















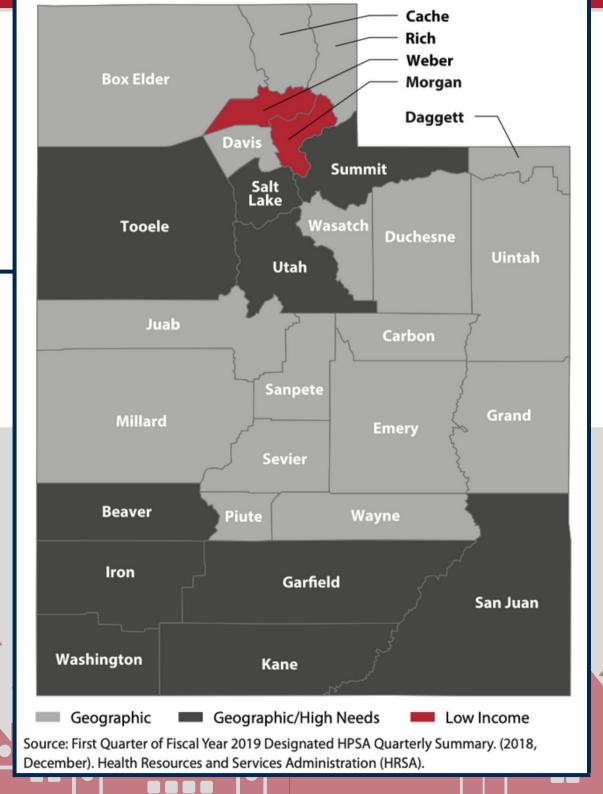
# IDENTIFYING THE RELATIVE SHORTAGE OF MENTAL HEALTH

### MENTAL HEALTH CARE PROFESSIONALS

Utah's rural areas particularly struggle with provider shortages.

Data from Utah Medical Education Council (2015) showed that Utah's urban areas had 171 full-time mental health providers per 100,000 people. Compared to rural areas, that had 141 mental health providers











