



Claire Viscione:

Hello, and welcome to In Session, a podcast where we speak with change-makers working towards safe, supportive learning environments within their communities. Our guests include state and local education agencies and their partners, all grant recipients from the Department of Education, using their funding to advance school-based mental health services, support mental health service professionals, and establish trauma recovery and prevention programs.

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On this episode of In Session, we talked to mental health service professional grant recipients about what it means to partner strategically and effectively. Our guests include Greg Hickey, licensed professional counselor and mental health specialist with Region 15 Education Service Center in Texas. Greg is joined by Leslie Casarez, educational specialist for counseling and mental health, and Carol Stevens, education specialist and project director of the grant program. We also welcome Heather Ormiston, Ph.D., a nationally certified school psychologist and health service provider in psychology and the director of the school-based mental health research and training initiative at Indiana University Bloomington. Heather is joined by Jennifer Anderson, the co-project investigator of the grant and director of Student Services for the Richland-Bean Blossom Community School Corporation. This episode is facilitated by Elizabeth Chagnon, a technical assistant specialist at NCSSE.

Elizabeth Chagnon:

I'm Elizabeth Chagnon. I am a technical assistant specialist at the NCSSE Center, and I'm excited to be in conversation with some of our grantees that we support to talk about partnerships. So I'd love for the folks that are on the podcast today to introduce themselves, and then we'll get into our conversation, so if we could start with Greg and your folks.

Greg Hickey:

Sure. So my name's Greg Hickey, and I'm a licensed professional counselor. And I am the mental health specialist at Education Service Center Region 15 here in San Angelo, Texas, where we cover about 45 school districts across a pretty large footprint in West Central Texas. And I'm joined by two of our fellow grant staff, and I'll let them introduce themselves.

Carol Stevens:

I'm Carol Stevens. I am the education specialist for counselors here at the service center, and I am also the project director for the demonstration grant.

Leslie Casarez:

And I'm Leslie Casarez, and I am in transition into the service center. I recently left Angelo State University, where I was the program coordinator overseeing the candidates who were coming through the program to earn their school counseling certification and their master's degrees.

Jennifer Anderson:

I'm Jen Anderson, director of student services for Richland-Bean Blossom Community School Corporation, and helped co-write the mental health demonstration grant with Dr. Ormiston through IU.

Heather Ormiston:

And I am Heather Ormiston. I'm a faculty member at Indiana University Bloomington and the school psychology program. I'm a licensed psychologist and also director of the school-based Mental Health Research and training initiative. And as Jen mentioned, I am a co-director of the demonstration grant.

Elizabeth Chagnon:

Thank you. Thank you so much for introducing yourselves. So we're going to jump right into the hard-hitting questions, I guess. So what do you bring to the table that makes you feel that you are a good partner? And we can go ahead and start with our folks in Texas.

Greg Hickey:

Awesome. Happy to kick us off. So working for a region center, you kind of have, I think, a 10,000-foot view of some of the mental health issues that we see in our schools. And one of the things that the Region Center noticed back when we started this grant was, that first and foremost, in order to address some of those mental health needs, you need to have an adequate number of mental health professionals and counseling staff in those schools. And so we were noticing that our student-to-counselor ratios across the region were as high as one counselor for every 500 students when the recommended is 250 students to one counselor. And so that's kind of what drove this grant was that 10,000-foot view, recognizing that we had this need across the region, but we also have a wide reach. And so when we do things like mental health trainings, when we do counselor support through our specialists here, we can reach a lot of educators at one time, not just those who are served by our grant, but all of those across our region.

Greg Hickey:

So I think that really kind of plays into that federal grant monetary, want to supplement each other's work without supplanting. So that ESC certainly has its role to play in partnership with Angelo State University, who has done nothing short of produced just amazing counselors via the program that we partner with there. And then, of course, we have the role that the districts play in identifying those teachers who want to become counselors in their district. So we find that as a partner, we are able to work in tandem really well with all of our partners, and we enjoy having that 10,000-foot view.

