the district;
4. Active participation in SAIP meetings designed to address social determinants of health and mental health concerns identified as barriers to attendance, in partnership with school leadership and community partners;
5. On 10/9/2024 Dr. Wydeen attended Anti-Gang: Group Violence Intervention at the invitation of Scranton School District peer;
6. On 10/15/2024 Margy Durkin, Community/School Liaison from Outreach Center for Community Resources presented the many services they offer to the Counseling Dept.;
7. Working with Mrs. O'Shea, shared *The Emerging Science of Suicide* by Kim Armstrong

(2/28/2022) with assignment for students to read the article, answer questions we posed, and prepare for discussion led by Dr. Wydeen on 11/8/2024. Below are the questions for the Seniors, as well as eight responses that represent the feedback received related to our district-wide goal of suicide prevention.

Questions:

How would you define a "nudge"?

Knowing what you know about yourself (your interests, friends, preferred method of communication), what three "nudges" would be beneficial to you if you were feeling down or sad?

What 2-3 "nudges" might you use on a friend(s) when you notice they are acting differently (isolating, not doing things you all usually enjoyed)?

Answers:

1. A "nudge" is an act of kindness in some shape or form to help people with suicidal idealizations. 2. 3 nudges that I have personally taking notice of are is one, just simply being kind. I've noticed when people are simply, genuinely kind to me, my mood improves so much. When my friends go out of their way to talk to me first it reassures me that they genuinely enjoy my presence. Yet the best "nudge" I believe is when people remember things about you, or see things that remind them of you. Every time one of my friends has something along the lines of "This reminded me of you." It tugs at my heartstrings a bit. 3. My go to "nudge" for my friends is to really highlight them in a group setting. I do my best to include them way more, I give them my full undivided attention, and just simply be kind to them. Although depending on the person, I will quietly ask if they are feeling okay, but I do not pry at them. Later on, I typically send a text message to reassure them that they can talk to me about anything.

2. To me, a "nudge" is an action taken to encourage someone positively. In the case of mental health, I believe it is something that encourages someone to take actions that benefit their overall health in a time of struggle. 2. Deep, emotional talks with people I trust helps me relieve stress. When people perform kind acts of service, such as buying a sweet treat, it instantly boosts my mood. Sometimes having people stay next to me in silence comforts me in a way where I know their presence is meant to offer support in the case I need it. 3. I would silently listen to their "rants," acting as an outlet because someone just needs to get emotions off their chest. Offering reassurance and committing to mental checkups will hopefully cheer the other person up.

3. My definition of a "nudge" is a person, place, activity, or object that distracts internal battles. These "nudges" prevent responses to psychological trauma. 2. From my personal experience I consider taking walks to nudge off any hard feelings I cannot express to anyone. I paint on a canvas without the intention of finishing it, but it helps me see the emotion rather than feel it. I listen to music that has positive memories encased for my well-being. 3. A nudge I would use on my friend would be to engage in a conversation where we are both vulnerable. I would request they take a walk with me and share optimism.

4. A nudge is an intervention in someone's life to help them, or guide them towards more ideal decision making. 2a. Messages from friends - I know that sometimes it is normal to feel lonely, and having someone to talk with can be very helpful. 2b. Activities - This may seem like an odd choice, but I feel like going out to eat, or to an activity helps me stop thinking about whatever I'm worried about. 2c. Looking to the future - Sometimes it is easy to get digested in the feelings that you are currently dealing with. Looking ahead toward positives in life can be very helpful. 3. Texting/talking to them, doing small gestures for them, and interacting with them in any way possible.

5. I would define a "nudge" as an idea or action that can help people in a mental crisis. If I was feeling down or sad, something that would be beneficial to me would be my friends inviting me to hangout. Someone saying that something reminds them of me. It gives me reassurance that people think highly of me and appreciate me. A small, but effective nudge that I do to help myself when feeling down is taking a long shower. Feeling clean is an immediate pick me up when you cannot figure out what is wrong. If I notice a friend is acting differently, I might ask if they want to go out for food. With my friends at least, getting takeout food makes us happier. I may ask a friend if they want me to help them with something they might be overwhelmed over, like cleaning their room. This is a simple task that can help people feel better. Texting a friend when they're alone or not doing anything may pick them up and put a smile on their face.

