ST. CLAIR CATHOLIC DISTRICT SCHOOL BOARD WELL-BEING PATHWAY TO CARE

STUDENT SUPPORT AND WELLBEING TEAM

ST. CLAIR CATHOLIC DISTRICT SCHOOL BOARD REVISED JULY 2019



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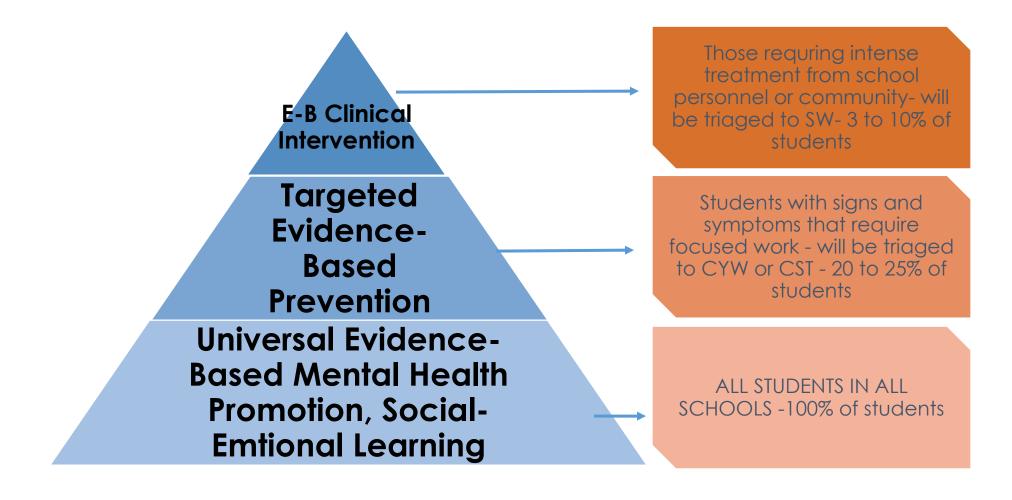
This resource is for use by school board administrators for students with mental health and wellbeing needs. The document refers to a pathway of care for elementary, secondary, into hospital/residential and community agencies. Referral forms can be found in our staffroom under forms. The collection of referral forms will help us to document our seamless transition of students through our educational system and into other systems such as health and children/youth services.

Please realize this document is a guide for your use and it is understood that not all situations are the same. If you have any questions about this document please contact the Mental Health Lead either by email at <u>chris.preece@st-clair.net</u> or by telephone 226-402-1593.

You are requested to make all your staff aware about this document and its use.



School Mental Health Ontario Santé mentale en milieu scolaire Ontario This document has been revised to reflect the work of the Student Support and Wellbeing Team. The goal of the team is to focus on upstream work by addressing the needs of students in tiers one and two. Tier three students will be assisted through a more clinically focussed approach. See below the mental health framework, description of who these students are in each tier and how they are serviced. The role of this team interacts with the Collaborative and Proactive Solutions Team and our work may overlap at times. The role of the CST is to support teachers and students in classrooms and to work with both of them to collaboratively address challenging behaviour issues. This statement reflects the CPS method for working with students. The purpose of this pathway is to provide effective services to our schools and their students.



MENU OF SERVICES FOR SCHOOOLS

E-B Clinical Intervention

Targeted Evidence-Based Prevention

Universal Evidence-Based Mental Health Promotion, Social-Emtional Learning

- Case mnagement and assessment by Social Worker
- Transitions from hospital/residential work with MHAN
- Safety Plans
- Referrals to outisde agencies
- Communication to school teams CYW's, consultants, and CST
- One to one counselling
- Wellbeing for Me Plans
- BRISC: Grade 7-12
- Anxiety Plans
- Screens and assessments by MH professionals
- Cognitive behaviour therapy small group sessions

- Mind Up JK-Grade 8

- Wellness Committees
- Health Communication Bulletin Boards, Contests, etc
- Psychology Foundation Lesson Plans (9-12)
- Everyday Mental Health in the Classroom
- Lunch Breakfast Activities
- Friends for Life