Carol Stevens:

This is Carol, also from Texas. I think another area that is important too is that with those counselors and their feet on the ground in the schools, that there's been a move towards more leaving some of the administrative duties and moving more into the actual mental health counseling with those students. And with that, a lot of counselors that are on the ground that have been counselors a long time were not in that position. They aren't licensed, professional counselors. And maybe it had been a while since they've been in school to learn some of the techniques or even to practice those techniques. And so

with bringing Greg on as our licensed professional counselor for our health grant, it was a big plus for us to bring that to the table and try and help increase those skills for those counselors that were on the ground already in the districts as well as support the new ones coming on through the grant.

Elizabeth Chagnon:

So it sounds like you were able to partner together to do some kind of leveling to get everyone on the same page without necessarily losing mental health providers that were already in place.

Carol Stevens:

Absolutely.

Elizabeth Chagnon:

Very cool. What about our folks in Indiana?

Heather Ormiston:

Sure, I can start, and I actually want to contextualize us a little bit because Jen and I work in a very different capacity than what Greg and his team are doing because we are just one district about 2,700 students. And so I think Greg, earlier you had mentioned working with 45 districts or something like that. We're just one, and we're working with school psychologists instead of school counselors. So I think it's good to kind of contextualize that a bit. I think in terms of making the good partnership, I think one of the things that is so beneficial between the work that IU is doing with RBB is the fact that we're bringing together folks that have really different their own lenses of expertise that they're bringing to the table. So Jen has a lot of background as a special educator, working as a teacher, as a district, as a school administrator, a district administrator.

Heather Ormiston:

And I have a little bit of school-based experience, but I've been in the academic arena for a long time and I think I can kind of bring some of that knowledge. Whereas Jen's really living the school-based experience day to day and knowing just the kind of that environment and the dynamic that the challenges of working with school-based practice. One of the other things I think that the partnership, at least from the school psychology standpoint that we bring from IU, is that within our state, again, to contextualize it a little bit within our state, the traditional role of school psychologists is very much in that special education identification model, whereas school psychologists are so broadly trained to engage in direct school based mental health services to engage in database decision making and things like that. And we have psychs that definitely do that.

Heather Ormiston:

But a lot of the time that school psychologists spend in schools, traditionally, it's changing a little bit, is predominantly that assessment identification role. And so I think what's really cool about the work that we're doing is that, like Greg was talking about, we were able to really bring that ratio down to within the district through hiring a school psychologist. But then we're also engaging in the training of our school psychology students, too, by placing them directly in the district to utilize that wide NASP, the school psychology practice model that we're trained to do.

Jennifer Anderson:

This is Jen speaking from the school side of the partnership. Heather's exactly right. The traditional role of a school psychologist has been asses, wash your hands, and goodbye. So this is a new lens for us and what makes this so successful is that we have the incredible support of our superintendent and our administrators, having the administrators in each building and having the superintendent on board to support us in understanding, especially with this particular grant and understanding that the success of the whole child, our student, is not just academics, it is built on behavior, their social-emotional status, anything beyond just what is traditionally academics. So having the ability to understand that these school psychologists in training or the school psychologists that has been hired are the two that have been hired to work in the grant for the school corporation. Understanding the role, the broad spectrum of a role that they play, and what they're doing to implement the different practices affects, positively our students and, in turn, has positive outcomes for them academically.

Jennifer Anderson:

Even though we're addressing social-emotional, we're addressing behavioral. We're looking at a really broad spectrum, having that support, knowing that this is critical, this is the area we were missing, we can support academically easy, that's something that schools have done for a long time, we get really good at it. But this other side, which tends to inhibit our students from making the progress that they need, this grant has brought that other side that we always knew we needed. But we didn't know how to define it. We didn't know how to clarify it. We didn't know how to implement it.

Jennifer Anderson:

So this partnership is critical to the success of our students. But it's also critical in that Heather and I working together have a very open relationship. And we did know each other prior to this, but we bounce idea... Last night we were, for example, we were text messaging back and forth about one particular issue, but we were brainstorming, "Why do you think this is? How can we help? What can we do to support on the IU side? What can we do to support in the school side under the same issue?"

