



Evaluation of School-based Mental Health Services in Hennepin County

Understanding the Impact of Services on Students

S E P T E M B E R 2 0 1 6

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Introduction

It is estimated that 10 to 20 percent of children in the United States at any time have significant emotional or behavioral disturbances. It is further estimated that only one in five children receive services to address these concerns. Yet research shows that timely access to quality mental health services can reduce emotional and behavioral problems and enhance children’s wellbeing and success. Schools often function as the “de facto mental health system” for children.¹ In a 1995 study, Burns and colleagues found that 70 percent of children with a mental health diagnosis received services through the school (compared to 40% served in community mental health, 16% served in child welfare, and 11% served in primary care). For almost half of these children, schools were the sole service provider. School-based mental health, which broadly includes mental health services offered in a school setting, is an important strategy to meet the needs of children and their families.²

And while school-based mental health service providers in Hennepin county collect and report a large amount of data (e.g., demographics of their clients, type of services provided, and results of clinical assessments), there is still a lack of understanding about the perceived effect of these services by school staff, families, and students receiving services.

Through funding provided by the Hennepin County Children’s Mental Health Collaborative (HCCMHC), Wilder Research led an evaluation to better understand the perceptions of and experiences with school-based mental health in Hennepin County, and to identify opportunities to improve these services. Using in-depth interviews and surveys, school staff, students, and their families were asked to provide their perceptions about the clinicians’ role in schools, the relationships between school staff, families, and students, and the benefits and impacts these services had on students, parents/caregivers, and schools. This report highlights the findings from this work.

Students can't learn when they have mental health issues getting in the way. By helping students to deal with their depression, anxiety, and other issues, we are giving them access to the tools they need to learn and be successful in school.
– School staff

¹ Calfee, C.S. (2004). *The basics of organizing and funding school-based mental health services*. In K.E. Robinson (Ed.). *Advances in School-Based Mental Health Interventions: Best Practices and Program Models*. Kingston, NJ: Civic Research Institute.

² As cited in Atella, J. (2011). *MN Kids Database: School-based mental health*. Retrieved from https://www.mnkidsdata.org/MKD_SBMH%20101%20briefpub.pdf

Methods

This evaluation draws information from a number of different sources, including in-depth phone interviews with parents and caregivers of elementary and middle school students who received school-based mental health services and with high school students who received school-based mental health. Additionally, school staff, parents, and caregivers provided information about their experience with school-based mental health through web surveys. Data collection occurred between March and June of 2016.

School sample selection

The sample of agencies and their schools were determined in the following way:

- The school has at least 1 FTE of a clinician’s time in the school building.
- The agency has been in the school building since Fall of 2013 or earlier.
- The agency follows Hennepin County’s School Mental Health Framework document.

A total of 34 schools in Hennepin County met the eligibility criteria. The study sampled four of each school type: elementary schools, middle schools, and high schools. Additionally, the sample selection considers urban and suburban locations, socioeconomic status of the school population, and the various agencies represented. An economic indicator considered in the sample selection is the schools’ estimated percent eligible for Minnesota Health Care Programs (MHCP).

Participation by eligible third party mental health care providers was voluntary, and only agencies who wanted to contribute to the qualitative study were involved. See Appendix for additional details on the schools and agencies selected.

In-depth interviews

To qualify for the interviews, the student receiving school-based mental health services had to meet the following criteria:

1. The student has been engaged in mental health services in the school building within the past year.
2. The student has had a diagnostic assessment completed in the past 365 days.

3. The student is enrolled in a school that was randomly selected (as explained in the section above).
4. The student has had at least 5 services in the past year, which can include a mix of billable and ancillary services.

Clinicians submitted consents and assents for eligible parents and students. Wilder Research randomized the sample and completed phone interviews with eight parents and caregivers and eight high school students. Interviews were done in both English and Spanish.

- **Parent Interviews (N=8):** The eight parents and caregivers of students receiving school-based mental health services represented six different schools and five different agencies.
- **High School Student Interviews (N=8):** Three of the four high schools selected to participate in this project provided consent and assents to Wilder Research. These three schools and two school-based mental health agencies are represented among the interviewees.

Online surveys

Survey criteria for eligible parents, caregivers, and students were less strict and included receiving any number and type of mental health services. School staff, parents and caregivers, and high school students were invited to complete an anonymous online survey.

Participating agencies and clinicians received a web link and email script from Wilder Research to be forwarded to a school staff listserv, parents and caregivers of children receiving school-based mental health services, and high school students receiving school-based mental health services. Parent and caregiver surveys were also offered in Spanish. For the Spanish surveys, clinicians provided families with paper forms and a self-addressed envelope to be returned to Wilder Research.

A total of 71 school staff and 20 parents and caregivers responded to the surveys. Insufficient numbers of high school students completed the online survey to be useful for analysis and reporting.

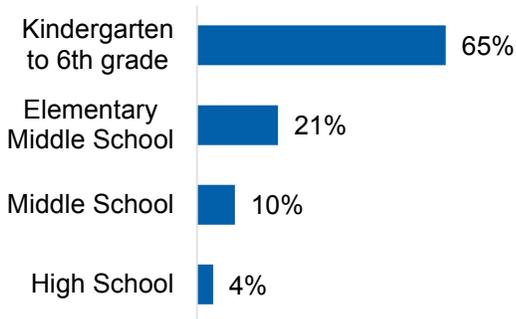
Description of survey respondents

School staff survey

Most school staff worked in elementary schools and most were teachers.

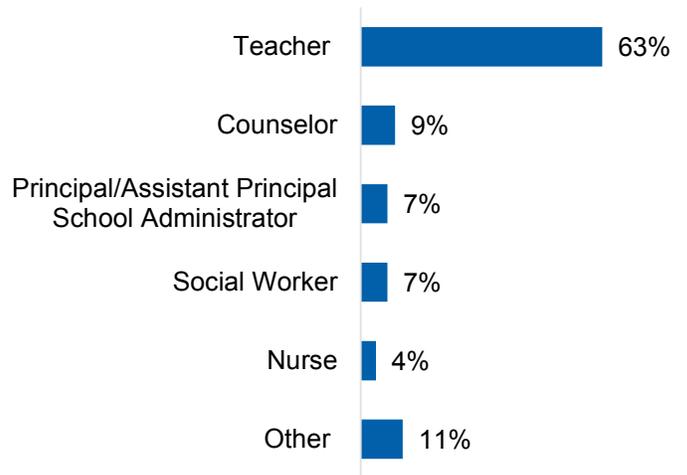
About two-thirds of the school staff survey respondents worked in elementary schools (65%) and most of the respondents were teachers (63%; Figures 1 & 2).

1. School staff survey: Type of school (N=71)



Note: Total may exceed 100% due to rounding

2. School staff survey: Role in school (N=56)



Other included special education paraprofessional, counseling specialist, school psychologist, librarian, after school coordinator, and behavior specialist.

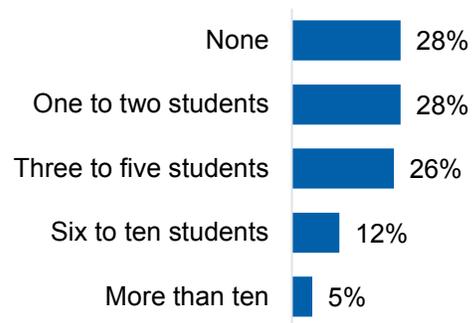
Years of experience working in the schools were fairly evenly distributed across three ranges.

One-third of the respondents (36%) have worked in their current school for three years or less, 33 percent have worked in their current school between four and ten years, and 31 percent worked in the current school for more than ten years (Figure 3). More than half of respondents have referred between one and five students to school-based mental health services in the past year (54%; Figure 4).

3. School staff survey: Number of years worked in current school (N=45)



4. School staff survey: Approximate number of students referred (N=57)

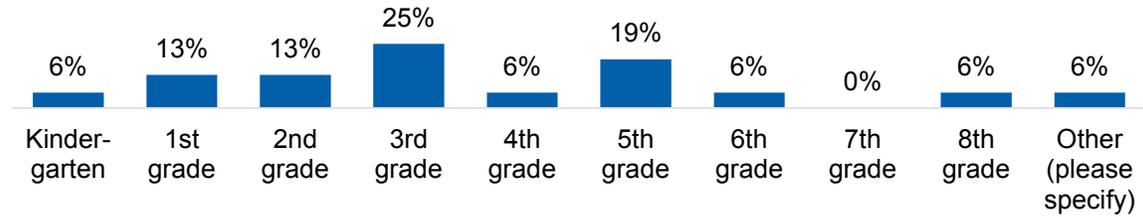


Parent caregiver survey

Over half of the survey respondents had a child in the third grade or lower.

About one in four of the parent caregiver survey respondents had a child in the third grade (27%). One in five had a child in the fifth grade (20%; Figure 5).

5. Parent caregiver survey: Child's grade level (N=16)

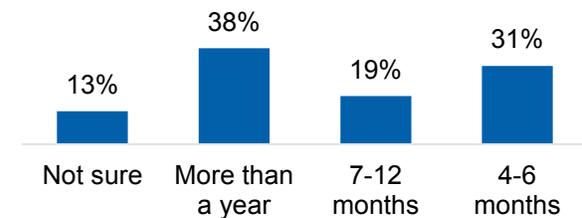


Note: Total may exceed 100% due to rounding

Half of the respondents had a child receiving school-based mental health services for a year or less.

About one-third had a child receiving school-based mental health services for more than one year (38%), while 13 percent were unsure (Figure 6).

6. Parent caregiver survey: Length of time child worked with clinician (N=16)



Limitations

Data used in this report draws from a number of different sources and were constrained by several factors, including budget and varied permissions across the schools. Therefore, some key limitations should be considered when interpreting the results.

To allow for a greater response rate of survey respondents, the school staff survey was sent out to email lists by participating agencies. Some school districts had stringent requirements to conduct evaluation activities and were unable to participate. Also, some of the agencies were more responsive in their participation. Therefore, not all school staff received the same rate of invitations to the survey.

Due to budget constraints, web surveys for parents, caregivers, and students were only available in English. Paper surveys were only made available in Spanish. A decision to provide paper surveys in Spanish was made because a couple schools served high populations of Spanish speaking families. Additionally, access to a computer was a barrier for some parents and caregivers.

Findings

This section summarizes data gathered through the school staff survey as well as the parent and caregiver survey. It also synthesizes interviews with parents, caregivers, and students. This section is broadly divided into four parts based on the related research questions.

- **Clinicians' role in schools:** The first part of this section focuses on how clinicians are used in the school building (e.g., do they participate in all/most school meetings, do they consult with school staff on a regular basis?).
- **Working relationships between school staff, families, and students:** How does having mental health services in the school buildings impact the way that school staff work with their students and families?
- **Benefits of school-based mental health:** What benefits do stakeholders see in having mental health services located in the school building?
- **Impact of services on students:** What do caregivers, students, and school staff see as the impact of services on students? What kinds of changes do they see in the students who receive services?

The survey also collected data on satisfaction and whether or not respondents would recommend the service to others. Data on satisfaction is summarized at the end of this section.