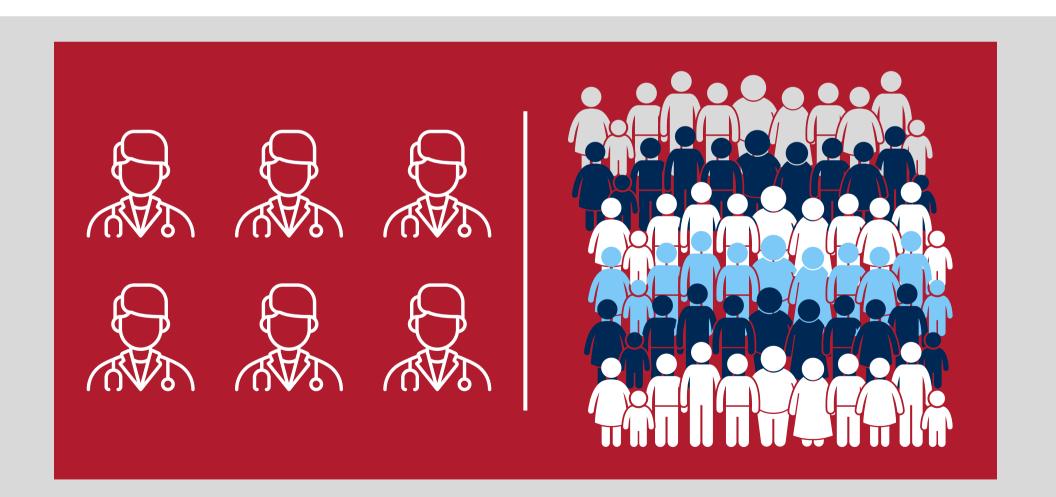


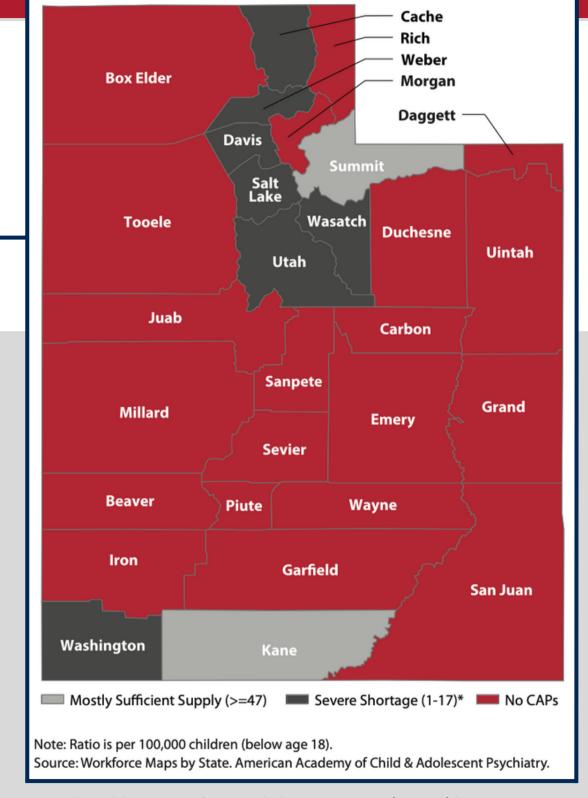
## IDENTIFYING THE RELATIVE SHORTAGE OF MENTAL HEALTH

#### PRACTICING CHILD & ADOLESCENT PSYCHIATRISTS

Utah's rural areas particularly struggle with provider shortages.

The statewide ratio is six adolescent psychiatrists per 100,000 children.





Mental Health Care Professional Shortage Areas (HPSAs) by County, 2017



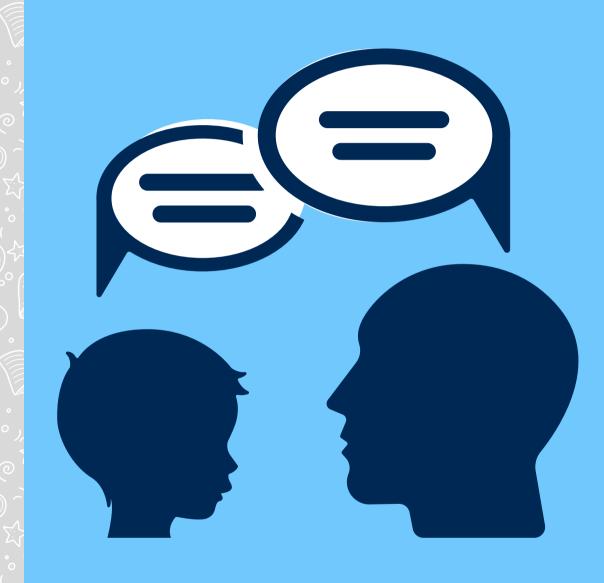






## COMBATING RELATIVE SHORTAGE OF MENTAL HEALTH

	School District				
MH Provider	San Juan School District	SLCSE Rosepark High School	SLCSE Bryant Middle School	Logan High School	Grand County School District
School Psychologist	<b>2</b> (1:1,500)	No Full Time	0	<b>2</b> (1:772)	0
School Counselor	<b>8</b> (1:375)	<b>1.67</b> (1:202)	<b>1.5</b> (1:270)	<b>5</b> (1:309)	<b>2</b> (1:703)
School Social Worker	<b>8</b> (1:375)	0	.33 (1:1,218)	0	0
Total Student Population	3,000	337	405	1,543	1,406