6. 1) A small gesture that could go a long way to someone in need. 2) Going out with my best friends or even just having a conversation with them, laying in bed watching

a movie with a comfy blanket, a lit candle, and my dogs cuddled up with me, and receiving flowers for the pure reason that someone was thinking about me. 3) I would ask them to go get a sweet treat, I would send them good vibes on the self-care app Finch we have each other added on, and I would surprise them with Starbucks.

7. 1. A nudge is to push someone to make the right choices. It is also to get someone's attention. 2. One nudge would be having my friends check up on me or call me. Another

nudge would be having a family event or party knowing I'm around people that love me. The last one is playing softball and having fun with my teammates. 3. First I would call them or text them. Usually they say "I'm fine" or "Don't worry about me". But, after calling or texting I would bring them their favorite things. A stuffed animal, candy, drinks, favorite snack, and little things. I would want to take their mind off of it to make them feel happy again.

8. 1. I would define a nudge in this context as delicately pushing someone towards an outcome. Not physically of course, but more so in a mental way that provides a positive push of support that is needed. 2. Someone asking if I'd like to do something with them to get out of the house. If they mention feeling upset or something it would help me want to get better to better help them. Simply expressing that they care about me goes a long way. 3. One may be simply telling them that I'm here for them no matter what. Another is that I'd state my opinion on the situation but also tell them they're doing great. This may not apply to most people but with my friends I would talk about something that's bothering me, so that they would feel more comfortable expressing the things wrong with them.

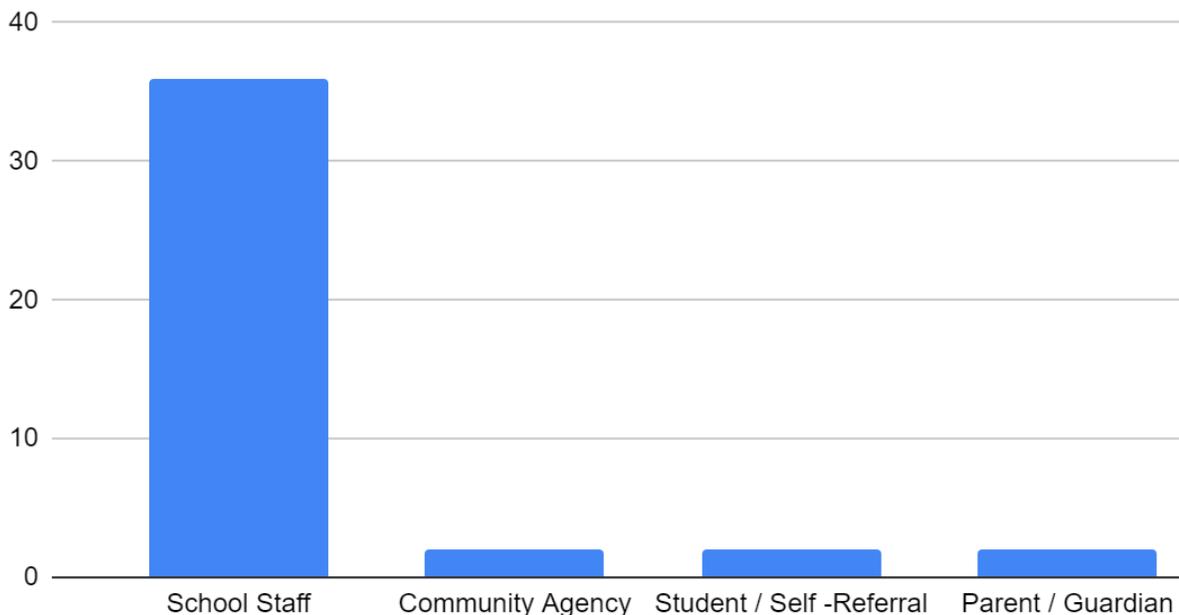
Benchmarks of Success (as previously reported: a-d)