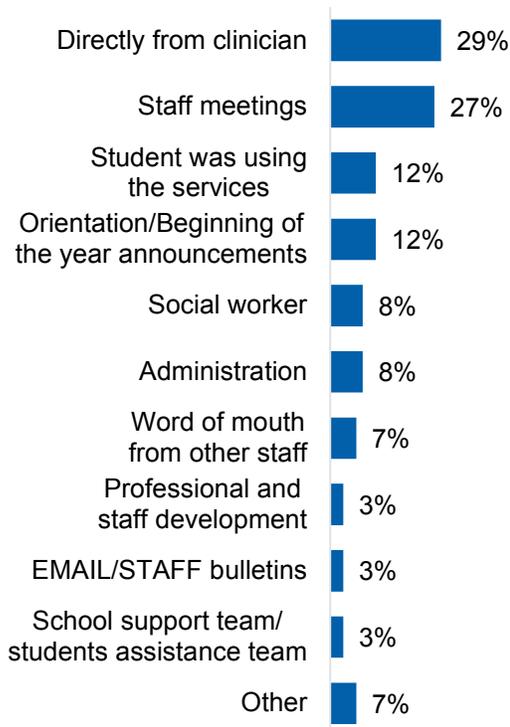
Clinicians' role in schools

The collaborative was interested in learning how clinicians are used in the school building.

Almost all school staff surveyed were aware of the school-based mental health services available in their school (97%).

Over half of the staff surveyed learned about the services either directly from the clinician or during staff meetings (56%). Twelve percent learned about the services because a current student was receiving the services. Another twelve percent learned about the services during orientation or announcements in the beginning of the year (Figure 7).

7. School staff survey: How school staff learned about services offered by clinicians (N=59)



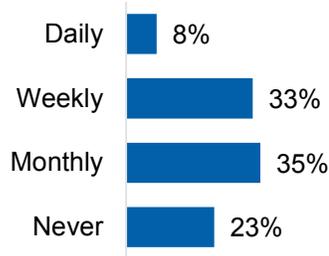
Other included having the services in place for a number of years, searching for help with a troubled student, and location of clinician's office in close proximity to classroom.

Total percentage exceeded 100% because some respondents indicated more than one source in learning about the clinician.

Two-thirds of school staff survey respondents worked with a clinician monthly or weekly.

Most of the respondents reported working with the clinicians on a monthly (35%) or weekly (33%) basis. Eight percent work with the clinicians daily, while 23 percent never work with the clinicians (Figure 8).

8. School staff survey: How often respondents worked with the clinician (N=60)

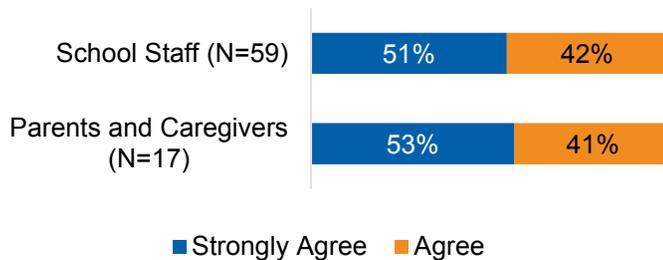


Note: Total may not be 100% due to rounding

School staff, parents, and caregivers felt that the explanations and descriptions of the clinician’s services were clear.

When respondents were asked about their perceptions of the explanations and descriptions of the mental health clinician's services, almost all school staff (93%) as well as parent and caregivers (94%) felt that they were clear (Figure 9).

9. Explanations and descriptions about the mental health clinician's services are clear



A greater percentage of parents and caregivers than school staff felt that they understood the goals of the clinician’s services.

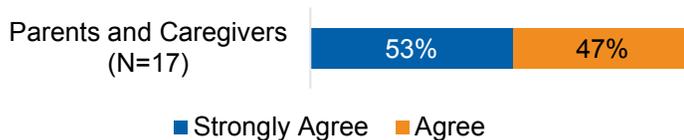
When respondents were asked about their perceptions of the goals of the services, all parents and caregivers felt that they understood the goals of the services provided to their child, while 84 percent of the school staff felt that the goals of the services provided by the mental health clinician are clear (Figure 10).

10. Understanding clinicians’ goals

Goals of the services provided by the mental health clinician are clear



I understood the goals of my child’s meetings with the clinician



School staff would like more information on the services offered by the clinicians.

In the school staff survey, when asked how school-based mental health services can be improved, some school staff shared that they would like to better understand the clinician’s goals so that they can better support those services. One school staff also mentioned that they would like more time for teachers and clinicians to work on goals. Another school staff shared that they would like more information about what is offered by the clinicians as well as information on how to refer students.

Communicate what the mental health services are actually doing with the students so that I can clearly understand.

Talking about goals so that teachers understand more of what is going on and can support.

[Provide] more information and time for teacher and clinic to work on goals.

[Provide] more of an overview of what is offered by the school based mental health therapist and how to go about referring students if it is needed.

Families' and students' expectations

Before starting services, some parents were concerned that school-based mental health services would be expensive, that their parenting skills would be questioned, or that services would be detached and unemotional.

In the interviews, parents were asked to think back to the time before their child started receiving mental health services and to describe what they thought the services were going to be like. A couple parents were concerned that it would be expensive. One parent was worried that people would think she was a bad parent. Another parent was concerned that the child would have to miss school. One parent described how surprised she was at the comprehensiveness of the services.

Well maybe that they were very expensive, a cost was involved. That we're not going to be able to get the help needed. I thought that they could think that I was not a good parent, that they might report us to the authorities. I went to an appointment with my daughter and the psychologist explained what my daughter's issues were and the psychologist came up with the activities. Since this was the first time I have ever gone through something like this I was not aware of how to plan any activities.

That they were going to be expensive and that my son would have to go to a location away from his school. I also thought he would have to miss school a lot and that I had to be present with him at all times.

We were a little apprehensive. We thought it was going to be clinical. We thought it was going to be mechanical. Like straight out of the books. That is how we perceived the process to be.

I didn't think they would be as good as they were. What we experienced before was okay, there wasn't a direct in-school portion—that made a huge difference. They gave me more guidance. I didn't anticipate that I would get to meet once a month. I didn't think he would get that observation in the classroom. There was also a lot of collaboration with teachers. I expected some of this stuff, but I didn't think that it would be as comprehensive as it was.

Students also described how they thought the services were going to be before they started. A couple thought they were going to be prescribed medication.

Personally, I thought it was going to be like the other therapist that I have gone to all my life. See the therapist and they would just prescribe me meds. The nurse said that I should try it once and after a few times, it was different. It was actually pretty fun. They weren't just talking about me. It wasn't always about me. I had other therapist that would ask about how I was feeling and it was all about me. The school therapist is more casual. We talk about all sorts of things. It was way different than the usual therapist that I am used to seeing. They didn't just prescribe me meds, they actually listened and talked to me. I liked it after a while.

I don't know. I was scared. My mom said that with therapy she was going to put me on medication and stuff. It wasn't like that at all. She just talks to me about my problems and we just talk about it. I like it. It wasn't scary at all. They didn't put me on any medication.

Collaboration between school staff and clinician

In the surveys completed by school staff, almost all respondents felt that school staff and the clinician worked together effectively (92%) and nine out of ten felt that the mental health clinicians were well integrated in the schools.

In the survey, school staff were asked in various ways about collaboration with clinicians. Almost all school staff felt that staff and the clinician work together to address problems among students (94%) and that the working relationship between school staff and the mental health clinician were effective (92%; Figure 11). Nine out of ten school staff strongly agreed or agreed that the mental health clinician is well integrated in the school and that there was a process in place to refer students in need of mental health services.

11. School staff survey: School staff and clinicians working collaboration (N=59)

	Strongly agree	Agree	Disagree	Strongly disagree
School staff and the clinician work together to address problems among students.	53%	41%	3%	3%
The working relationship between school staff and the mental health clinician is effective.	58%	34%	7%	2%
The mental health clinician is well integrated in our school.	51%	39%	7%	3%
There is a process in place to refer students in need of mental health services.	49%	41%	10%	0%

Clinicians built strong relationships with school staff and communicate in a way that is easy to understand.

Almost all school staff reported that they have a good working relationship with the mental health clinician (96%) and that the clinician communicates in a way that is easy to understand (96%; Figure 12).

12. School staff survey: Working relationship with clinicians (N=59)

	Strongly agree	Agree	Disagree	Strongly disagree
I have a good working relationship with the mental health clinician.	69%	27%	3%	0%
The clinician communicates with me in a way that is easy to understand.	62%	34%	2%	2%

School staff appreciate the ability to access a mental health professional to address students’ needs.

In the survey’s comments section, school staff pointed to the ability to work with a mental health professional as one of the biggest benefits to having the provider located in the school building.

We make sure to always refer to [the clinician] for insight and help. She has really helped us with some tough students and situations and having her in the building has made those success stories happen.

Teachers can receive guidance on how to best support students’ needs in their classroom.

Collaboration with staff, student, and families. Easier access for the families. Advice on how to work with student from a professional. Integrating the strategies the mental health provider is using into the classroom.

We have a lot of trauma at our school. There are many kids who would not receive services outside of school. This gives them an opportunity to connect with someone at school and then connect as a whole team with parents/guardians at home.

In the interviews, some parents also discussed their appreciation for the collaboration between clinician and school staff.

Initially what impressed me was that they were so collaborative. I felt like we were all working together as a team to achieve our goal for them. I felt like it was really teamed nicely. Having the therapist in the school was essential for him.

Working relationships between school staff, families, and students

The collaborative was interested in how having mental health services in the school buildings impacted the way school staff work with their students and families.

School staff are more mindful of mental health needs with mental health services available in schools.

Nearly nine out of ten of the school staff respondents reported that they are more mindful of mental health needs with mental health services available in school (88%; Figure 13).

13. School staff survey: Mental health awareness (N=59)

	Strongly agree	Agree	Disagree	Strongly disagree
I am more mindful of mental health needs with mental health services available in the school setting.	46%	42%	12%	0%

In the survey's comments section, staff described how they are more mindful of mental health needs because of the services being located in school.

The therapist gives me insights into students and we discuss effective ways of communicating with and working with the students of mine that she sees; it is very helpful to me in my teaching practice.

A lot of our families don't know what kind of services they need or what kind of services are available for them. Students come to me with their issues, and in my mind I know all I have to do is pick up the phone and talk to our school mental health provider.

The biggest benefit is having [clinician] in house and students knowing they can go see her if they are really struggling. We communicate with her much more easily and we make sure to always refer to her for insight and help.

The school based therapist provides another perspective on mental health, challenges our students and families face, and cultural perspectives.

Collaborative work between clinicians, school staff, and families help parents and caregivers to feel more connected to school.

In the interviews, several parents and caregivers pointed to the collaborative nature of the clinicians' work as helping families to feel more connected to schools. Parents felt that they were part of the team and that they feel comfortable to seek information about their child at school.

Absolutely [feel more connected to school]. Because of the collaborative care that took place. Whenever we had school meetings, we are able to have our therapist there with us. The collaborative care model has been the biggest part of this.

There have been much teamwork. [Clinician] and I have talked to his counselor at school. We have done a lot of teaming on things. I feel I have a relationship with his teachers. He was brought into the middle school to meet some teachers before he got there. It's just nice to be doing it as a team.

My relationship with the school has been really good. I don't feel like I'm a pain when I call to see what is going on. They are very welcoming and informing about the services and what is going on with my child.