Jennifer Anderson:

So having the ability to work with someone who is open and someone who understands a school role and then vice versa is huge. But the most critical component for the school side is the support of the superintendent, the administrators, and the community. Our school board and the community are incredibly supportive of this, to the point that our community foundation actually gave us an additional grant to implement some of the social-emotional supports that have kind of stemmed out of this. So the expansive reaches is hopefully keep on keeping on. So.

Elizabeth Chagnon:

Yeah, I'm really struck by what you are saying about really trusting and believing each other's perspectives and valuing it as an essential component of this partnership. And it's also making me think about how these partnerships become true collaborative relationships. Because sometimes there's a partnership where you know, sign maybe a memorandum of agreement and how do you move from, this is a contractual almost partnership to one where you actually call each other up or text each other or bounce things off of each other. So I wonder if you all could speak to that as well as folks in Texas as well.

Greg Hickey:

I can speak to that a little bit. Talking about those partnerships, there are those that you kind of have that memorandum of understanding with where we all have that agreement. Our key partners would be, of course, Angelo State University and the school districts that we work with. But you also find yourself in some kind of informal partnerships, especially when you're trying to meet the need mental health needs of students in your districts. And one that we kind of brought on board that was really, really helpful. I mean, this was a little more formalized, I think, in a memorandum, if I'm not mistaken, wasn't the AmeriCorps Vista program because we kind of recognized, not a single one of us here are statisticians. We went into education and mental health for a reason and didn't focus too heavily on how to gather and make meaning out of data.

Greg Hickey:

So with AmeriCorps Vista, you can kind of put out there exactly what you are looking for in a vista, and we needed somebody with a strong data background. And so we brought an AmeriCorps Vista member on board to help get us started gathering meaningful data and measuring our impact. And so you kind of define what additional partnerships you need as you go. And then you got out here in rural America, some informal partnerships with those agencies that provide mental health services to students. And I strongly believe that we really need on-site psychotherapy telepsychiatry services where we can get it in the schools to address student needs. And so we have begun kind of these informal partnerships with, say, the Texas Child Health Access through telemedicine programs, this miraculous program that provides free telepsychiatry and tele counseling to students on Texas campuses. And so spreading the word about that, knowing who your community agencies are that serve those students and families, and also your staff members that need mental health treatment.

Greg Hickey:

So making sure that we know who they are, that we have conversations with them, that we have staff who are going out to local coalition meetings to attend those meetings and get to know who your mental health key players are in the community that you can connect with to get those services to students.

Elizabeth Chagnon:

So I'm hearing who are we sharing kind of touchpoints with? And if our main touchpoints are our community and our students and the teachers, if there's other services that are already beginning to work with that population, how can you enhance their connection to that population? I'm also wondering, you said, making sure that people are at these meetings, I think you said, regional meetings. So there's also that relational component of being visible, being present, listening, and really being part of the community in that way. And how has that been bringing your partners along with you into those spaces as well? Cause are you bringing the university partners into those conversations?

Greg Hickey:

Well, right now, I've been kind of dipping my toe in some of the coalition meetings, and just having been in community mental health myself in this community for a little over a decade, I've known some of these partners. And so, while we haven't yet brought Angelo State University staff to some of these meetings, I certainly am there trying to represent the ESC. Some of the mental health-related coalition meetings that we have, the Suicide Prevention Coalition meeting that we have here gets hosted monthly by one of our service agencies, among several others. And so we still have partners to bring on board to

those meetings, but we're trying to dip our toe in it, trying to stay connected, keeping our finger on the mental health pulse in our community as best we can.

Carol Stevens:

And this is Carol again. We also, in our cohorts, our students that are going through Angela State to become counselors in those districts. We're making them aware of coalition meetings and coalitions that are in their communities. Since we do cover 25,000 square miles, it's not just our big cities. And so we're trying to make them aware of that as well and try to get their connections in those areas as well. So it's not just our staff here at the ESC, but also those individuals that have their feet on the ground and that are in the program.