1. Dedicated time with staff, in combination with on line training modules, to achieve compliance with STOP grant objectives by the end of the Project (2025). Objective one states: *(a) at least 90% of school staff members, (b) at least 15 local police officers, (c) and 75% of District students in grades 6-12 will increase understanding and knowledge through training to identify students who are at-risk of mental health problems and of the trauma informed approach to mitigate and respond to potential school violence incidences.*
 - (a) Result: 99.5% compliance with staff training objective during February 2024. Next training targeted for February 10, 2025.
 - (b) Result: 18 local police officers certified in evidence based Mental Health First Aid (MHFA) training.
 - (c) Result: 21 students trained in the spring of 2024 in Youth MHFA, with plans to repeat spring of 2025.
 - (d) During the high school staff orientation on 9/3/2024, reviewed the importance of accessible mental health services within the school environment, facts related to suicide during this National Suicide Prevention month, and provided updated information regarding Aavidum. Brief description of Aavidum was sent to teachers, asking them to post on their google classrooms and promote interest in this student-led activity. As of 9/30/2024 over 50 students grades 7-12th have signed up.

(e) On 11/1/2024 Mr. Brennan signed a letter of commitment for Youth Move PA, a partnership between that organization and the Office of Mental Health Substance Abuse Services (OMHSAS) to bring Sources of Strength suicide prevention to our 5th & 6th grades. This evidence based training will occur on February 10th & 11, 2025 and includes the volunteer Adult Advisor team of Mrs. Dructor, Mrs. Watkins, Mr. Trescavage, Mrs. Wells and Dr. Wydeen. In preparation for that training with both students and adults on Feb 11th, on December 19th the team met with the 22 students who were “nominated” to become Peer Leaders, sharing that written information for them and parental permission would be shared early 2025.

Target identified within the STOP grant for the 3-year Project period (10/1/2022 through 10/1/2025) also includes the reduction by 10% of the number of referrals to outside agencies. During this quarter (Oct- Dec), twelve (12) students were referred for OP services as of 12/31/2024. It is worth noting that while the initial proposal identified a goal of reducing OP services, the increasing number of students in need of this level of care is a reality that should not be ignored.