We are in contact all the time. I'm going to start volunteering at my child's school this coming school year. [My child] has changed a lot and is participating in a variety of activities, like playing sports.

Since receiving mental health services, three in four parents and caregivers reported that their child's relationship with teachers and other school staff improved.

In the survey, parents and caregivers were asked to rate their child's relationship with teachers and other school staff. More than half reported a lot of improvement in their child's relationship with teachers (63%) and other school staff (56%; Figure 14).

14. Parent caregiver survey: Perceptions about impact of school-based mental health on child's relationships (N=16)

Since receiving services from the school-based mental health clinician, I feel... (N=16)	Improved a lot	Improved a little	Stayed the same	Gotten worse
My child's relationships with teachers have...	63%	13%	25%	0%
My child's relationships with other school staff who are not teachers have...	56%	19%	25%	0%

Note: Total may not be 100% due to rounding

In interviews, parents, caregivers, and students described improved relationships with the teachers.

One of his more recent goals is being able to approach the teacher and feel comfortable. His goals have been right spot on for things that he needed. He has a pretty good relationship with teachers in school now. – Parent caregiver interview

I do feel he gets along better. It's been very positive for him with kids at school and teachers and stuff. – Parent caregiver interview

I am more relaxed. I get irritated really easy when it comes to a lot of stuff. My anxiety gets to me. Just like talking in general. I'm really a shy person. When it comes to teachers, it made it easier to tell them what I wanted and needed and when I didn't understand I could ask questions. It made it easier to do that. – Student interview

Helps me be better with my teachers. I didn't go ask my teachers questions before, but now I am not afraid to ask them questions. – Student interview

Additionally, students in the interview described feeling that they can better talk to others.

It kind of helps me be able to talk to people better. I'm not as closed off as I used to be. I can express my feelings better to everyone.

Before I started, I was like really depressed. I didn't have anybody to talk to. Afterwards, I feel like I have someone to talk to and people actually care about me. Now I feel like I can talk to people and have people to talk to.

I would say, when it came to certain things that has happened to me, I can think about it without getting overly emotional. I am able to deal with talking to people. It made it easier for me socially, basically.

I feel like they have made it easier for me to get along with and understand other people.

Benefits of school-based mental health

The collaborative was interested in what benefits the stakeholders see with having mental health services located in the school building.

School staff felt that students were more likely to receive mental health care because it is school based.

Almost all school staff felt that students were more likely to receive mental health care because the provider is located in the school building (98%).

15. School staff survey: Students are more likely to receive mental health care (N=59)

	Strongly agree	Agree	Disagree	Strongly disagree
Students are more likely to receive mental health care because the provider is located in our school building.	81%	17%	2%	0%

School staff felt that the school setting helped make mental health care feel more welcoming to parents, particularly for low-resourced families.

Many school staff pointed to the benefits of increased accessibility for students who otherwise would not receive services because parents or caregivers may not have the resources to know-how to seek out services or even consider mental health services as a benefit. School staff also mentioned that the location of the services in school is a benefit because of the familiarity for parents and caregivers thus making it more welcoming.

Having the access to services with a person the parents have seen in the school, not some person in an office "downtown" makes it more welcoming. Parents are more willing to speak with someone they know, or at least have seen around the school. Parents are comfortable coming to school and it is easier for the students to get to appointments since they can be seen during the school day and wouldn't have to miss school.

Many parents don't know how to get help, and don't always know how to get their child to the location of the help. Having it at school solves that.

We have a lot of trauma at our school. There are many kids who would not receive services outside of school. This gives them an opportunity to connect with someone at school and then connect as a whole team with parents/guardians at home.

It is important for students, whose parents may not have the resources to seek out services, to have the option to receive mental health services in the school. In addition, many families may not even be aware of the need until the referral is made here at the school.

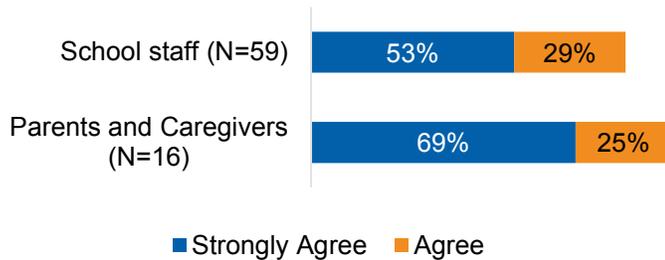
One student also described how many students do not have access to the services outside of school.

I think it's really an amazing thing to have because so many kids don't have access to it outside of school. So being able to talk to someone who can help you with things that your guidance counselor can't.

Most school staff, parents, and caregivers agreed that is easy for students to receive mental health services in school.

Most school staff (82%) as well as parents and caregivers (94%) agreed that it is easy for students or their child to receive mental health care at school (Figure 16).

16. It is easy for students/my child to get mental health care at school



Parents and caregivers reported it would be more challenging to access mental health services outside of the school setting.

Parents and caregivers were asked about barriers and challenges to accessing mental health services not located in schools. All parents and caregivers felt that it would be more challenging for their family if their child received care from a provider not located in school. About seven in ten parents reported that there would likely be more out-of-pocket expenses if their child received care not located in the school (69%; Figure 17).

17. Parent caregiver survey: Perceptions about accessibility of school-based mental health care

	Strongly agree	Agree	Disagree	Strongly disagree
It would be more challenging for my family if my child received care from a provider not located at the school. (N=10)	50%	50%	0%	0%
There would likely be more out-of-pocket expenses if my child received care from a provider not located at the school. (N=16)	38%	31%	25%	6%

School staff said school-based mental health reduces barriers and increase accessibility to services.

In the survey’s comments section, many school staff described the convenience and reduction in barriers as a benefit of having mental health services located in the schools.

Many families do not have transportation or are too busy to take their child to an appointment. Having services in school increases access for many families.

It is more comfortable for some families to know that the service is provided during the day ~ no transport needed and no time off of other commitments as a parent/family.

We have families that wouldn't receive mental health services due to financial reasons or lack of transportation, and they are getting the help they deserve.

Many families would not be able to provide this for their child because of transportation.

It does not require parents to make a special trip with their children. It is convenient and easy.

Many parents are unable to get their student to outside services due to transportation issues, work schedules, etc.

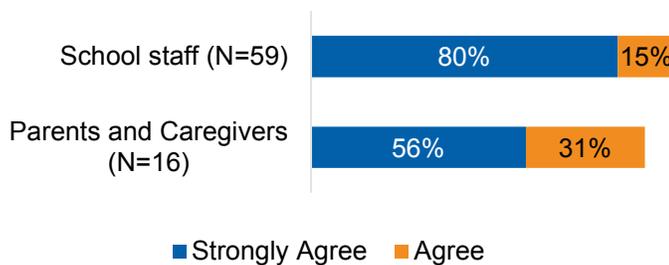
It makes it possible for students to receive services without parents having to take time off work (because many can't) and it keeps attendance up (because students aren't missing whole days because of an appointment).

I think certainly for families, the convenience of receiving services onsite is valuable. If a parent takes off work, go pick up their child and go see a therapist, it may take up to 3 hours. I think it is a huge thing for families, because I know my kids needs service. It's just about how am I going to get them to him. I think it is very helpful.

Being located in the school building increases the ability of the clinician to help students.

Almost all school staff (95%) and most parents and caregivers (87%) felt that the clinician is better able to help students or their child because they are located in the school building (Figure 18).

18. The mental health clinician is better able to help students/my child because they are located in the school building



Stigma reduction

Location in the school setting helps reduce stigma around mental health services.

Many school staff also described the benefit of school-based mental health services as helping to alleviate the stigma associated with mental health needs. School staff explained that because it is located in the schools, it seems to be better accepted.

Firstly, the services here lessen the cultural stigma that many of our families hold about mental health services. This being said, it opens the door for understanding the process of have mental health services. They are then open to guidance and suggestions that the workers have for them in seeking services within the community because they have fostered a sense of safety and trust via the services here at school. The idea of having mental health services is very new to a majority of our families. This is a great way to help them understand the need for such services and to get them connected with community agencies that they had no idea were available to assist them.

I think having mental health services in the school takes out the stigma of needing help. It allows students a safe person to work through difficult matters.

Students are seen in a school setting by a trusted adult and are given tools to help them succeed. I don't think it is seen as a negative thing in school and helps all students realize that it is ok to get help if you feel it is needed.

The kids accept this as being something needed at different points in life and there is no stigma attached.

Some parents see mental health as a stigma, so getting services goes against their beliefs and principles. But, when they are provided by the school, they see them more as a part of their students' education and as a way to help them succeed in school, and so they are more prone to allow their kids to get mental health services. This is a huge issue with some cultures.

In the interview, one parent also pointed to the normalizing of mental health services as a benefit of having it located in schools.

[The clinician] does a nice job of being open. She tells him that she meets up with 30 kids a week. I think it really helps remove that stigma. A lot of kids feel like it is just part of their week and removes that stigma of it.

All parents understood why their child needed services from the clinician.

In the survey, parents were asked if they understood why their child needed therapy or counseling services from the clinician. All parents and caregivers strongly agreed (71%) or agreed (29%; Figure 19).

19. Parent caregiver survey: Perceptions of why mental health services were needed (N=17)

	Strongly agree	Agree	Disagree	Strongly disagree
I understood why my child needed therapy and/or counseling services from the clinician.	71%	29%	0%	0%

Some school staff also mentioned that the benefits of having school-based mental health services includes the ability to help meet the needs of the whole child.

In the survey’s comments section, school staff mentioned the value of being able to address the students holistically. School-based mental health helps meet needs beyond academics by also addressing emotional and behavioral needs.

Having mental health care services provides options and opportunities for students to receive services who would likely not receive them otherwise. It's valuable to embed the services in with education in order to address the whole student.

Families are more likely to participate in their children's education and mental health interventions. It helps address the whole child - academically, emotionally, and behaviorally.

Impact of services on students

Lastly, the collaborative was interested what caregivers, students, and school staff see as the impact of services on students.

Most school staff, parents, and caregivers agree that students are more interested in what is going on in class and are more connected to the school community.

Since referring the students to mental health services, most school staff felt that the students are more connected to what is going on in class (87%). Three in four parents and caregivers agreed or strongly agreed that their child is more interested in what is going on in class (75%; Figure 20).

20. Connection and interest to classroom activities

These students are more connected to what is going on in class



My child is more interested in what is going on in classes



■ Strongly Agree ■ Agree

Similarly, 91 percent of school staff felt that the students are more connected to the school community. Additionally, 88 percent of parents and caregivers agreed or strongly agreed that their child feels a greater sense of belonging to the school community (Figure 21).

21. Connection and belonging to the school community

These students are more connected to the school community (teachers, students, other staff)



My child feel a greater sense of belonging to the school community



■ Strongly Agree ■ Agree

Students said school-based mental health services helped them to feel more connected to school.

In the interviews, when asked if the school-based mental health services helped the students to feel more connected to school, most students felt that it did. A couple students explained that they are better able to open up to people. A couple students described feeling that they have someone they can trust and feel safe with at school. One student shared that because of the therapist, they are participating in poetry activities at school which helped them feel more connected.

I talk to people more. I also joined more school clubs and programs. It made it easier for me and it made me open up better.

