The Mental Health Training Intervention for Health Providers in Schools (MH-TIPS)

Sharon Hoover Stephan, Ph.D. & Jill H. Bohnenkamp, Ph.D,

MASBHC Learning Collaborative
March 9, 2016
MISSION
To strengthen the policies and programs in school mental health to improve learning and promote success for America’s youth

• Established in 1995. Federal funding from the Health Resources and services Administration.

• Focus on advancing school mental health policy, research, practice, and training.

• Shared family-schools-community agenda.

• Co-Directors: Sharon Stephan, Ph.D. & Nancy Lever, Ph.D.
  http://csmh.umaryland.edu, (410) 706-0980
The mission of the CSMH is to strengthen policies and programs in school mental health to improve learning and promote success for America's youth.

WHAT'S NEW

- Advancing Education Effectiveness
  Using the Interconnected Systems Framework (ISF), this monograph articulates collective efforts to improve the quality of life and outcomes for children and youth...

- ASHMIP Call for Papers
  The Advances for School Mental Health Promotion Journal is now accepting submissions...

- 18th Annual Conference on Advancing School Mental Health
  View presentations from the 18th Annual Conference on October 3-5, 2013 in Crystal City, Virginia...

NEW RESOURCES

- Resources for Weather Related Trauma
  The Center for School Mental Health has assembled resources to help schools, families and communities cope with weather related traumatic events. Our thoughts are with everyone who has been impacted in Oklahoma...

- Understanding Bullying Policies in Schools
  This CSMH policy brief provides an overview of local, state, and national anti-bullying legislation. Key elements of successfully implemented anti-bullying laws can guide schools as they work towards preventing bullying.

- Health Care Reform: What School Mental Health Professionals Need to Know
Reality 1

• Child and adolescent mental health is among the most if not the most neglected health care need in the US.
Reality 2

• Children, youth and families are not getting to places where mental health services are traditionally delivered.
Reality 3

• Schools are under-resourced to address mental health issues, and may view this as beyond their mission.
ROLE OF SCHOOL HEALTH PROVIDERS IN ADDRESSING STUDENT MENTAL HEALTH NEEDS
School nurses are uniquely qualified to holistically address the mental and emotional needs of students from physical, psychological, and social perspectives.

- Shannon, Bergen, & Matthews, 2010, p.177
Mental Health is Already Part of the Job

• 30% of students who visit the school health providers present with mental health concerns as their primary issue.

• School health providers spend 31-38% of their time dealing with mental health problems.

• 37% of school health providers have a case load of more than 10 students with mental health problems.

(Foster et al., 2005; Stephan, Wissow, & Pichler, 2010; Wilson et al., 2008)
Reasons For The Visit

Students who visit the school health provider report that physical **AND** psychosocial reasons play a role in their visit.

- **Initial complaints:**
  - Headache (26%)
  - Infection (17%)
  - Dizzy or tired (12%)
  - Stomachache (12%)

- **Psychosocial Factors:**
  - Not sleeping well (62%)
  - Stress (47%)
  - Poor eating (34%)
  - Depression (31%)
  - School Problems (25%)
  - Relationship Problems (20%)

(Schneider, Friedman, & Fisher, 1995)
Health Providers Need Support Too!

- 94% of school health providers expressed interest in specific mental health continuing education.

- That’s what MH-TIPS is all about!

(Wilson et al., 2008)
Mental Health Training Intervention for Health Providers in Schools (MH-TIPS)
Collaborators

• Center for School Mental Health, University of Maryland School of Medicine
• National Association of School Nurses
• Center for Mental Health Services in Pediatric Primary Care and Johns Hopkins School of Public Health
MH-TIPS Overview

• In-service training for school health professionals:
  – MH-TIPS- Foundation for Practice – 8 hour course
  – MH-TIPS- Skills and Practice 1- 4 hour course
  – MH-TIPS- Skills and Practice 2- 4-hour course

• Implementation support system:
  – Online resources (FAQ, training tips and vignettes, learning community)

• Aimed at enhancing school health provider competence in managing the needs of students with or at risk for emotional and behavioral difficulties that interfere with learning.
MH-TIPS Foundation for Practice

• Common Factors
• Identification and Assessment
• Crisis Response and Safety Assessment
• Referral and Resource Mapping
Common Factors

• Outline six common factor skills that create positive therapeutic interactions with students and families:
  – School health provider role in continuum of care
  – Effectively eliciting mental health concerns
  – Steps in creating a plan of care
  – Addressing barriers
  – Promoting effective group communication
  – Managing anger, frustration and hopelessness
Identification and Assessment

• Identify and differentiate mental health and somatic concerns commonly seen in students at school

• Learn how to assess for mental health concerns:
  – Mental health “red flags” to look out for in the context of primary care
  – Mental health assessment tools for:
    • Depression
    • Anxiety
    • ADHD
    • Substance Abuse
School Health Provider Role in Responding to Crisis