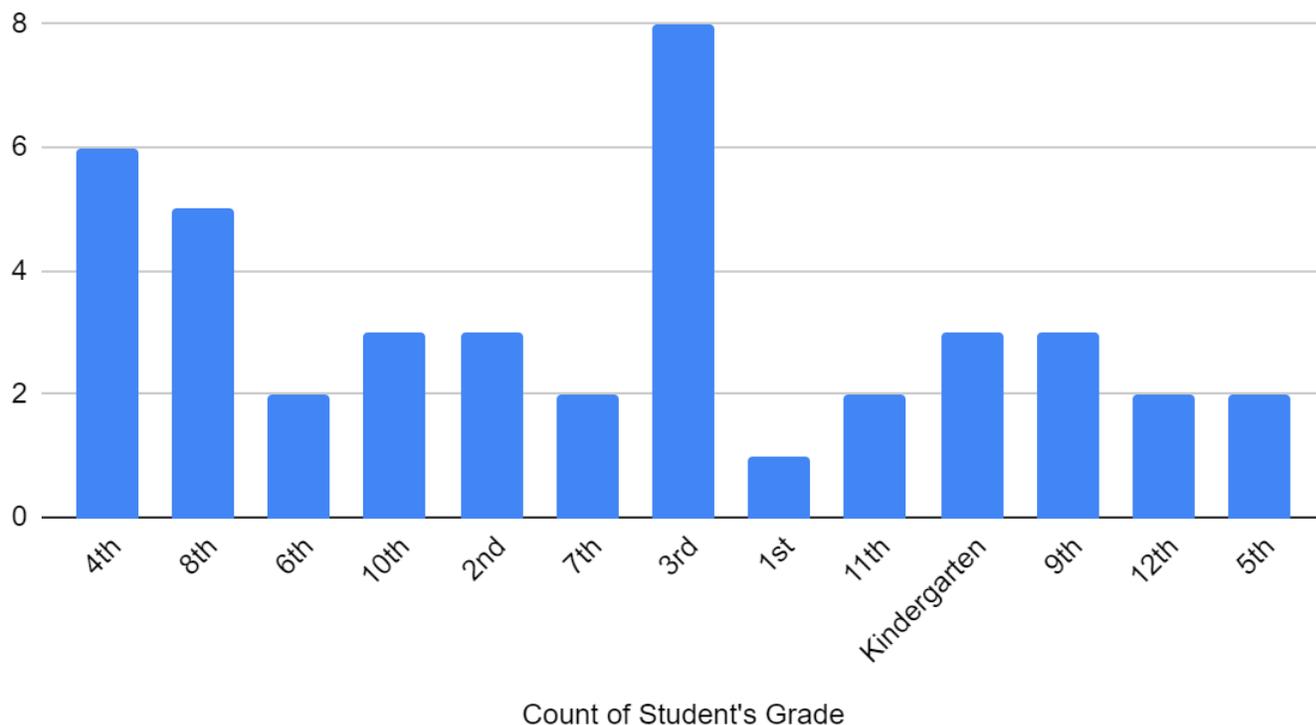
Of the 42 students referred during October through December 2024 and reflected in the table below, 36 were referred by “school staff”, a consolidated category created in September, to replace prior referral categories of “administration and counseling staff”. Two students were referred by community agencies, two were self-referred, and two were referred by their parents/guardians.



Count of The person completing this referral is:

The following table identifies the distribution of the referrals by grade level, noting the highest number from December reference data came from 3rd grade (population of 130); 4th (107) and 8th (103).