It's easier to talk to people now. I feel more open. Everybody goes through problems and I am starting to learn that.

It makes me feel more connected in the fact that I now know that I have a safe space at school if anything were to happen and I always have someone that is, for a lack of better term, on my side.

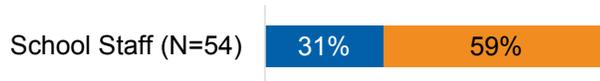
Now I know that I have someone in the school that trust for sure. Before I had teachers and stuff that knew some stuff, but now I have my school therapist who I can always talk to and work through my school with me.

I read a lot of poetry. My therapist has given me a lot of resources of others doing poetry or are in to poetry in my school, so I definitely feel more connected.

In the online surveys, nine in ten school staff felt that the students are more involved in school (90%), while three in four parents felt the same (75%; Figure 22).

22. Perceptions of increased school involvement

These students are more involved in school



My child is more involved in school



■ Strongly Agree ■ Agree

Most school staff agree that the students they referred have had behavioral improvements.

School staff were asked about changes in the behavior of the students they referred. Most strongly agreed or agreed that the students had a decrease in behavioral incidents (85%; Figure 23).

23. School staff survey: Perceptions about impact of school-based mental health services on students (N=54)

Since the students were referred for mental health services...	Strongly agree	Agree	Disagree	Strongly disagree
These students had a decrease in behavioral incidents.	28%	57%	13%	2%

Some parents also feel that the clinician helped improve their child’s behavior in school.

In the interviews, some parents described their child’s decreases in specific behavioral problems, including meltdowns, walking out of class, and talking back to teachers, as well as better avoiding conflict with others. One parent also described a specific coping strategy used by the child.

Here's where we started, when he first started, he would have meltdowns for several hours. It was uncontrollable. He would hit, break things. You couldn't get his attention, because he was in his own little rage. Now he has not had a major one like that for 6 months after he started seeing [the clinician]. Now what I see, there is just not that rage or anger and those hateful feelings he has.

Basically it just helped her in school. She was having problems walking out of class and problems with one particular student. She also had a problem with talking back to the teachers. It helped her with not walking out of class and respecting her teachers more. She also now avoids the student that she has conflict with.

He's showing respect to everyone and talks to them at their appropriate levels. He's not using many bad and naughty words now, he's using more of a better vocabulary.

I think he has improved in all areas of his life. He's learned to control his stress by counting, taking time-outs and his behavior. He's calm and is confronting his issues instead of screaming/yelling etc. He's talking about his issues now when they are happening.

When asked how they would describe the impact of services on their child, parents and caregivers shared the improvements in their child’s ability to better talk about their feelings.

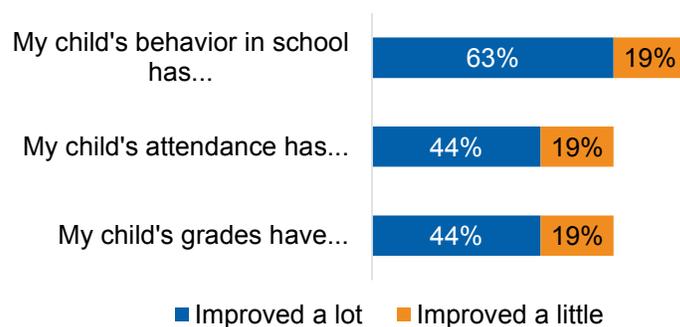
He has been more willing to talk to me about his feelings now. Before he couldn't do it. He can tell me when he is angry and what he is angry about. He is aware of it.

He definitely expresses his feelings better than he used to. He used to get very upset.

Most parents and caregivers reported improvement in their child’s behavior, attendance, and grades.

When parents and caregivers were asked to rate levels of improvement in their child’s behavior, attendance, and grades, most parents and caregivers reported improvements in all three areas (Figure 24). However, a couple parents also indicated that their child did not have any issues in this area and that improvements in their child’s academic performance was not their goal.

24. Parent caregiver survey: Perceptions about impact of school-based mental health services on child’s educational outcomes (N=16)



In the interviews, several parents and caregivers also described the improvement in their child’s grades and attendance. One parent shared that their child no longer attempts to stay home from school. Another parent described how their child would now talk to them about school when he comes home.

They also were able to overcome her obstacles she was having at school, she did not want to go to school anymore and was not interested in her school work, she missed her dad very much at first. She does not make the excuses about not wanting to go to school anymore. [The clinician] has changed her attitude.

He was non-functional in school when he first came. Now he has B's and C's. He comes home and tells me about school, which never happened before.

His grades are better. He pays better attention in class. They have given us techniques to calm him down now as well.

Students also described improvement in their grades in the interviews.

In the interviews, students explained that the clinicians helped them to better cope with mental health issues which helped them to focus on school work.

When I do therapy, I am less likely to act outrageous, which in turn helps me concentrate on my school work.

Actually I did way better. I graduated with all A's and B's. I had someone to talk to about my problems and not worry about it. I got more stuff done and it helped a lot.

It helped a lot. I remember talking to her. Things were crazy. I was suicidal and stuff. Ever since I started talking to her, she has made me feel better. I'm better now. More relaxed.

We talk about my grades a lot, because they were getting behind. She taught me a bunch of ways to stop procrastinating and focus and get things done.

[It helped me do better in school] because it's opened up my relationship with teachers and I'm able to express how I feel more clearly.

Whenever I was stressed, I would go and talk to the therapist. Now I do way better in school. She is there to help me.

One student felt that her good grades were not a result of the mental health services.

It didn't really change. It wasn't really school I needed help with. I just need more help with myself, like my inner self and my personal self. I am already on the A honor role. Which I did by myself.

Most parents and caregivers reported improvement in their child's relationships with other students.

Since receiving mental health services, about eight out of ten parents and caregivers reported that their child's relationships with other students have improved (82%; Figure 25).

25. Parent caregiver survey: Perceptions about impact of school-based mental health on child's relationships (N=16)

Since receiving services from the school-based mental health clinician, I feel.... (N=16)	Improved a lot	Improved a little	Stayed the same	Gotten worse
My child's relationships with other students have...	63%	19%	19%	0%
My child's relationship with me has...	56%	25%	19%	0%

Parents shared that their child made friends.

In the interviews, when asked how they would describe the impact of services on their child, parents and caregivers shared how their child has made friends and improved relationships with their peers.

Students in particular, he had a really tough time. He struggles with social cues. Since he has been in Junior high, he has now some really close friends. He has always been good around me, but it is just amazing what they have done with him working with kids his age.

She has many friends now. She talks to everybody, she knows all her classmates' names, has a great memory. She is much better with me now, before she would go and be in her room all by herself. She's the youngest girl and I call her my baby so I spoil her. She is becoming independent again and doing things for herself.

He has better friends now. He has better relationships with other kids.

Students in the interviews shared how they are getting along better with others.

I am not as shy and more outgoing, that really helps me get along better with people.

[The services] make me a little more sympathetic to [others]. I don't just act out or become easily frustrated with people.

I can tell [the clinician] what is going on personally with my friends. If [my friends and I] have an argument, I don't just cut them off anymore. We talk through things now.

Most parents and caregivers also reported improvements in their own relationships with their child.

Eighty-one percent of parents and caregivers reported that their own relationship with their child has improved (Figure 25). In the interviews, parents, caregivers, and students described ways their relationships with each other improved.

They helped me get closer and pay more attention to my daughter. I drew away from her when my younger child was born and was not paying as much attention as I should have. The problems stopped, my daughter walks to school, she's laughing and her strange behavior stopped. We talk all the time now. – Parent caregiver interview

With my mom, we have better conversations. I feel like I know better and where she is coming from. – Student interview

Me and my mom wasn't really close. We are still not that close, but we are way better than before. My therapist has given me ways to talk to her and good times to talk to her. She has basically taught me how to do that. – Student interview

It helped a lot, especially with my mom and me arguing all the time. I can actually talk to her. It helped me a lot more than I thought it would. I thought I would just go in there and talk for an hour and leave and everything would be the same, but it has really helped a lot. – Student interview

It is way easier to talk to my parents about how I feel and also opening up to people. – Student interview

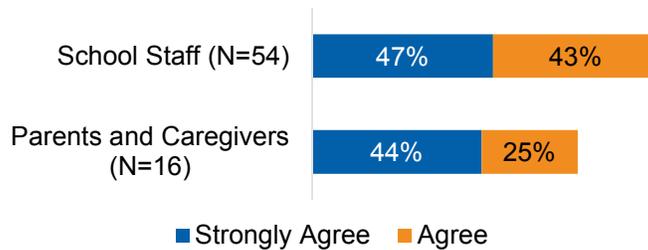
Nine in ten school staff felt that students would be more likely to graduate on time.

School staff and parents and caregivers were asked whether they think the students or their child will be more likely to graduate on time because of the school clinicians. Nine in ten school staff felt that some students would be more likely to graduate on time (90%; Figure 26). About seven in ten parents and caregivers felt that because of the school

clinician, their child will be more likely to graduate on time. Similar to grades and attendance, it should be noted that a few parents felt that their child did not have academic performance issues.

26. Perceptions of school-based mental health services and graduating on-time

Because of the school based mental health services, I think some students/my child is more likely to graduate from high school on time.



Satisfaction with services

Almost all school staff, parents, and caregivers would recommend school-based mental health services to other schools and families.

Overall, almost all school staff value having mental health services available in the school building (97%), is satisfied with the support provided by the clinician (97%) and would recommend having a school-based mental health clinician to other schools (95%; Figure 27).

27. School staff survey: Satisfaction (N=59)

	Strongly agree	Agree	Disagree	Strongly disagree
I value having mental health services available in the school building.	90%	7%	3%	0%
I am satisfied with the support provided by the clinician.	66%	31%	2%	2%
I would recommend having a school-based mental health clinician to other schools.	76%	19%	5%	0%

Note: Total may exceed 100% due to rounding.

Similarly, almost all parents and caregivers were satisfied with the support their child received from the clinician (94%) and would recommend the clinician to other families (94%; Figure 28).

28. Parent caregiver survey: Satisfaction (N=16)

Please select how much you agree or disagree with the following statements.	Strongly agree	Agree	Disagree	Strongly disagree
I am satisfied with the support my child gets from the clinician.	69%	25%	6%	0%
I would recommend the clinician to other families.	63%	31%	6%	0%

In the survey, 88 percent of parents reported that during visits with clinicians, they felt comfortable discussing things they felt were important. The remaining 12 percent did not provide an explanation for why they did not feel comfortable.

Ongoing communications from clinicians help families feel engaged.

In the interviews, many parents shared that they find the communication and updates from clinicians helpful.

She is really hands on. She always calls with updates and things. She tells me what works and what doesn't work.

I know what is helpful is every 6 weeks, [the clinician] and I connect and gives me an update.

They kept me informed about the time they would take him from his regular class and bring him back. They would give him medications to calm him down...They would take him for walks, take a nap when he was frustrated, tired, etc. he would also have interactions with other kids his age that were not his everyday classmates/friends.

The communication is ongoing. Constant connection between our family and the therapist. Very engaging. Very friendly and very relational.

I liked that I could be in constant contact about my child's behavior and involved in every step of this process.

Another parent expressed their appreciation for having access to someone who she can reach out to about her child’s needs and added that the clinician helped increase the parent’s confidence.