Greg Hickey:

And one of those that comes to mind for me are things like community resource coordination groups where in all of these counties that we serve, they are covered by a group of professionals that come together and staff sometimes individual student and family cases whenever they're having a hard time getting through some of the barriers to access for mental health care and social services. So making sure that counselors that we work with are aware of those coordination meetings. They can take part in that they can get students and their families the services they need whenever they hit a brick wall, which, unfortunately, very often happens. Texas is, I think, 50th in the nation in terms of mental health spending in particular. I'm going to guess that we don't rank very high in social services spending as well. So you do run up against those barriers, and it's good to know that at least there's a group of people who are able to come together and say, "Okay, where can we fill in the gaps for this family?" So having counselors aware of those resources is a big priority of ours.

Leslie Casarez:

This is Leslie. And one other thing that we did pretty frequently with our cohorts was meet as a group. So us here in this room, and then all of the cohorts would meet at least monthly via Zoom. We couldn't always meet face to face just because of our locations and being so spread out, but having those groups come together and even the students could provide the resources for each other that they've come across in addition to the ones that we might have come up with or things that Greg has found. So for them to find things in their own communities and then share them with each other was also very helpful for the students.

Elizabeth Chagnon:

This is kind of speaking to a question that I had in my mind, which was, as you're developing these relationships in communities, what happens if you leave that community? And it sounds like what you're doing is you're connecting the providers to the community while they're still in training at an early stage. So it's helping build those relationships beyond just you, so you're not the keystone of the relationship, which is critical for sustainability.

Greg Hickey:

Absolutely.

Heather Ormiston:

And this is Heather. I would say that's a really important piece is to make sure that you're building the system and that the system isn't dependent on the people. And I think when you are really trying to

incorporate, again, from just the school district level, I think when you're really trying to incorporate these components into the educational day-to-day for students and for staff, I think it's really important that it becomes really integrated into the work that everybody's doing so that if somebody leaves or if a community partner, I know the school district has worked with developing some community partners in our area as well. If those folks leave, we still have a way to provide those services even if the individuals themselves aren't there anymore.

Jennifer Anderson:

Yeah, this is Jen. We actually have already gone through this once. I took a little 10-month absence for a time last year, and the system that we had developed was transferred right over to the next individual who took my place. And it was critical that everything is laid out in a multi-tiered system of supports, and that's part of our grant is to develop that MTSS structure and model and framework. That's something that the corporation is now taking on and is looking at those structures, Who does what, who's in contact when you're in contact, how often we partner with adult and child for some licensed clinical social worker services for some of those highly intense needs who have access then to some of the psychiatric services who can refer on to some psychiatric services if a student needs or has those family resources. We've been able to put in place a family resource provider that also has been doing some work with Grant.

Jennifer Anderson:

So we've brought her in on board, so she's familiar with on an outside view what we're doing. So she knows what resources to go to, who to speak with in order to further support our students. And those systems are critical because if we didn't have those systems in place, as often happens in education, you start something, and then everybody becomes complacent, and it kind of fades off sometimes. So in the large scope of sustainability, having that MTSS structure in place really helps solidify and keep those partners abreast of what's going on and keep the school and the community in that engaged status and making sure that they're aware of what we are doing and then we are aware of all of the resources that they can provide.

Heather Ormiston:

This is Heather again. I think gen two, to your point of sustainability, I think it's critical to have those structures and systems in place from a sustainability standpoint so that when grant funds are unfortunately no longer here, it just has become a part of the integrative system of just the way that things operate so that we can continue the work post grant as well.

Elizabeth Chagnon:

And I imagine that structure helps ensure that everyone knows what their job is as well. So when people leave, they're still clear on my role as a partner or as a practitioner in the school is to provide that intensive services or my role is to make sure that there's a continuation of universal supports at the school level. That's one of the ways that the MTSS framework helps to support sustainability is that everyone knows what their job is.