• Know the warning signs of a mental health crisis
• Respond with empathy and support
• Enact your school’s crisis response plan
• Ensure safety
• Collaborate with colleagues
• Mobilize student’s support system
• Connect immediately with appropriate school and community mental health resources
Referral and Resource Mapping

• Understand best practices for connecting students with appropriate mental health resources including:
  – Strategies to identify mental health resources in school and in the community
  – Important considerations for referral planning
  – Strategies to support student’s successful transition to mental health supports
  – Strategies to foster and maintain successful relationships with providers both in and outside of the school building
MH-TIPS Skills and Practice I

• Common Elements
  – Education for:
    • Mental Health Treatment and CBT Basics
    • Depressed Mood
    • Anxiety
    • Disruptive Behavior
    • Trauma
Amber: My friends are all going to become better friends when they go to high school and forget all about me.

Amber: I feel sad when I think about my friends going to high school without me.

Amber: I end up staying home by myself because they probably have something to do with their new high school friends.

Amber: My friends are all going to become better friends when they go to high school and forget all about me.
Education for Student: Anxiety

• **Body Map**
  - Goal: Understand the student’s specific experience of anxiety

**Feeling worried/nervous/anxious is different for everyone. Can you describe how feeling worried/nervous/anxious feels like for you?**

• Don’t forget to include anxious thoughts!

“**I’m going to make a fool of myself today presenting my book report. Then everyone in class will think I’m dumb.**
MH-TIPS Skills and Practice II

• Common Elements
  – Cognitive Coping
  – Activity Scheduling
  – Relaxation
  – Problem-Solving
  – Behavior Management Consultation
  – Goal Setting

• Psychotropic Medication
Activity Scheduling: What is it?

• Planning enjoyable, goal-oriented activities into one’s day.

• Common experiences when feeling sad or depressed:
  • Lacking interest in things that are usually fun
  • Pulling away from friends and social activities

• Doing things that are *usually* fun can lift a student’s mood and distract him/her from feeling upset.
# Pediatric Psychopharmacology: Level 1

## ADHD

<table>
<thead>
<tr>
<th>Drug (mode of action)</th>
<th>Indication</th>
<th>FDA Approval/Approved Age</th>
<th>Level of Evidence</th>
<th>Generic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methylphenidate (stimulant)</td>
<td>ADHD</td>
<td>Yes; ≥ 6</td>
<td>A</td>
<td>Yes</td>
</tr>
<tr>
<td>Amphetamine (stimulant)</td>
<td>ADHD</td>
<td>Yes; &gt; 6</td>
<td>A</td>
<td>Yes</td>
</tr>
<tr>
<td>Guanfacine (α-2 adren. agonist)</td>
<td>ADHD</td>
<td>Yes; ≥ 6</td>
<td>A</td>
<td>Yes</td>
</tr>
<tr>
<td>Clonidine (α-2 adren. agonist)</td>
<td>ADHD</td>
<td>Yes; &gt; 6</td>
<td>A</td>
<td>Yes</td>
</tr>
<tr>
<td>Atomoxetine (SNRI)</td>
<td>ADHD</td>
<td>Yes; ≥ 6</td>
<td>A</td>
<td>Yes</td>
</tr>
</tbody>
</table>
MH-TIPS online

• Full MH-TIPS training curriculum is available to complete online
• Interactive online training platform that includes:
  – Implementation Training Videos
  – School Health Provider Mental Health Video Vignettes
  – Downloadable Resources and Tools
  – Frequently Asked Questions
  – Interviews with Experts
• Opportunity to earn Continuing Education Credits
Objectives

- Identify and differentiate mental health and somatic concerns commonly seen in students at school
- Learn how to identify mental health “red flags” using evidence-based screening and assessment tools (e.g., for depression, anxiety, ADHD, substance use)

Nichole Bobo: The objective for this section is to identify and differentiate mental health and somatic concerns commonly seen in students at school. The focus will be on identifying mental health red flags using evidence-based screening and assessment tools.
Sharon Stephen: So this next vignette illustrates how a school health provider might respond if a student endorses or indicates suicidal ideation.

Student: Hi, Ms. Smith. Do you have any aspirin? My head's killing me.

School Health Provider: I'm sorry to hear that, Janine. I saw you in the hallway earlier crying. Is everything okay?

Student: Yeah, I guess so. I've just been feeling really down lately. I keep crying in front of everyone, and it's really embarrassing.

School Health Provider: So, you've been crying a lot.