-problems that interfere with <u>daily</u>	-disruptive behaviour, anger, truancy,	
academic social and emotional functioning and overall mental wellbeing	attendance concerns (outward symptoms) -some may experience concerns inwardly, which make it hard to detect -clinically anxious or depressed -withdrawing from school life which can quickly escalate their concerns -mental health problems that are/can become life threatening-suicidal ideation/self harm	<u>Clinical Intervention</u> -SSWT intervention -one to one support/counselling -Wellbeing Plan -School Plan - My Support Plan (suicide & self harm) -referral to additional Community support(s) if appropriate -MHAN involvement if appropriate
-may be predisposed to mental health concerns due to hereditary/family history - acute or chronic circumstances -poverty, social- economic status/discrimination, education	-students may be showing signs of struggling with school performance, social relationships, future opportunities/goals, -social issues-increased shyness around peers -performance on tests not matching ability -recurring physical symptoms without medical explanation (Educators are not mental health professionals and are not expected to provide assessment or counseling support to students who are exhibiting signs of mental health concerns. They are, however, able to observe, document and work collaboratively as part of a team to provide caring support at school.)	Targeted Prevention-SSWT interventions for wellbeing -BRISC & ChYMH & other screens-One to one support - Cognitive Behaviour Therapy -small group work-My Wellbeing Plans - Substance Abuse SupportsTier 2 supports help to prevent the onset of mental health problems by involving caring adult support and evidence based strategies to help students navigate challenges.
-all students/universal Inclusive and calm classroom environments facilitate academic learning and social-emotional well-being, and help students to regulate mood.	-all students learning about life skills such as how to solve problems, resolve conflict, make decisions, find help and cope with stress. -educators/caring adults being Proactive and promoting a whole-school approach to mental health & well-being	Universal Mental Health Promotion, Social- Emotional Learning -SSWT Intervention & Psychoeducation in classroom -MindUp, Friends For Life, Wellness Committees, Good News Assemblies, Everyday Mental Health in the Classroom, Physical Literacy
	and emotional functioning and overall mental wellbeing -may be predisposed to mental health concerns due to hereditary/family history - acute or chronic circumstances -poverty, social- economic status/discrimination, education -all students/universal Inclusive and calm classroom environments facilitate academic learning and social-emotional well-being, and help students to regulate	and emotional functioning and overall mental wellbeingwhich make it hard to detect -clinically anxious or depressed -withdrawing from school life which can quickly escalate their concerns -mental health problems that are/can become life threatening-suicidal ideation/self harm-may be predisposed to mental health concerns due to hereditary/family history - acute or chronic circumstances -poverty, social- education-students may be showing signs of struggling with school performance, social relationships, future opportunities/goals, -social issues-increased shyness around peers -performance on tests not matching ability -recurring physical symptoms without medical explanation-aute or chronic circumstances -poverty, social- education(Educators are not mental health professionals and are not expected to provide assessment or counseling support to students who are exhibiting signs of mental health concerns. They are, however, able to observe, document and work collaboratively as part of a team to provide caring support at school.)-all students/universal Inclusive and calm classroom environments facilitate academic learning and social-emotional well-being, and help students to regulate-all students learning adout life skills such as how to solve problems, resolve conflict, make decisions, find help and cope with stress. -educators/caring adults being Proactive and promoting a whole-school approach to mental health & well-being

Tier 3 - Essential for a Few/ Approximately 3-10% of Students in School

Some students need even more support. One in five students in Canada suffers from problems that interfere with daily academic, social and emotional functioning. We may see these problems in disruptive behavior, anger, and truancy; or, students may experience these problems inwardly, making them hard to detect. Students who are clinically anxious or depressed may withdraw from school life, quickly escalating their problems. Sometimes, mental health problems are life threatening – and the statistics about youth suicide in Canada are troubling. Fortunately, we can help. Vulnerable students need more intensive intervention, at school and in community or hospital settings. Caring educators can help vulnerable students to, from and through the services they need.

Tier 2 - Necessary for Some / Approximately 25% of Students in School

While all students benefit from learning the skills, attitudes, knowledge and habits associated with well-being, more is needed by students at risk of developing mental health problems. Sometimes students are genetically predisposed to having a mental health problem (e.g., family history of bipolar disorder). Sometimes mental health difficulties arise from chronic or acute circumstances. Mental health problems are associated with the social determinants of health – the things that make us healthy, or not – such as poverty, discrimination and education. Without support, these students are likely to struggle with school performance, social relationships, future opportunities and more. This is why is it is important to identify the students who are at risk early – and provide extra support to help them along the way.