Greg Hickey:

And I think to that point, too, MTSS also gives us kind of a common language to address what our training needs are. So when you're coming in, and you're doing training for counselors on mental health issues, you start general, you start with your tier one. But as we have moved through the brand, we

have kind of had to shift our focus to more tier two and tier three interventions with those smaller groups and individual students who are struggling. So they've been able to say, "These are the tier three interventions I am interested in. How can we bring a trainer in? Or how can you do training on this very specific intervention that I want that kind of fits in with this MTSS model?" So I really love the MTSS model for that purpose, too. Is it just gives us a common language, and we all know what we mean when we're talking about those students who need those tier three services.

Jennifer Anderson:

Yes, thank you, Greg. That's you nailed it.

Elizabeth Chagnon:

Yeah, and I imagine that the MTSS framework really also helps with communicating with partners so that they understand where they fit into everything enhances the work you're able to do together as partners. Obviously, we have on the call your university partners, and I've heard mention of AmeriCorps Vista, I think it was. I'm wondering if there's other mental health partnerships or key partnerships in addressing mental health in schools. I wonder what else hasn't been part of this conversation yet?

Jennifer Anderson:

This is Jen. I mentioned we have a good partnership with Adult and Child, which is a mental health community or a mental health organization that works in schools. It's very unique in that the schools don't pay anything for this partnership. We just have to provide a space for the licensed clinical social worker and then a skill specialist to work. So for a school, it's win-win. We just have to provide a space. So that has been extremely helpful, especially with a lot of the tier three really intensive students who we know may need more wraparound services. We do have our partnerships with other mental health service providers in the area, but not to the extent in our school that we are with Adult and Child. We have started to really dip our toes, as Greg said, into our community. It hasn't really been explored a lot. We knew we had your Centerstone, which is just another Adult and Child place.

Jennifer Anderson:

We know we had Ireland home-based services, those typical ones that are referred out from physicians but we're finding that even smaller community resources, our SROs, our school resource officers are huge benefits to our SEL program and our mental health team, and that they're able to help us build that relationship with the police department, that they are here to support us and help the students who are here know that the police officers are there to support them. They're not just the ones that come to the house in times of not-so-good times. We're trying to foster a stronger relationship with DCS. They are going through their own things at the state level, but we are trying to make that more of a partnership and not so much a we're calling DCS if something doesn't happen. What resources do they have? Maybe they have a specialist that we can help utilize.

Jennifer Anderson:

Maybe there's somebody I know our Bloomington Police Force, they have a social worker on-site, and we've really tapped into that resource as instead of sending maybe an SRO out, like, "Hey, can your social worker maybe pick up some of this outside check-ins to make sure that kids are safe? Make sure we know where they are, that they're getting the support, they have housing." So we're really trying to be creative and really find out what is around our area at the beginning stages. Really that community is kind of at our beginning stages. We had to get our structures in place here in the building and with our

own school community to figure out exactly, what you said, Greg. What do we even know? What do we need? What kind of training? What kind of PD, what type of outside resources do we need to try to find in order to better support our schools and our communities within the schools?

Greg Hickey:

And to that end, I can't emphasize enough if you are in a rural or even an urban setting, sometimes you have partnerships that are a little more loosely formed, as in you've just got the director of that program in your cell phone, you've met with them, maybe you've gone to lunch with them. We sometimes get so caught up in our email inbox that we forget to pick up the phone sometimes and say, "Hey, what are you doing out there?" And we've got here, locally, a counseling agency that actually has what they are calling a zero suicide initiative. And what they do is, a part of that is they have grant, state and federal grant funding to have a therapist on, say, standby to handle child and adult crises. So what has wound up happening is several of our school districts have listed them as part of their crisis plan, an alternative to hospitalization.

Greg Hickey:

Because out here in rural Texas, if a kid comes to you and says they are suicidal 90% of the time previously, it would involve a call to law enforcement and off to the hospital they go. And that just isn't sustainable in terms of mental healthcare. So to have a counseling agency and know their executive director and have routine conversations with them about, "Hey, how can we get kids into those emergency counseling appointments to prevent them from going to the hospital." Has been very helpful for some of our districts or likewise, our Texas Child Health access through telemedicine program. They, too, can also help with the suicide outcry and making sure that we keep kids at home receiving treatment on an outpatient basis, sleeping in their bed, eating dinner with their families. And so just having some of those looser partnerships where we don't have assigned memorandum, but we talk routinely, we show up to the same community meetings. We know what everybody does and what role they play is very helpful.