I met with her for an hour every month and that was a life saver for me. It helped me so much. We did a treatment plan and goals and things like that. Just getting an opportunity to talk to someone one on one to talk about his needs. She is very supportive and helped me feel confident. That made a difference for me.

Recommendations

Make school-based mental health available to more students.

Staff often mentioned that they wanted more openings for other students to receive mental health services at their schools. Some staff felt that there is a need for additional clinicians.

Services that in the past we were unable to find, are now available to our students. Student mental health needs were going unmet for far too long. Now, if we could only increase the number of providers. We have far too many children on a waiting list.
– School staff survey

Expand school-based mental health services.

Some also felt that students who have high needs may need access to additional services.

Capacity! We have many very high need kids that need regular services, and several significantly high need kids where regular office visits are not enough. To be able to take on a high case load, especially as the year goes on, and better/more flexible services to meet the needs of our highly mobile population. Access to day treatment space for our most needy kids, who often wait months to get into day treatment, and are then quickly dumped back out because their behaviors are "too significant." – School staff survey

Leverage the opportunity to help schools become increasingly trauma-informed.

In the surveys, school staff indicated a greater awareness of mental health needs with a clinician located in the school building. Though there may already be efforts in place to help schools be more trauma-informed, any opportunity to increase mental health awareness should be leveraged not only for students with disruptive behaviors, but also for students who may be experiencing mental health issues but exhibit them in less noticeable ways.

Outline clear procedures and protocols for collaboration between clinicians and school staff.

Although most school staff indicated that there is a process in place to refer students, others may need more structure. When asked how school-based mental health services can be improved, one school staff respondent suggested providing protocols to the entire staff throughout the school year. In the survey, some school staff said they would like

more information on the services offered by the clinicians, how to refer, and a better understanding of the goals so that they can better support.

Include school-level decision-makers in the evaluation activities to increase response rates.

Because of the varied requirements among the schools and their ability to participate in the evaluation, decision-makers representative of schools should participate in implementing evaluation activities to promote greater and more accessible participation.

Plan for developing survey instruments that can be given in various formats.

Future evaluation activities around school-based mental health should consider ways to be more inclusive around language needs, reading barriers, and access to computers. In addition to Spanish, the structured surveys should be offered over the phone in several different languages including, Somali, Hmong, Karen, Oromo, and other commonly spoken languages in the Twin Cities Area. Additionally, in-depth interviews should be offered in person, as it is more relational and may yield more candid responses.

Appendix

Sample selection

Letter to school

Consent and assent forms

Interview instruments

Survey instruments

A. Sample selection

Participation in this study is voluntary. Only agencies who want to contribute to the qualitative study will be asked to be a part of it. The sample of school staff, caregivers and students will be determined in the following way:

Eligibility criteria for the schools:

- The school has at least 1 FTE of a clinician's time in the school building.
- The agency has been in the school building since Fall of 2013 or earlier.
- The agency follows the HCSM framework document.

Schools eligible

A total of 34 schools in Hennepin County met the eligibility criteria. The study proposes to sample 4 each of school types: elementary schools, middle schools, and high schools. Additionally, the sample selection considers urban and suburban locations, socioeconomic, and the various agencies represented. An economic indicator considered in the sample selection is based on the schools' estimated percent eligible for Minnesota Health Care Programs (MHCP).

The grades range for school types are defined as follows:

- Elementary: grades pre-K through 6th
- Middle: grades 7th and 8th
- High: grades 9th through 12th

Of the total schools eligible, 16 were definitively "elementary" schools, including only grades preschool through 6th grade. However, other schools were less clearly defined as "elementary" and "middle." Six of the 34 schools were grades pre-K through 8th or kindergarten through 8th. These six schools include both the grades of "elementary" and "middle" school students. Only two of the eligible schools were clear "middle" schools (6th - 8th grade and 7th - 8th grade). To address the overlapping grades of "elementary" and "middle" school students, the group selected eight schools from the combined school groups of "true" elementary schools, the overlapping elementary-middle schools, and the "true" middle schools. The students and caregivers were parsed out by students' grade level to be included in the study.

A1. Number of eligible schools by school type

School Types	# of schools eligible	# of schools selected
ELEMENTARY: grades includes pre-k through 6 th	16	combined school types=24 sample of 8 from these schools
ELEMENTARY-MIDDLE: grades range included Pre-K-8 th and K-8 th	6	
MIDDLE: grade range 6 th -8 th and 7 th -8 th	2	
HIGH: grade 9 th -12 th	10	sample of 4

Selection process

- Randomization and other considerations:** To begin the process of selection, the 34 schools were pooled and a random number was assigned to each school. The group present at the meeting reviewed the list and discussed the schools based on their location, economic indicator, and the agencies working in the schools. Although the randomized numbers were not the ultimate deciding factor for the selection process, seven of the 12 schools selected happened to be in the top 12 randomly assigned numbers. The other five were not in the top 12 randomization. These five were selected based on their economic indicator, agency in service, and school type (Figure A2).

Selected schools

The four high schools selected to be in this study include: Patrick Henry, Southwest, Robbinsdale Armstrong, and Osseo Park Center. The eight middle and elementary schools include: Robbinsdale Middle School, Green Central Community School, Folwell Fine Arts Magnet School, Lucy Laney Community School, Bethune Community School, Valley View Elementary, Oak Point Elementary, and Wilshire Park Elementary.

- Urban and Suburban locations:** Of the 12 schools selected, six each are from urban locations and suburban locations. (Out of the 34 total eligible schools, 18 were urban and 16 were suburban).
- Agencies providing school-based mental health services:** For the agencies represented in the sample selected, three schools each were serviced by Washburn Center for Children and People incorporated, two schools each by the Minneapolis Health Department and Guadalupe Alternative Programs (GAP), and one school each by Watercourse Counseling and Nystrom (Figure A3).

- **Neighborhoods and cities:** For the six schools located in urban Minneapolis, their locations varied throughout the city. One high school is in the Camden neighborhood of north Minneapolis, and the other high school is in the Linden Hills neighborhood of southwest Minneapolis. The four urban elementary schools are also distributed throughout Minneapolis, including the following neighborhoods: Cleveland, Near-North, Standish-Corcoran, and Powderhorn. The suburban schools include the city of Brooklyn Park, Robbinsdale, Plymouth, Bloomington, Eden Prairie, and St. Anthony (Figure A4 and A5).

The schools received a letter from Wilder Research to notify them of their study selection and invite them to participate. The schools were asked to identify middle and high school students and the caregivers of elementary school children based on the following criterion:

- The student has been engaged in mental health services in the school building for at least three months
- The student is enrolled in a school that was randomly selected (as explained in the section above). Other factors that may be considered in the selection include:
 - Race and ethnicity of student
 - Gender of student

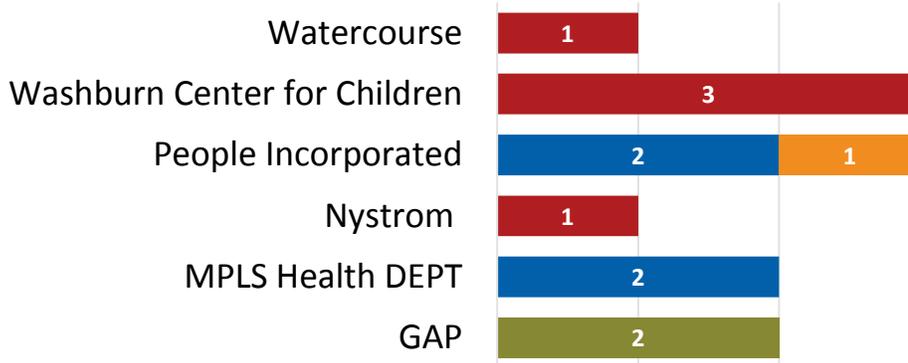
In addition, the school was asked to take special care in selecting students who have a range of experience with the school-based mental health service, and not just those who have had relatively more positive and successful experiences.

A2. Selected schools by urban or suburban, agencies represented, and estimated % eligible for MHCP

	Urban (N=6)	Grades	% eligible for MHCP	Suburban (N=6)	Grades	% eligible for MHCP
High School						
MPLS Health DEPT	Patrick Henry High*	9-12	87%	-		
MPLS Health DEPT	Southwest High*	9-12	36%	-		
People Incorporated	-			Robbinsdale Armstrong	9-12	34%
People Incorporated	-			Osseo Park Center	10-12	65%
Middle School						
People Incorporated	-			Robbinsdale Middle school*	6-8	61%
Elementary-Middle School						
GAP	Green Central	K-8	95%	-		
GAP	Folwell Fine Arts*	K-8	86%	-		
Elementary School						
Watercourse	Lucy Laney	Pk-5	99%	-		
Washburn Center for Children	Bethune Community*	Pk-5	100%			
Washburn Center for Children	-			Valley View Elementary	K-5	82%
Washburn Center for Children	-			Oak Point Elementary	K-6	24%
Nystrom	-			Wilshire Park Elementary	K-5	?

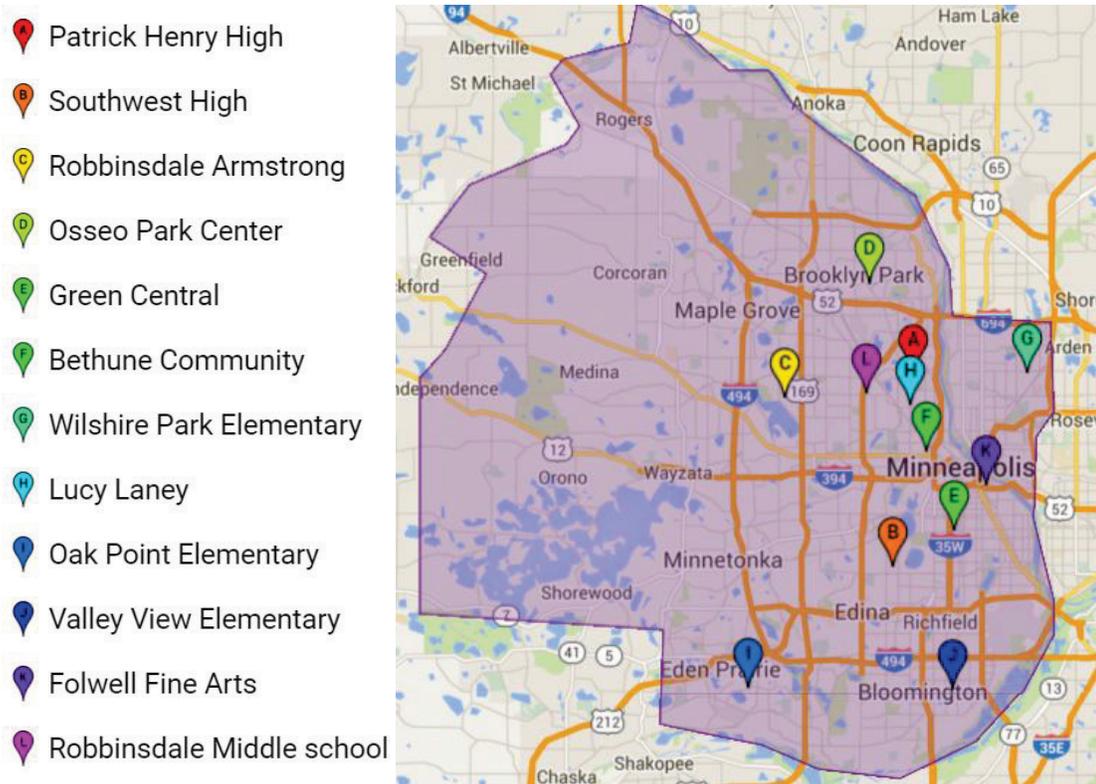
* These five schools were not in the top 12 randomization.