Tier 1 - Good for All Students /Whole School-100% Students in School

All students benefit when they develop skills that help them navigate life's challenges and opportunities. These skills can be taught by parents, coaches, faith leaders and peers; but research shows that school can also teach and model these important skills. Schools can teach – in a structured and systematic way – skills like problem solving, conflict resolution, decision-making, coping, and empowerment. We know from research that this type of social-emotional learning also improves academic performance. It's clear than mental well-being matters for all students – and this is embedded in Ontario's vision for students, <u>Achieving Excellence</u>.

CRISIS GUIDELINES FOR SCHOOLS

Crises range in scope and intensity from incidents that directly or indirectly affect a single student to ones that impact the entire community. Crises can happen before, during, or after school and on or off school grounds. The definition of a crisis varies with the unique needs, resources, and assets of a school and community.

The Student Support and Wellbeing team would like to assist with the needs of every student but we do know that there are skilled individuals in schools that are more than capable of assisting these students as well. At any time, Chris Preece or the SSWT member connected to your school can be available to help advise on next steps.

What has been done by the school and staff?

- ✓ Has a staff member had a caring conversation with the student?
- ✓ Has the student had the opportunity to speak with a caring adult?
- ✓ Have the strategies from a support plan been used, if one has been developed?
- ✓ If suicide ideation is involved, contact Chris Preece for how to proceed.
- ✓ Behaviour Management System Supportive Preventive Strategies were used by a trained staff member:
- ✓ Proximity control
- ✓ Cues/verbal requests
- ✓ Changing antecedents
- ✓ Use of non-judgmental empathetic responses to decrease anxiety
- \checkmark Limiting Space and Tools
- ✓ Setting limits
- ✓ Providing boundaries and Praise and Encouragement
- ✓ Giving choices for defensive behaviours
- ✓ Conflict Resolution
- ✓ Problem Solving
- ✓ Removal of peers
- ✓ Time away/Cool Down Zone'

If the above have been tried and there is still a need, please contact your Mental Health Lead for further advice and recommendations.

At any time, the MH Lead or the SSWT member connected to your school can be reached by email or phone to help advise on next steps.

HEALTH AND WELLBEING: PATHWAY TO CARE ELEMENTARY

School staff member identifies student's needs. School staff can refer to "Classroom strategies for supporting students towards positive mental health" to support students.

A Staff fills out initial referral form found in the staffroom website under Special Education/forms. Principal approves referral and submits the form. Principal to call home and consent is followed up by a SSWT member.

IMPORTANT: ONCE A REFERRAL IS SUBMITTED IT WILL BE TRAIGED TO THE APPROPRIATE TEAM FOR REVIEW (ABA, CST, SSWT)

Some Guidelines for Talking with Students

Here are some ground rules to follow in student-adult conversations about students' personal difficulties. For example, they should:

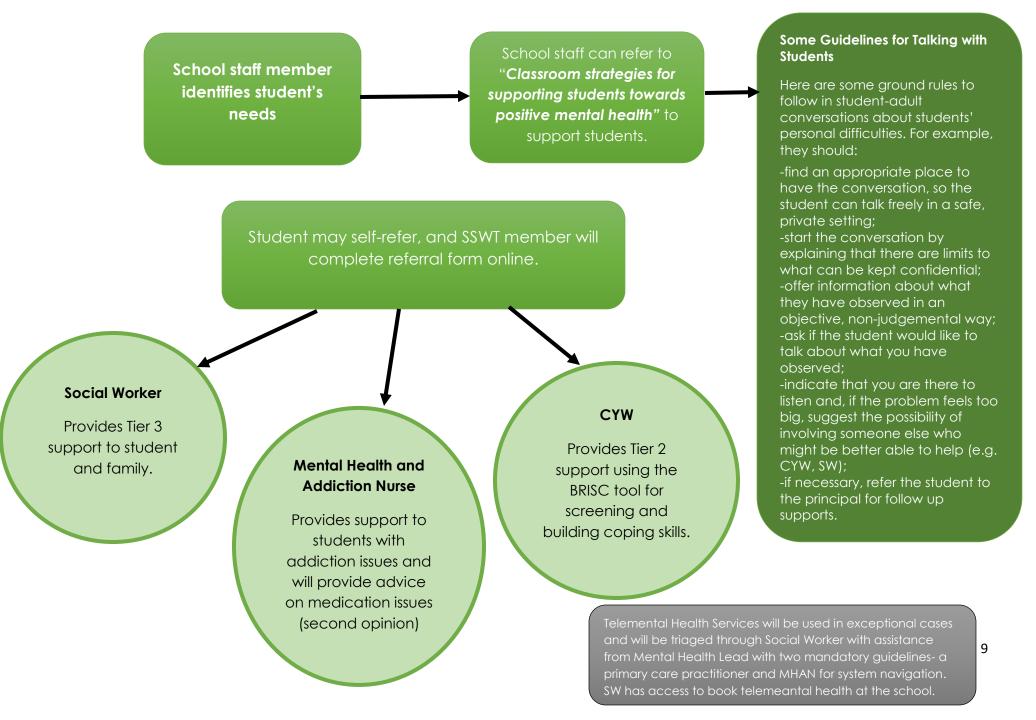
-find an appropriate place to have the conversation, so the student can talk freely in a safe, private setting; -start the conversation by explaining that there are limits to what can be kept confidential; -offer information about what they have observed in an objective, non-judgemental way; -ask if the student would like to talk about what you have observed;