Elizabeth Chagnon:

I'm almost hearing this tiering of the partnerships too. So you found there's like the needs to go the hospital intensity of response, and then you found that there's somewhere between that targeted support and that intensive needs hospital support and you found something to kind of fill that gap to actually meet people where they are. Because we know that sometimes suicidality doesn't always mean it needs to be a hospital right now. And that there could be a different crisis response first to further assess what that person needs. So we're coming to kind of the close of our time. And so the last question we had is if there's something that you have taken away from listening to our other panelists speak so we can explore that question a little bit to close out our time together.

Greg Hickey:

Jennifer's discussion about serving the whole child just kind of reminded me of something that we had talked about prior to coming to the meeting. Today. Our staff were discussing kind of the difference between partners and stakeholders. And so you've got your partners, we have Angelo State University, we have our districts, we have those loosely formed partnerships that I had spoken about earlier. But you never want to forget your stakeholders because those are often different people.

Greg Hickey:

And what I thought about when Jennifer was talking were our end users of what we do as an ESC, as an education service center. We are in the business of training adults, but we have to remember who the end user is, and those are the students and families that our counselors are serving. And to me, I think that really drives our work as a partnership. We want to recruit, train, and retain counselors to drop that counselor ratio because we have students who are not getting what they need from their school counselor. Not because they are not amazing at their jobs because they are, we have the best in the world, in my opinion, but because they just don't have the time and the space to serve every student that they can. So that was kind of helpful hearing from Jennifer. Again, just that whole child perspective, we need to make sure that we are showing up for our stakeholders, not just our partners.

Jennifer Anderson:

And Greg, I think when you just spoke about those relationships with some of your partners that aren't laid out in a nice model and that sometimes it's just kind of the person on the phone that you know can call. That reminded me of something that we had going with our police department. We would have, it's called, it was a systems of care notification. We don't know what it is. We don't know what happened, but we would just receive a notification that, hey, this family had something go on and just take a little more extra care with the student today. We didn't need to know what it was. We had no idea what it was. It wasn't our business.

Jennifer Anderson:

But just having that understanding of, hey, something else is going on and being told that we just might want to just watch out and make sure that they're okay. Again, isn't a put down on paper, "We're going to do this, this check the box to make sure they're okay." But just an awareness between the community and the school. And I think that in and of itself, it doesn't always have to be formalized. And that's something I need to keep in the back of my head that even just those touching bases with some of our partners and some of our individuals who can provide some service is just as important as having a formalized agreement. Probably more important, quite frankly.

Heather Ormiston:

This is Heather. I think it's really interesting for me to think about the folks in Texas and how many districts they work with because, like I said at the beginning, we're just one district and one location, but it's so powerful that the students that we're training, we could train them to be excellent, well-rounded school psychologists that have all this experience with the different domains of practice we're able to engage in. But if ultimately the districts where those students are working are not giving them space to engage in that work, then we're still ultimately limiting the, as Greg had mentioned, kind of that end user. We're limiting the impact that we're really having on our students and families. And so it just makes me think about just a broader perspective of the policy implications and how we're really engaging in the practice and what we're doing and needing to shift, at least within our state, away from that more traditional model of special education identification, but shifting it to a broader scope of practice and what can we do as part of this to kind of help move that shift forward.

Elizabeth Chagnon:

Well, I really thank all of you for taking the time to talk to us about your experiences as partners with each other and also other partnerships that you have. Some of the themes that I heard a lot of were that these partnerships do happen in systems and that it's an intricate web that you can kind of map those formal and informal partnerships, but they are what makes it a community and what makes it all so that

you if you're not including each other, it doesn't always work. So you're bringing in the different parts of the community to make sure that you are connected to them. And I love the intentionality behind that and the thoughtfulness behind it. So I hope that the folks who get the chance to listen to this podcast that it sparks for them some questions about who are those connections in our community that we might be missing and how can we leverage existing relationships to make those connections or strengthen those connections.

Annie :

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