A3. Agencies working in selected schools



■ HIGH SCHOOL ■ MIDDLE ■ ELEMENTARY-MIDDLE ■ ELEMENTARY

A4. Map of selected schools



A5. School neighborhoods, cities, and estimated % eligible for MHCP

Urban	Suburban
High School	High School
Minneapolis (Camden): 87%	Brooklyn Park: 34%
Minneapolis (Linden Hills): 36%	Robbinsdale/Plymouth: 65%
Elementary-Middle School	Middle School
Minneapolis (Standish-Corcoran): 86%	Robbinsdale: 61%
Minneapolis (Powderhorn): 99%	
Elementary School	Elementary School
Minneapolis (Cleveland): 95%	Bloomington: 82%
Minneapolis (Near-North): 100%	Eden Prairie: 24%
	St. Anthony: N/A

B. Letter to school

March 2016

To Whom It May Concern:

Hennepin County Children’s Mental Health Collaborative (HCCMHC) is working with [Wilder Research](#) to collect qualitative information about school-based mental health services in Hennepin County. The mission of HCCMHC is to improve access to and resources for high-quality, trauma-informed mental health services for children, youth and families within Hennepin County.

Your school is one of the 12 schools that has been selected to be in this study. The study’s purpose is to better understand the impact of having mental health services located in the schools. The study also provides an opportunity to identify and improve these services.

As part of the study, Wilder Research plans to conduct the following data collection activities with families and students who have received mental health services in school:

- **Parents/caregivers** may be asked to participate in an **interview** over the phone with staff from Wilder and/or an **online survey**. If they are selected and complete the interview, they will receive a \$10 Target gift card for their time.
- **Students (high school ONLY)** will be invited to complete an **online survey** that asks questions about their thoughts and experiences with having clinical services in their school. Some may also be asked to participate in an **interview** with staff from Wilder Research. The interview will be done at a convenient location, and should take no more than 30 minutes to complete. Any student who completes the interview will be given a \$20 Target gift card for their time. Only students who have a parent/caregiver’s signed consent will be asked to participate in these activities. They will also be asked to sign a youth assent form prior to completing the survey or interview.

In addition, **staff** who work at your school will be asked to complete a brief **online survey** that asks questions about their thoughts and experiences with having clinical services in the school building.

Wilder Research will work closely with HCCMHC and participating school-based agencies to identify eligible participants for the evaluation. All information will be kept confidential with no identifying information reported.

The proposed timeline for the interviews and surveys is April – May of 2016.

Results of the study can be made available to schools by contacting the school-based mental health agency, HCCMHC, or Wilder Research. To learn more about the Hennepin County Children’s Mental Health Collaborative, please visit:

<http://www.hccmhc.com/>

If you have any questions about this evaluation, please feel free to contact me with any questions.

Thank you,



Julie K. Atella
Research Scientist

C. Consent and assent forms

PARENT/CAREGIVER CONSENT FORM

Wilder Research is conducting a study for Hennepin County Children’s Mental Health Collaborative (HCCMHC). The purpose of the study is to better understand the impact of having mental health services located in the school building.

By signing this document, you are giving your child (or youth in your care) permission to participate in an evaluation of mental health services located in the school building. With consent, your child (or youth in your care) may be asked to complete one or both of the following:

- An online survey that asks questions about their thoughts and experiences with having clinical services in the school building.
▪ An interview with staff from Wilder Research that will take place March-April 2016. The interview will be done in person, at a convenient location, and should take no more than an hour to complete. Any child who completes the interview will be given a \$20 Target gift card for their time.

The interview is for an evaluation that Wilder Research is conducting for the Hennepin County Children’s Mental Health Collaborative (HCCMHC). The results of this evaluation will help HCCMHC better understand/improve their services in the future.

Please note the following:

- We will ask your child (or youth in your care) about their thoughts on the services your child received from school. We will also be asking your child to share what impact the program has had on them, socially, academically and behaviorally.
▪ All information collected through this project will be private. Your name and your child’s (or the youth in your care) name will not appear in any document describing the results.
▪ Your child (or youth in your care) will receive a Target gift card for \$20 once they have completed the interview.
▪ Participation is completely voluntary. Your decision to participate or not to participate in the interview process will not affect your child’s (or your youth in care) receipt of services through the school.
▪ Information provided will be kept confidential unless the evaluation staff is told that your child (or youth in your care) or someone else in your household is in immediate physical danger, for instance being a victim of abuse or neglect.
▪ Your authorization is valid for the duration of the project, which ends Aug 2016. However, you may revoke this authorization and discontinue your participation in the evaluation at any time by calling 651.280.2658.

Please indicate your consent below by checking the appropriate response for each item. I know that my child has the right to refuse any questions asked.

YES NO

- [] [] I give permission for my child (or youth in my care) to participate in the surveys.
[] [] I give permission for my child (or youth in my care) to participate in the interview.

Child’s name (Please print)

Caregiver’s name (Please print)

Date

Caregiver’s signature

Contact the Project Director, Julie, with any questions (651.280.2658-voice or julie.atella@wilder.org)

YOUTH ASSENT FORM

Wilder Research is conducting a study for Hennepin County Children’s Mental Health Collaborative (HCCMHC). The purpose of the study is to get your thoughts about the mental health services in your school.

You may be asked to participate in an interview and/or an online survey about your experiences. The interview will be done in person, at a convenient location, and should take no more than thirty minutes to complete. By completing the interview, you will receive a \$20 gift card as a thank you.

Please note the following, for the study:

- You may be asked about the services you received from your school and about how these services affected you.
▪ All information collected through this project will be private. Your name will not appear in any document describing the results.
▪ Anything you say during this interview will be kept confidential unless you tell us that you or someone else in your household is in immediate physical danger, for instance being a victim of abuse or neglect.
▪ Participation is completely voluntary. Your decision to participate or not to will not affect your services through the school.
▪ Your parent or caregiver must give permission for you to participate in the interview.
▪ You will receive a Target gift card for \$20 once the interview is completed.

Please sign this document and provide your contact information if you agree to participate in this study.

School based mental health student’s name (please print)

Date

School based mental health student’s signature (please sign)

Initials of School Based Mental Health Staff

Please indicate the best way(s) of reaching you:

☐ Email: _____

☐ Cell phone: _____

☐ Other: _____

Please contact Julie at Wilder Research with any questions about the evaluation (651.280.2658-voice or julie.atella@wilder.org)

Evaluation of School Based Mental Health Services in Hennepin County
PARENTAL OR CAREGIVER ASSENT FORM

Wilder Research is conducting a study for Hennepin County Children’s Mental Health Collaborative (HCCMHC). The purpose of the study is to get your thoughts about the mental health services your child (or youth in your care) receives in school.

By signing this document, you are giving Wilder Research permission to contact you and invite you to participate in an interview over the phone or in person, at a convenient location. The interview should take no more than thirty minutes to complete. By completing the interview, you will receive a \$10 gift card as a thank you.

Please note the following:

- You may be asked about the services your child (or youth in your care) received from school and about how these services affected the child.
- All information collected through this project will be private. Your name and your child’s name (or youth in your care) will not appear in any document describing the results.
- Anything you say during this interview will be kept confidential unless you tell us that you or someone else in your household is in immediate physical danger, for instance being a victim of abuse or neglect.
- Participation is completely voluntary. Your decision to participate or not to will not affect the services your child (or youth in your care) receive through the school.
- You will receive a Target gift card for \$10 once the interview is completed.

Please sign this document and provide your contact information if you agree to participate in this study.

Your name (please print)

Date

Your signature (please sign)

Initials of School Based
Mental Health Staff

Your child’s grade level (or youth in your care) Check one: preK Kindergarten 1st 2nd 3rd
(Child receiving mental health services at school) 4th 5th 6th 7th 8th

Please indicate the best way(s) of reaching you:

Email: _____

Cell phone: _____

Other: _____

Please contact Julie at Wilder Research with any questions about the evaluation (651.280.2658-voice or julie.atella@wilder.org)

**Evaluación de Servicios de Salud Mental Realizadas en Escuelas en el
Condado de Hennepin - FORMULARIO DE CONSENTIMIENTO**

Wilder Research
Information. Insight. Impact.

(ACUERDO) PARENTAL/PROVEEDOR DE CUIDADOS

Wilder Research está llevando a cabo un estudio para el Colaborativo de Salud Mental de Niños del Condado de Hennepin (HCCMHC). El propósito del estudio es comprender mejor el impacto de tener servicios de salud mental en el edificio de la escuela.

Al firmar este documento, usted está dando a su niño o niña (o joven en su cuidado) permiso para participar en una evaluación de servicios de salud mental en el edificio de la escuela. Con su consentimiento, se le pedirá a su niño o niña (o joven en su cuidado) que complete uno o los dos de los siguientes:

- Una **encuesta en línea** que hace preguntas acerca de su manera de pensar y sus experiencias con tener servicios clínicos en el edificio de la escuela.
- Una entrevista con el personal de Wilder Research el cual se llevará a cabo en Marzo-Abril 2016. La entrevista será hecha en persona, en un lugar conveniente, y se tomará no más de una hora en completar. Al niño o niña que complete la entrevista se le dará una tarjeta de regalo de Target de \$20 por su tiempo.

La entrevista es para una evaluación que Wilder Research está realizando para el Colaborativo de Salud Mental de Niños del Condado de Hennepin(HCCMHC). Los resultados de esta evaluación ayudarán a HCCMHC a comprender mejor/mejorar sus servicios en el futuro.

Por favor note lo siguiente:

- Le preguntaremos a su niño o niña (o joven en su cuidado) acerca de que es lo que piensa de los servicios que él o ella recibió de la escuela. También le estaremos pidiendo a su niño o niña que comparta acerca del impacto que ha tenido el programa en él o ella, socialmente, académicamente, y en su conducta.
- Toda la información que se obtenga de este proyecto será privada. Su nombre y el de su niño o niña (o el del joven en su cuidado) no aparecerán en ningún documento que describa los resultados.
- Su niño o niña (o joven en su cuidado) recibirá una tarjeta de regalo para Target de \$20 una vez haya completado la entrevista.
- Participación es completamente voluntaria. Su decisión a participar o no participar en el proceso de la entrevista no afectará los servicios que su niño o niña (o el joven en su cuidado) recibe por medio de la escuela.
- La información obtenida será guardada confidencialmente a menos que al personal de evaluación se le informe que su niño o niña (o joven en su cuidado) o alguien más en su hogar está en peligro físico inmediato, por ejemplo está siendo víctima de abuso o negligencia.
- Su autorización es válida por la duración del proyecto, el cual termina en Agosto 2016. Sin embargo, usted puede revocar esta autorización y discontinuar su participación en la evaluación en cualquier momento llamando al 651.280.2658

Por favor indicar su consentimiento abajo marcando la respuesta apropiada para cada artículo. Yo sé que mi niño o niña tiene el derecho de rehusarse a contestar cualquier pregunta.