-indicate that you are there to listen and, if the problem feels too big, suggest the possibility of involving someone else who might be better able to help (e.g. CYW, SW);

-if necessary, refer the student to the principal for follow up supports.

Telemental Health Services will be used in exceptional cases and will be triaged through Social Worker with assistance from Mental Health Lead with two mandatory guidelines - a primary care practitioner and MHAN for system navigation. SW has access to book telemental health at the school.

HEALTH AND WELLBING: PATHWAY TO SECONDARY



HEALTH AND WELLBEING: PATHWAY TO CARE HOPSITAL AND RESIDENTIAL PLACEMENTS

by this plan.

Student is admitted to emergency, hospital warc and/or residential care

Principal and or/hospital personnel notify Mental Health Lead, and CCAC MHAN. Nurse will follow up with system navigation and attend care plan meeting for student. Nurse will ensure seamless transitions in and out of hospital and residential care and will report back to MH lead and principal. MH lead will ensure that BST and principal of Special Education and Consultant are notified. For suicidal student refer to suicide prevention protocol.

> MHAN to complete targeted education with families.

Nurse to follow up with student in hospital and residential - to provide appropriate documentation to school board (principal, MH lead) about progress.

Social worker may refer to CYW if student deemed Tier Two.

RETURN TO SCHOOL:

Transition to school meeting is held with involvement of <u>all identified school</u> <u>personnel</u> including the Mental Health and Addictions Nurse. The CYW, SW or nurse will monitor the student's mental wellbeing for a minimum of 6 weeks after return to school and implement best practice strategies with the student. The intent will be to eventually discharge the student after a period of 6 to 8 weeks. Documentation will be completed and tracked for outcome purposes.

HEALTH AND WELLBEING: PATHWAY TO CARE COMMUNITY REFERRALS

For suicidal student refer to suicide prevention protocol.

Student requires community support.

Principal along with Social Worker will refer the student and their family to outside agency. SSWT member will complete the referral form with family and student.

Targeted education provided to family by social worker.

DIRECT CALL

Chatham Kent Children Services Intake Call 519-352-0440, press number 2 for mental health, which will take you to an intake screener – will need parent consent.