Downloads

 электро Download Audio (MP3)
# Mental Health Training Intervention for Health Providers in Schools (MH-TIPS)

## Implementation Resources

### Materials

<table>
<thead>
<tr>
<th>Type</th>
<th>Modules</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Materials</td>
<td>Foundation for Practice (20)</td>
<td>A Guide for Community Child Serving Agencies on Psychotropic Medications for Children and Adolescents</td>
</tr>
<tr>
<td></td>
<td>Skills and Practice 1 (11)</td>
<td>Activity Scheduling Guide</td>
</tr>
<tr>
<td></td>
<td>Skills and Practice 2 (9)</td>
<td>Appropriate Use of Psychotropic Drugs in Children and Adolescents: A Clinical Monograph</td>
</tr>
<tr>
<td></td>
<td>Psychopharmacology for Children and Adolescents (13)</td>
<td>Atypical Antipsychotic Medications</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cognitive Coping: Taking Charge of Your Thinking</td>
</tr>
</tbody>
</table>

### Overview

- [Overview](#)

### Training

- [Training](#)

### Implementation Resources

- [Implementation Resources](#)
Taking Charge of Your Thinking

The way we think about situations has very powerful effects on how we feel. Sometimes we have negative, unhelpful thoughts right away, causing us to feel embarrassed, worried, sad, lonely, or hopeless. Most of the time, the negative thoughts are really untrue. If we can learn to “take charge” and “catch” these negative, unhelpful thoughts when they happen, then we can practice replacing them with more true, and positive or helpful thoughts. New, positive thinking helps us feel, look and act more hopeful, calm, and confident.

“Math is pretty hard for me but if I try my best maybe I won’t fail this time. My teacher said she can tell when I try.”

“I’m terrible at math. I am going to fail this test, and never pass my grade. I’m so dumb.”

Guess His Feelings: __________________________

Predict What Happens: __________________________

Guess His Feelings: __________________________

Predict What Happens: __________________________

Negative thinking “traps” can happen automatically. Some examples are:

<table>
<thead>
<tr>
<th>Type of Trap</th>
<th>Definition</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>All or Nothing</td>
<td>Viewing situations, people, or yourself as all good or all bad, nothing in between.</td>
<td>Paul missed a basket in basketball and thought, “I’m a total failure. Nobody will like me. Everybody hates me.”</td>
</tr>
<tr>
<td>Exaggerating/Dramatizing</td>
<td>Making critical statements using words like “never”, “nothing”, “everything” or “always”.</td>
<td>Stacy has not been asked on a date to the junior prom and thinks, “I’m never going to be asked out. Boys will always ignore me. I’ll never have any fun.”</td>
</tr>
<tr>
<td>Mindreading</td>
<td>Unhappy guessing about what other people are thinking and wanting.</td>
<td>Aaron has a problem with acne. When he didn’t get a job he thought, “The manager said the position was filled but I know it’s because he thinks I look bad.”</td>
</tr>
<tr>
<td>Blaming</td>
<td>Feeling responsible and blaming yourself for negative things that happen (out of your control).</td>
<td>Lisa’s parents separated after many months of arguing. She thought, “My parents argue so much because of me. If I acted better they wouldn’t have to separate.”</td>
</tr>
<tr>
<td>Judging Yourself/Expectations</td>
<td>being critical of yourself or others using words like “should have”, “must”, “have to”, “should not have”</td>
<td>Jose finally called a girl from school he likes and they talked for 20 minutes. He told a friend, “I shouldn’t have laughed so much. I have to be more relaxed.”</td>
</tr>
</tbody>
</table>
Mental Health Training Intervention for Health Providers in Schools (MH-TIPS)

Mental Health "Red Flag" (concerning symptoms or patterns)

- Safety Concern/Crisis (SI/HI, AH/VH, abuse or neglect)
- Concern about potential disorder
- Common Problem

Follow crisis plan

Conduct MH Screening and Assessment

- Unsure which symptoms - need global screener
  - Pediatric Symptom Checklist
- Inattention
  - Hyperactivity
  - Poor Concentration
  - Vanderbilt ADHD Assessment
- Irritability
  - Sleep/Eating Probs
  - Depressed Mood
  - Anxious/Worried
  - Revised Children’s Anxiety and Depression Scale
- Substance Use
  - CRAFFT
MH-TIPS online

https://mdbehavioralhealth.com/MHTIPS/course/description/10443

https://mdbehavioralhealth.com/training
MASBHC Learning Collaborative

- Access to all online training materials
- Opportunity to earn CEUs
- Supplemental live consultation and implementation support
Thank you!

Comments/Questions?

Sharon Hoover Stephan, Ph.D.
Sstephan@psych.umd.edu

Jill Bohnenkamp, Ph.D.
jbohnenk@psych.umd.edu

Center for School Mental Health
University of Maryland, Baltimore
School of Medicine
Division of Child and Adolescent Psychiatry
737 W. Lombard St. 4th floor
Baltimore, Maryland 21201
(http://csmh.umaryland.edu
Email: csmh@psych.umd.edu
Phone: (410) 706-0980