SI NO

- Yo doy permiso para que mi niño o niña (o joven en mi cuidado) participe en **las encuestas**.
- Yo doy permiso para que mi niño o niña (o joven en mi cuidado) participe en **la entrevista**.

**Evaluación de Servicios de Salud Mental Realizadas en Escuelas en el
Condado de Hennepin - FORMULARIO DE CONSENTIMIENTO**

Wilder Research
Information. Insight. Impact.

(ACUERDO) PARENTAL/PROVEEDOR DE CUIDADOS

Nombre del niño o niña (en letra de molde)

Nombre del proveedor de cuidados (en letra de molde)

Fecha

Firma del proveedor de cuidados

Contacte al Director del Proyecto, Julie, con cualquier pregunta (651.280.2658-voice o julie.atella@wilder.org)

Evaluación de Servicios de Salud Mental Realizadas en Escuelas en el Condado de Hennepin - FORMULARIO DE ASENTIMIENTO (ACUERDO) DE PADRES/PROVEEDOR DE CUIDADOS

Wilder Research está llevando a cabo un estudio para el Colaborativo de Salud Mental de Niños del Condado de Hennepin (HCCMHC). El propósito del estudio es obtener su opinión acerca de los servicios de salud mental que su niño o niña (o joven en su cuidado) recibe en la escuela.

Al firmar este documento, usted está dando permiso a Wilder Research para contactarle e invitarle a participar en una entrevista por teléfono o en persona, en un lugar conveniente. La entrevista deberá tomar no más de treinta minutos para ser completada. Al completar la entrevista, usted recibirá una tarjeta de regalo de Target de \$10 como agradecimiento.

Por favor note lo siguiente:

- A usted le podrán preguntar acerca de los servicios que su niño o niña (o joven en su cuidado) recibió de la escuela y cómo estos servicios afectaron a su niño o niña.
- Toda la información que se obtenga de este proyecto será privada. Su nombre y el de su niño o niña (o el del joven en su cuidado) no aparecerán en ningún documento que describa los resultados.
- Lo que usted diga durante la entrevista será guardada confidencialmente a menos que usted nos informe que usted o alguien más en su hogar está en peligro físico inmediato, por ejemplo está siendo víctima de abuso o negligencia.
- Participación es completamente voluntaria. Su decisión a participar o no participar no afectará los servicios que su niño o niña (o joven en su cuidado) recibe por medio de la escuela.
- Usted recibirá una tarjeta de regalo de Target de \$10 una vez haya completado la entrevista.

Por favor firme este documento y proporcione su información de contacto si usted está de acuerdo en participar en este estudio.

Su nombre (en letra de molde)

Fecha

Su firma (por favor firme)

Iniciales del Personal de Servicios de Salud Mental basados en la Escuela

El nivel del grado de su niño o niña (o joven en su cuidado) Marque uno: preK Kindergarten 1st
 2nd 3rd
(Niño o niña que recibe servicios de salud mental en la escuela) 4th 5th 6th 7th 8th

Por favor indique la mejor manera de contactarle:

Email: _____

Celular: _____

Otro: _____

**Evaluación de Servicios de Salud Mental Realizadas en Escuelas en el
Condado de Hennepin - FORMULARIO DE ASENTIMIENTO (ACUERDO)
DE PADRES/PROVEEDOR DE CUIDADOS**

Wilder Research
Information. Insight. Impact.

Por favor contacte a Julie en Wilder Research con cualquier pregunta acerca de la evaluación (651.280.2658-voice o julie.atella@wilder.org)

D. Interview instruments

HCCMHC SBMH 2016– PARENT/CAREGIVER INTERVIEW PROTOCOL

Introduction: Hello, my name is _____, and I work at Wilder Research in Saint Paul. Wilder Research is working with the Hennepin County Children’s Mental Health Collaborative to learn more about what families think of mental health services located in the school buildings. I’m here to get your feedback about the mental health services your child or child in your care receive in your school. We want to know what you think so that the services can be made better for people to use in the future. It should only take about 20-30 minutes, and it is completely voluntary. A few things I want you to know before we get started:

- Again, this is completely voluntary.
- You do not have to answer any questions you do not want to answer.
- There are no right or wrong answers. This is all about your opinions, so I hope you will share your honest thoughts.
- I am going to be taking notes, but I will not write down anyone’s name. I also will not mention anyone’s name in anything that I write about from this project.
- To thank you for your time, you will receive a \$10 gift card at the end of this discussion.

Do you have questions before we start? [Address any questions]

1. Tell me a little bit about the mental health services at your child’s school. How would you describe it to a friend? (PROBE: What kinds of activities do they do with your child? How does the clinician work with you or your child? How did you decide what kinds of activities you or your child would do?)
2. Think back to the time before your child started receiving mental health services at school. What did you think the services was going to be like? Did it meet your expectations? Was it different than what you expected? How?
3. Overall, what did you think of the mental health services? What did you like about the services? What would make the services better? Is there anything that would make it easier for your child to participate?
4. I’m interested in learning more about how you feel now that your child have been receiving services for a while. How would you describe the impact of the services for your child? (PROBE: Does it help your child to relax? Does it help your child to express their thoughts or feelings?)
 - a. Does it help your child get along better with other people like other students, teachers, or yourself? How?
5. Does it help you or your child feel more connected to the school? How?
6. Did the mental health services help your child to do better in school? How?
7. Overall, how do you think the mental health services impact yours or your child’s life?
8. Is there anything else you would like to share with me to help us better understand what school based mental health clinic do for students?

Thank you very much for taking the time to answer all of my questions. Please provide a mailing address so I can mail your \$20 gift card (ask if they want it certified):

Name:

Street:

City, State, Zip code:

HCCMHC SBMH 2016– YOUTH INTERVIEW PROTOCOL

Introduction: Hello, my name is _____, and I work at Wilder Research in Saint Paul. Wilder Research is working with the Hennepin County Children’s Mental Health Collaborative to learn more about what students think of mental health services located in the school buildings. I’m here to get your feedback about the mental health services in your school. We want to know what you think so that the services can be made better for people to use in the future. It should only take about 20-30 minutes, and it is completely voluntary. You don’t have to be in this discussion if you don’t want to be. A few things I want you to know before we get started:

- Like I said before, you do not have to be in this discussion if you do not want to. But I hope you will participate, because your feedback is really important for making the mental health services better.
- You do not have to answer any questions you do not want to answer.
- There are no right or wrong answers. This is all about your opinions, so I hope you will share your honest thoughts.
- I am going to be taking notes, but I will not write down anyone’s name. I also will not mention anyone’s name in anything that I write about from this project.
- To thank you for your time, you will receive a \$20 gift card at the end of this discussion.

Do you have questions before we start? [Address any questions]

9. Tell me a little bit about the mental health services at your school. How would you describe it to a friend? (PROBE: What kinds of activities did you do? How does the clinician work with you? How did you decide what kinds of activities you would do?)
10. Think back to the time before you started going to mental health services at school. What did you think the services was going to be like? Did it meet your expectations? Was it different than what you expected? How?
11. Overall, what did you think of the mental health services? What did you like about the services? What would make the services better? Is there anything that would make it easier for you to participate?
12. I’m interested in learning more about how you feel now that you have been receiving services for a while. How would you describe the impact of the services for you? (PROBE: Does it help you relax? Does it help you express your thoughts or feelings?)
 - a. Does it help you get along better with other people like other students, teachers, or your parents? How?
13. Does it help you feel more connected to your school? How?
14. Did the mental health services help you to do better in school? How?
15. Overall, how do you think the mental health services impact your life?
16. Is there anything else you would like to share with me to help us better understand what school based mental health clinic do for students?

Thank you very much for taking the time to answer all of my questions. Please provide a mailing address so I can mail your \$20 gift card (ask if they want it certified):

Name:

Street:

City, State, Zip code:

E. Survey instruments

HCCMHC SBMH- School Staff Survey 2016

Evaluation of School Based Mental Health Services in Hennepin County SCHOOL STAFF SURVEY

Hennepin County Children's Mental Health Collaborative (HCCMHC) School-Based Workgroup is partnering with Wilder Research to better understand the impact school-based mental health services has in their schools.

The mission of HCCMHC is to improve access to and resources for high-quality, trauma-informed mental health services for children, youth and families within Hennepin County through our working partnerships with Family Service Collaboratives, County and State Government, Adult Mental Health Systems, Parents, Schools, and Health Systems.

As part of this project to better understand the impact of school based services in the schools, we are interested in learning about your opinions and experiences with having mental health services located in the school building.

Wilder Research (www.wilder.org) will be responsible for collecting and reporting back all of the information reported.

We would like you to answer each question as honestly as you can. The survey is confidential. Clinicians and other school staff will not be able to identify you or your child with your responses.

Thank you for taking the time to complete this survey. It should take no more than 10 minutes of your time.

HCCMHC SBMH- School Staff Survey 2016

SCHOOL

* 1. Which type of school do you work in? Check all that apply

- Elementary School
- Middle School
- High School

HCCMHC SBMH- School Staff Survey 2016

Clinician

* 2. "Are you aware of the school-based mental health services available at your school (different from school social workers/counselors/psychologists)?"

Yes

No

HCCMHC SBMH- School Staff Survey 2016

Working relationship

3. How did you learn about the services offered by the clinician?

4. Approximately how many students have you referred to the clinician in the past year?

5. How often do you work with the clinician?

Never

Daily

Weekly

Monthly

HCCMHC SBMH- School Staff Survey 2016

Direct relationship with clinician

6. Please indicate how much you agree or disagree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly disagree
I have a good working relationship with the mental health clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I value having mental health services available in the school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician consult with me on an ongoing and regular basis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

Student Engagement

7. While you may be unsure of whether or not a student is receiving mental health services, thinking about students you referred, please indicate how much you agree or disagree with the following statements.

Since the students started receiving mental health services...

	Strongly Agree	Agree	Disagree	Strongly Disagree
These students are more involved in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
These students are more connected to what is going on in class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
These students are more connected to the school community (teachers, students, other staff)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
These students had a decrease in behavioral incidents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

School based mental health services

8. Do you think having a mental health provider working in the school building decreases barriers to receiving mental health services?

HCCMHC SBMH- School Staff Survey 2016

Expectations and understanding of services

9. Please think about services offered by the mental health clinician and select how much you agree or disagree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly Disagree
Explanations and descriptions about the mental health clinician's services are clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Goals of the services provided by the mental health clinician are clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand why the mental health clinician is located in our school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

School based mental health services

10. Please select how much you agree or disagree with the following statements

	Strongly Agree	Agree	Disagree	Strongly Disagree
Students are more likely to receive mental health care because the provider is located in our school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is easy for students to get mental health care at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am more mindful of mental health needs with mental health services available in the school setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think the mental health clinician is better able to help students because they are located in the school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

Integration

11. Please indicate how much you agree or disagree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly disagree
There is a process in place to refer students in need of mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The working relationship between school staff and the mental health clinician is effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School staff and the clinician work together to address problems among students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The mental health clinician is well integrated in our school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

Satisfaction

12. Please complete the following statements regarding your satisfaction with the clinician.

	Strongly agree	Agree	Disagree	Strongly disagree
I am satisfied with the support provided by the clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician has helped students do better in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician communicates with me in a way that is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

Overall

13. Please select the best answer to the following questions.

	Strongly agree	Agree	Disagree	Strongly disagree
Because of the school based mental health services, I think some students are more likely to graduate from high school on time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend having a school based mental health clinician to other schools	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- School Staff Survey 2016

Additional feedback

14. Overall, what do you see as the biggest benefit of having mental health services located in the school building?

15. How can the school based mental health services be improved?

HCCMHC SBMH- School Staff Survey 2016

Information/Demographics

* 16. What year did you start working at your current school?