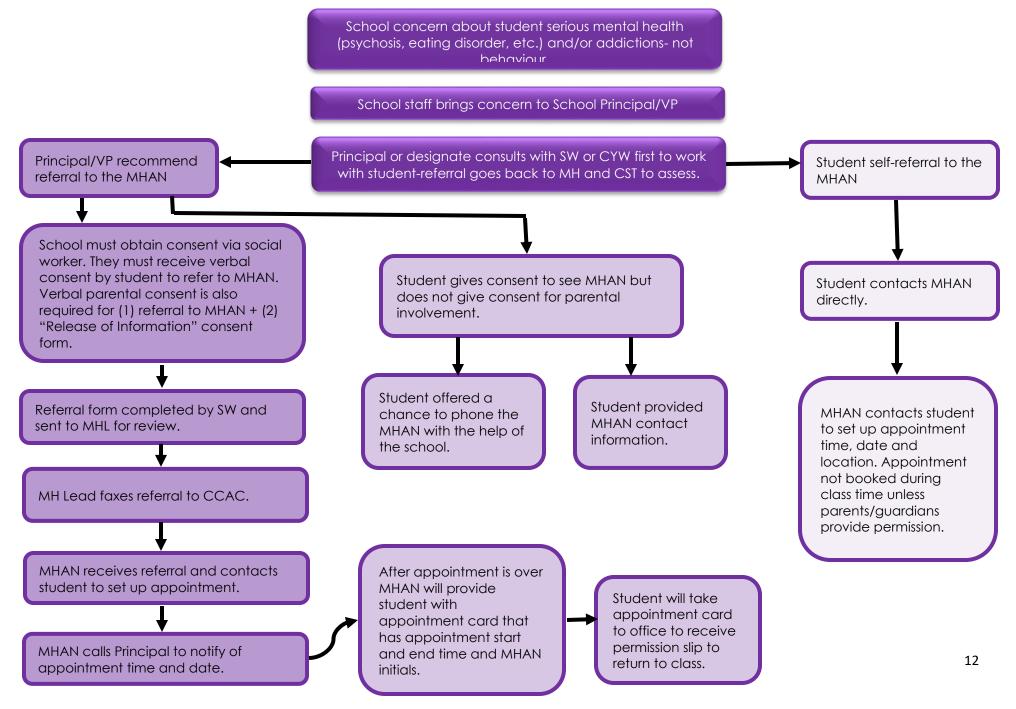
FAX REFERRAL FORM

Western Area Youth Services Chatham FAX: 519-354-7230 ATT C. Johnson *Short term services FAX REFERRAL FORM Rebound FAX: 519-344-8024 ATT: Intake *Short term services FAX REFERRAL FORM

St. Clair Child and Youth Services FAX: 519-337-7750 ATT: Intake- Walk in clinic *Clinical

Social Worker completes follow up to determine if student received services at one of these agencies. If not refer to other appropriate agency (see chart).

STUDENT REFERRAL FOR MENTAL HEALTH & ADDICTIONS NURSE FLOWCHART



SARNIA LAMBTON COMMUNITY RESOURCES AND SUPPORTS

Health Behaviour	Agency	Contact Information	How to Refer	Ages and Services available
Mental Health- Depression, Anxiety, Autism, etc.	St. Clair Child and Youth Centre 129 Kendall Street, Point Edward, ON N7V 4G6	519-337-3701	Must use school board referral form Self-referral 12+	Ages 0-17 Walk in Clinic Tuesdays 12-6:30 pm. for ages 6-17 Therapeutic Family Program Referrals, School Community Intervention Program, Crisis Referrals, Family Solutions Program, Dual Diagnosis Contact STARRting Point Telephone: (519) 336-0120, Ext. 257
Early Psychosis Concurrent Disorders Life Skills	Canadian Mental Health Association	519-337-5411 OR 1-855-211-2642	Self-referrals via crisis line Phone in referrals by professional	Usually 14+ <u>BUT</u> will take younger students
Problems with healthy relationships, assault, abuse	Sexual Assault Survivors Centre Sarnia-Lambton	519-337-3320	Self-referrals via crisis line Referrals by professionals	Ages 14+ 24/7 crisis line
Substance Use and Abuse, Addictions	Bluewater Health Withdrawal Management Program	519-332-HOPE (4673)	Must be a self-referral	Ages 8+ Open daily (not a crisis line)
Eating Disorders	Bluewater Health Eating Disorders Outreach Program	519-464-4400 Ext. 5217	Self, individuals, physicians, social worker and other health care providers	All ages Provide assessments, counseling, education, referrals to London Health Sciences if needed
Gender, healthy relationships, justice	Sarnia-Lambton Rebound	519-344-2841	Self, individuals, schools, justice, community agencies	Focuses on adolescents grades 7 and up Provides leadership supports, youth engagement activities, restorative justice, group sessions, PASS program, options program