1:500

Recommended Ratio School Psychologists to Student 1:250

Recommended Ratio
School Social Workers to Student

1:250

Recommended Ratio
School Counselors to Student









# WHO WE ARE







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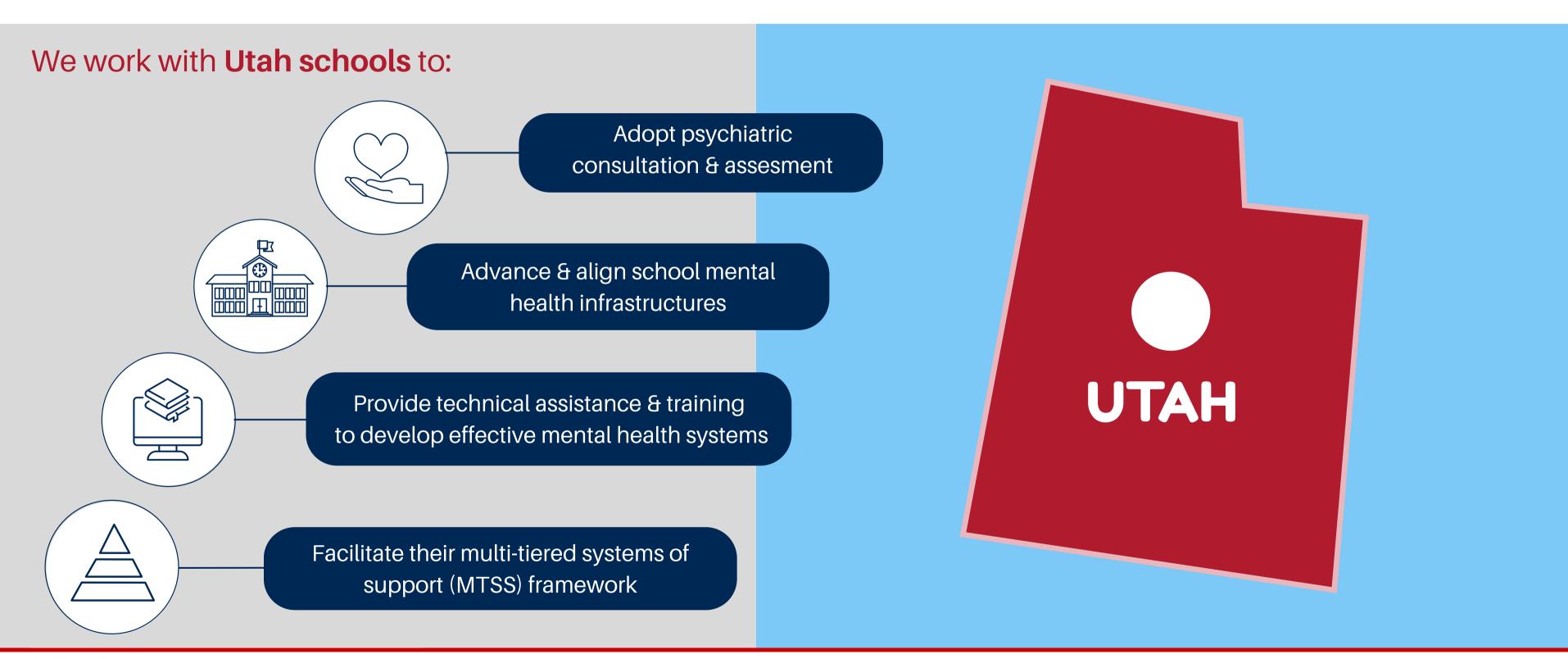


@uttec\_lab



#### WHAT WE DO

The Utah School Mental Health Collaborative is a state-wide project











#### **HOW WE SUPPORT**



#### MENTAL HEALTH SCREENING

We support schools to carry out best practices by screening all students three times across an academic year.



#### MENTAL HEALTH PROMOTION

We support schools to carry out these practices through technical assistance and training.



#### MENTAL HEALTH FUNDING

We support schools directly and indirectly, to secure federal and local mental health funding.











Utah is one of the states in tha nation with the highest numbers of mental health cases among children. Utah is also one of the states with the highest prevalence of children not receiving mental health care.