* 17. What is your current role in the school?

- Teacher
- Teacher's aide
- Speech therapist/ Occupational therapist
- Principal/Assistant Principal School Administrator
- Nurse
- Counselor
- Social Worker
- Other (please specify)

HCCMHC SBMH- School Staff Survey 2016

Thank you

Thank you for your time. If you have any questions, do not hesitate to contact

julie.atella@wilder.org

HCCMHC SBMH- Caregiver Survey 2016

Evaluation of School Based Mental Health Services in Hennepin County CAREGIVER SURVEY

We want to learn about your opinions and experiences with your child receiving services from a clinician in school. The information you share with us will help us better understand the improve these services.

We would like you to answer each question as honestly as you can. The survey is confidential. The information you provide will not affect any services you receive at school. Also, clinician and school staff will not be able to identify you with your responses.

Wilder Research (www.wilder.org) will be responsible for collecting and reporting back all of the information reported.

Thank you for taking the time to complete this survey. It should take no more than 10 minutes of your time. Remember, there are no wrong or right answers..

HCCMHC SBMH- Caregiver Survey 2016

Clinician

* 1. Does your child receive therapy, counseling, or other services from a mental health clinician in school?

- Yes
- No
- Other (please specify)

HCCMHC SBMH- Caregiver Survey 2016

Expectations and understanding of services

2. Please think back to when your child first started meeting with the clinician and select how much you agree or disagree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly Disagree
Explanations and descriptions about the clinician's services were clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood the goals of my child's meetings with the clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood the clinician provided mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood why my child needed therapy and/or counseling services from the clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Clinician

3. Please rate how much you agree or disagree with the following statement:

Bringing my child to a provider not located at school would make additional costs or challenges to my family

Strongly Agree	Agree	Disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Please explain your answer.			
<input type="text"/>			

HCCMHC SBMH- Caregiver Survey 2016

School based mental health services

4. Please select how much you agree or disagree with the following statements

	Strongly Agree	Agree	Disagree	Strongly Disagree
It is easy for my child to get mental health care at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think the clinician is better able to help my child because the clinician is located in my child's school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
During my visits with the clinician, I feel safe to say everything I think is important	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Relationships

5. Since receiving services from the school based mental health clinician,

	Improved a lot	Improved a little	Stayed the same	Gotten worse
my child's relationships with teachers have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my child's relationships with other school staff who are not teachers have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my child's relationships with other students have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my relationship with my child has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Engagement

6. Since receiving services from the school based mental health clinician...

	Strongly Agree	Agree	Disagree	Strongly Disagree
My child is more involved in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child is more connected to what is going on in classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child feel a greater sense of belonging to the school community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Academic progress

7. Since receiving services from the school based mental health clinician...

	Improved a lot	Improved a little	Stayed the same	Gotten worse
My child's grades have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's attendance has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's behavior in school has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Satisfaction

8. Please select how much you agree or disagree with the following statements.

	Strongly agree	Agree	Disagree	Strongly disagree
I am satisfied with the support my child gets from the clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I value my child's time spent with the clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician has helped my child do better in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician communicates with me in a way that is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Overall

9. Please select the best answer to the following questions.

	Strongly agree	Agree	Disagree	Strongly disagree
Because of the clinician, I think my child is more likely to graduate from high school on time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend the clinician to other families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH- Caregiver Survey 2016

Additional feedback

10. What do you value most about your child's therapy/counseling services with the clinician?

11. How can the services with the clinician be improved?

HCCMHC SBMH- Caregiver Survey 2016

Information/Demographics

* 12. How long has your child been working with the clinician?

- 1-3 months
- 4-6 months
- 7-12 months
- More than a year
- Not sure

* 13. What grade is your child in?

- Kindergarten
- 1st grade
- 2nd grade
- 3rd grade
- 4th grade
- 5th grade
- 6th grade
- 7th grade
- 8th grade
- Other (please specify)

HCCMHC SBMH- Caregiver Survey 2016

Thank you

Thank you for your time. If you have any questions, do not hesitate to contact julie.atella@wilder.org

HCCMHC SBMH - Student Survey 2016

Evaluation of School Based Mental Health Services in Hennepin County STUDENT SURVEY

We want to learn about your opinions and experiences working with the clinician in your school. The information you share with us will help us better understand the improve these services.

We would like you to answer each question as honestly as you can. The survey is confidential. The information you provide will not affect any services you receive at school. Also, clinician and school staff will not be able to identify you with your responses.

Wilder Research (www.wilder.org) will be responsible for collecting and reporting back all of the information reported.

Thank you for taking the time to complete this survey. It should take no more than 10 minutes of your time. Remember, there are no wrong or right answers.

HCCMHC SBMH - Student Survey 2016

Clinician

* 1. Have you received therapy, counseling, or other services from a clinician or mental health provider in the past year?

- Yes
- No
- Other (please specify)

HCCMHC SBMH - Student Survey 2016

Expectations and understanding of services

2. Please think back to when you first started meeting with your clinician and select how much you agree or disagree with the following statements

	Strongly Agree	Agree	Disagree	Strongly Disagree
Explanations and descriptions about my clinician's services were clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood the goals of my meetings with my clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood my clinician provided mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood why I needed therapy and/or counseling services from my clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

School based mental health services

3. Please select how much you agree or disagree with the following statements

	Strongly Agree	Agree	Disagree	Strongly Disagree
It is easy for me to get mental health care at my school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my clinician is better able to help me because my clinician is located in my school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
During my visits with my clinician, I feel safe to share my feelings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

Relationships

4. Since working with my clinician...

	Improved a lot	Improved a little	Stayed the same	Gotten worse
my relationships with my teachers have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my relationships with other school staff who are not my teachers have...(e.g. principal, counselors, aide, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my relationships with other students have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my relationship(s) with my parent(s) or caregiver(s) have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

School Engagement

5. Since working with my clinician...

	Strongly Agree	Agree	Disagree	Strongly Disagree
I am more involved in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am more connected to what is going on in my classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel a greater sense of belonging to the school community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

Academic progress

6. Thinking about how you are doing in school, please select the best answer.

Since working with my clinician...

	Improved a lot	Improved a little	Stayed the same	Gotten worse
my grades have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my attendance has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my behavior in school has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

Satisfaction

7. Please select how much you agree or disagree with the following statements.

	Strongly agree	Agree	Disagree	Strongly disagree
I am satisfied with the support I get from my clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I value the time spent with my clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My clinician has helped me do better in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My clinician communicates with me in a way that is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

Overall

8. Please select the best answer to the following questions.

	Strongly agree	Agree	Disagree	Strongly disagree
Because of my clinician, I think I am more likely to graduate from high school on time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend my clinician to other students who want support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HCCMHC SBMH - Student Survey 2016

Additional feedback

9. What is your favorite thing about your therapy/counseling services with your clinician?

10. How can the services with your clinician be improved?

HCCMHC SBMH - Student Survey 2016

Information/Demographics

* 11. How long have you been working with your clinician?

- 0-3 months
- 4-6 months
- 7-12 months
- More than a year
- Not sure

* 12. What is your current grade in school?

- 7th grade
- 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade
- Other (please specify)

HCCMHC SBMH - Student Survey 2016

Thank you

**Thank you for your time. If you have any questions, do not hesitate to contact
julie.atella@wilder.org**

Evaluation of School Based Mental Health Services in Hennepin County CAREGIVER SURVEY

We want to learn about your opinions and experiences with your child receiving services from a clinician in school. The information you share with us will help us better understand the improve these services.

We would like you to answer each question as honestly as you can. The survey is confidential. The information you provide will not affect any services you receive at school. Also, clinician and school staff will not be able to identify you with your responses.

Wilder Research (www.wilder.org) will be responsible for collecting and reporting back all of the information reported.

Thank you for taking the time to complete this survey. It should take no more than 10 minutes of your time. Remember, there are no wrong or right answers..

Clinician

* 1. Does your child receive therapy, counseling, or other services from a mental health clinician in school?

- Yes
- No
- Other (please specify)

Expectations and understanding of services

2. Please think back to when your child first started meeting with the clinician and select how much you agree or disagree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly Disagree
Explanations and descriptions about the clinician's services were clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood the goals of my child's meetings with the clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood the clinician provided mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understood why my child needed therapy and/or counseling services from the clinician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clinician

3. Please rate how much you agree or disagree with the following statement:

Bringing my child to a provider not located at school would make additional costs or challenges to my family

Strongly Agree	Agree	Disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Please explain your answer.			
<div style="border: 1px solid black; height: 40px;"></div>			

School based mental health services

4. Please select how much you agree or disagree with the following statements

	Strongly Agree	Agree	Disagree	Strongly Disagree
It is easy for my child to get mental health care at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think the clinician is better able to help my child because the clinician is located in my child's school building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
During my visits with the clinician, I feel safe to say everything I think is important	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Relationships

5. Since receiving services from the school based mental health clinician,

	Improved a lot	Improved a little	Stayed the same	Gotten worse
my child's relationships with teachers have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my child's relationships with other school staff who are not teachers have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my child's relationships with other students have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
my relationship with my child has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Engagement

6. Since receiving services from the school based mental health clinician...

	Strongly Agree	Agree	Disagree	Strongly Disagree
My child is more involved in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child is more connected to what is going on in classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child feel a greater sense of belonging to the school community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Academic progress

7. Since receiving services from the school based mental health clinician...

	Improved a lot	Improved a little	Stayed the same	Gotten worse
My child's grades have...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's attendance has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's behavior in school has...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Satisfaction

8. Please select how much you agree or disagree with the following statements.

	Strongly agree	Agree	Disagree	Strongly disagree
I am satisfied with the support my child gets from the clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I value my child's time spent with the clinician.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician has helped my child do better in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The clinician communicates with me in a way that is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Overall

9. Please select the best answer to the following questions.

	Strongly agree	Agree	Disagree	Strongly disagree
Because of the clinician, I think my child is more likely to graduate from high school on time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend the clinician to other families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional feedback

10. What is your favorite thing about your child's therapy/counseling services with the clinician?

11. How can the services with the clinician be improved?

Information/Demographics

* 12. How long has your child been working with the clinician?

- 1-3 months
- 4-6 months
- 7-12 months
- More than a year
- Not sure

* 13. What grade is your child in?

Kindergarten

1st grade

2nd grade

3rd grade

4th grade

5th grade

6th grade

7th grade

8th grade

Other (please specify)

Thank you

Thank you for your time. If you have any questions, do not hesitate to contact julie.atella@wilder.org