Health Behaviour	Agency	Contact Information	How to Refer	Ages and Services available
Family issues, mental health, depression	Family Counseling Centre Distress Line	519-336-3300 or1- 888-347-8737	Self-referrals, professional referrals	High Risk, Therapeutic counseling for a variety of issues with an access point to intensive mental health services, respite reliefs
Substance Abuse and relationship issues	Lambton Public Health Unit	519-383-8331 Ext. 3547	Self-referrals and professional referrals	12+ healthy relationship and confidential counseling
Substance Abuse during pregnancy	Pregnancy Support Centre	519-383-7115	Self-referral and professional referrals	12+ confidential counseling
Healthy Relationships, abuse, mental health	Sexual Assault Centre Sarnia Lambton	519-337-3154	Self, professional referrals	Girls groups, education sessions, crisis line (24 hr.),
Mental Illness	Sarnia Mental Wellness Centre	Email only edcsal@outlook.com	Self-referral and professional referrals	Peer to peer and family to family support for people dealing with a mental illness. The open door drop in centre is for people 14 years and older who are using the mental health system. They provide daily therapeutic activities such as women's support group, men's support group, bipolar, depression, anxiety, cooking classes and more. Open Monday to Friday 11:00 – 3:30 p.m.
Healthy relationships, abuse, mental health	Women's Interval Home Sarnia Lambton	519-336-5200	Self-referral, professional referrals	Crisis line, emergency shelters, girls educational programs, counseling
Grief counseling	ST. Joseph's Hospice	519-337-0537	Self-referral, professional referrals	Grief support focused on coping skills

CHATHAM-KENT COMMUNITY RESOURCES AND SUPPORTS

Health Behaviour	Agency	Contact Information	How to Refer	Ages and Services available
Mental health and illness	Chatham Kent Children's Service	All referrals go through intake screening for mental health and development 519-352-0440 press O and ask for intake screener- referral form is required	School, primary care provider, social worker, hospital	0 to 18 Service coordination with mental health, development or autism Short term assessment and treatment Specialized treatment of offence prevention (STOP) School Intervention Partnership Program (SCIP) The Arson Prevention Program (TAPC)
Crisis, Emotional, behavioural or mental health issues	Western Area Youth Services (WAYS)	519-354-4095	School referrals, self, family	Crisis Services Youth groups and support, family respite care (0-6), youth justice, foster care
Crisis- mental health issues	Canadian Mental Health Association	519-436-6100 OR 1-855-211-2642	Self	Crisis line for youth ages 14+
Mental Health and Addiction Services and Gambling	Chatham Kent Health Alliance	519-351-6144	School referral, parent, primary care provider, self	Ages 14 + struggling with addiction issues
Mental Health and Addictions	Chatham Kent Community Health Centre	519-397-5455	Self or family	Chatham, Wallaceburg, Walpole, Pain Court Programs for youth, addictions, mental health
Youth at risk, bullying, justice – Alternative Programs	Restorative Justice Chatham	519-380-0931	Community agency, police, schools for positive strides program only	Positive Strides Program- youth at risk 6-18 years Restorative Justice programs Pre Charge Division Program
Mental Health	Chatham Kent Mental Health Network	519-351-3100	Self, community agencies	Advocacy, education, family support, recreation support
Family Issues, Behavioural, Mental Health, access coordination	Family Services Kent	519-354-6221	Self, community agencies,	KIDS Team, supervised access, counseling for families

Health Behaviour	Agency	Contact Information	How to Refer	Ages and Services available
Mental health and illness	Chatham Kent Children's Service	All referrals go through intake screening for mental health and development 519-352-0440 press O and ask for intake screener- referral form is required	School, primary care provider, social worker, hospital	0 to 18 Service coordination with mental health, development or autism Short term assessment and treatment Specialized treatment of offence prevention (STOP) School Intervention Partnership Program (SCIP) The Arson Prevention Program (TAPC)
Justice, mental health, criminal activity	Chatham Kent Police Services	519-352-1234	All citizens	Mental health assessment with police, crisis, suicide
Mental Health Promotion, Substance Abuse and relationship issues	Chatham Kent Public Health Unit	519-352-7270	Self-referrals and professional referrals	12+ healthy relationship and confidential counseling
Healthy relationships, mental health, abuse	Chatham Kent Women's Centre	519-354-6360 OR 1-800-265-0598	Self-referral	Crisis counseling, emergency shelter, individual counseling for women and children
Grief and illness counseling	VON- Kids Circle Support Program	519-354-0430 OR EMAIL Erin.crow@von.ca	Self-referral; referrals from schools	Provides supportive care to children and teens from ages 4 to 18 who are facing a life-threatening illness themselves, the life-threatening illness of a loved one, or experiencing the loss of a loved one; in school support groups are offered

PROVINCIAL RESOURCES AND SUPPORTS

Kids Help Phone: 1-800-668-6868 National Suicide Prevention Lifeline: 1-800- 273-8255 Mental Health Services Ontario: 1-866-531-2600 Mental Health Helpline: 1-866-531-2600 Problem Gambling Helpline: 1-888-230-3505 Drug and Alcohol Helpline: 1-800-563-8603