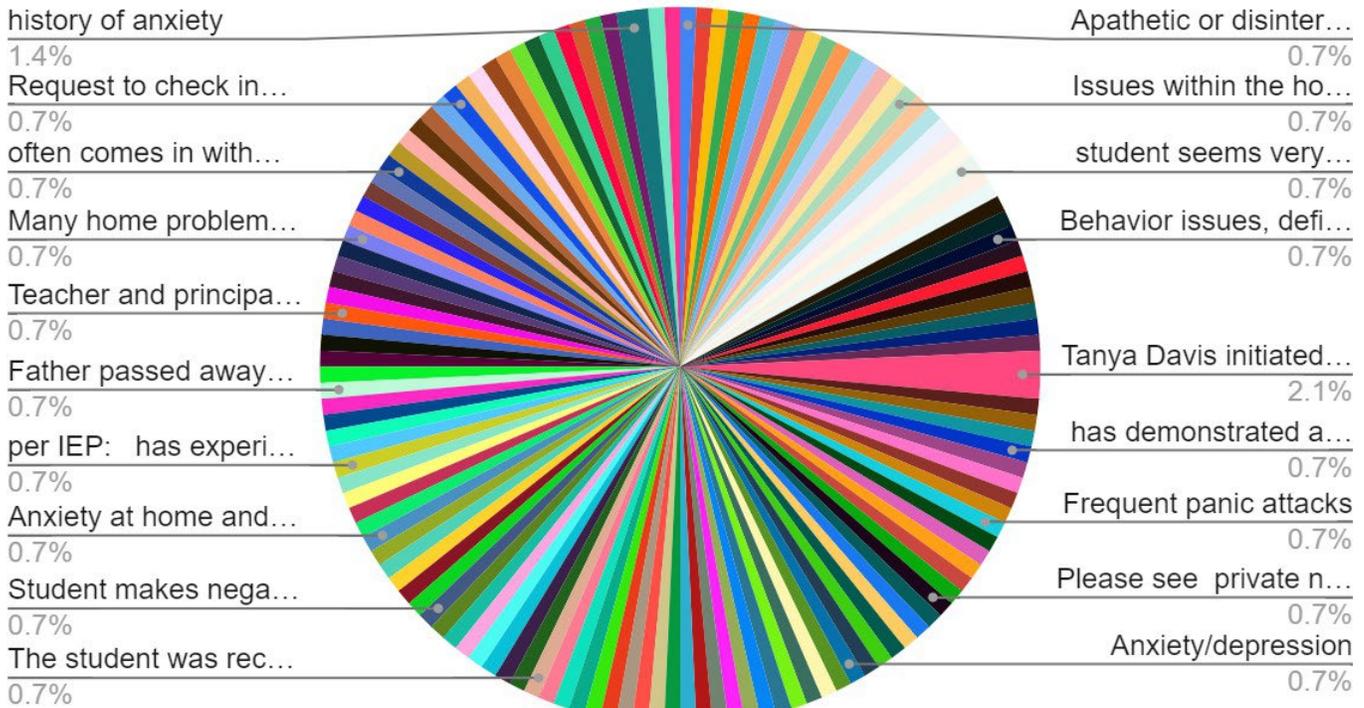
Count of Student's Grade



When viewed in color, the re-submission of the following pie graph for Year One (Dec 2022 – Dec 2023) depicts the varied reasons for referrals to the Counseling Department, with qualitative review of these reasons now being categorized into four (4) factors: social/emotional, internalizing disorders, externalizing disorders, and academic concerns after consultation with academic professionals and behavioral health field experts.

Another data source that was planned to begin October 1, 2024 was the documentation of LPC interventions for students not “officially” identified for counseling services, but due to increasing priorities and upon further examination and discussion, was not implemented during this quarter.

Count of Please briefly describe the presenting concerns.



Key Objective

(c) supporting policy revisions/development and implementation to assure compliance with best practices, current legislative and educational requirements.

Action Steps

1. Reviewed PSBA suicide policies with Scott Pentasuglio and updated RSD's current Suicide Crisis Response Policy after consultation with Mr. Yarem and K. Wallace (NSPI); submitted to Scott on March 1, 2024.
2. Draft Canine/therapy dog (visitation) Policy submitted to administration on 9/25/2024.

Benchmarks of Success

1. Suicide/Crisis Response Procedures disseminated and understood by all staff after finalization by administration.
2. Designation of the Aevium group to club status within the district, acknowledging another step in our stigma-reducing activities by spreading the message of "I've got your back" via student-directed activities and staff support.

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- Continued distribution of the monthly “Counselor Corner”, highlighting topics of interest and health promotion during the academic year.

Key Objective

(d) coordinating with local partners/agencies

Action Steps

- Ongoing attendance at Suicide Prevention Alliance group of Lackawanna County.
- Continued participation in monthly System of Care meetings led by the Behavioral Health Coordinator from the Lackawanna/Susquehanna Office of Mental Health/Intellectual Disabilities/Early Intervention. Continued participation with NSPI in support of suicide prevention.
- Monthly discussion with Lackawanna County Behavioral Health (Mental Health and Substance Use) and Office of Children & Youth Services (OCYF) leadership with goal of facilitating communication and access to services for our youth and their families in a timely manner.

Benchmarks of Success

- Meaningful communication with agency partners and improved access to needed resources for our youth and families as described previously.

Key Objective

(e) increasing access to data to inform decision-making

- Continued review of Year 1 and Year 2 data (ending December 2024) and discussions with key stakeholders to identify variables of interest for quantitative and qualitative analysis of this initiative.

Benchmarks of Success

- Using data from survey sources, in addition to diverse stakeholder input described above, review of priorities within the mental health initiative targeted for first quarter 2025.