# THE SCHOOLS WE WORK WITH



Schools receiving USMHC & Psychaitry services



Schools receiving USMHC services



Schools in progress of joining the collaborative

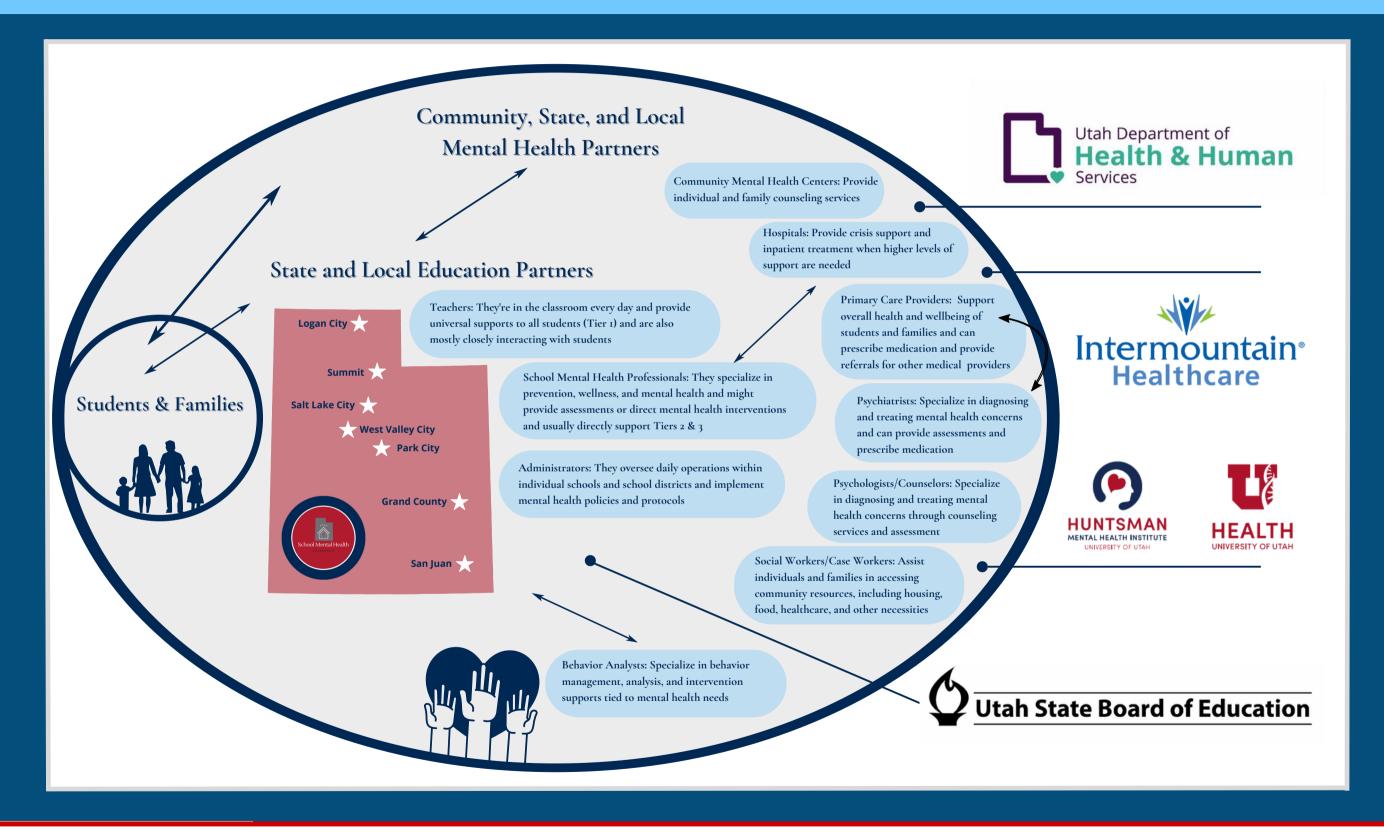








## TIERS OF SUPPORT & COLLABORATION











# THE USMHC STRATEGIC PLAN

Collaborative Workgroups

Student & Family Centered



System-level Change & Impact



**Measurement & Data** 



**Communication, Collaboration & Differentiation** 





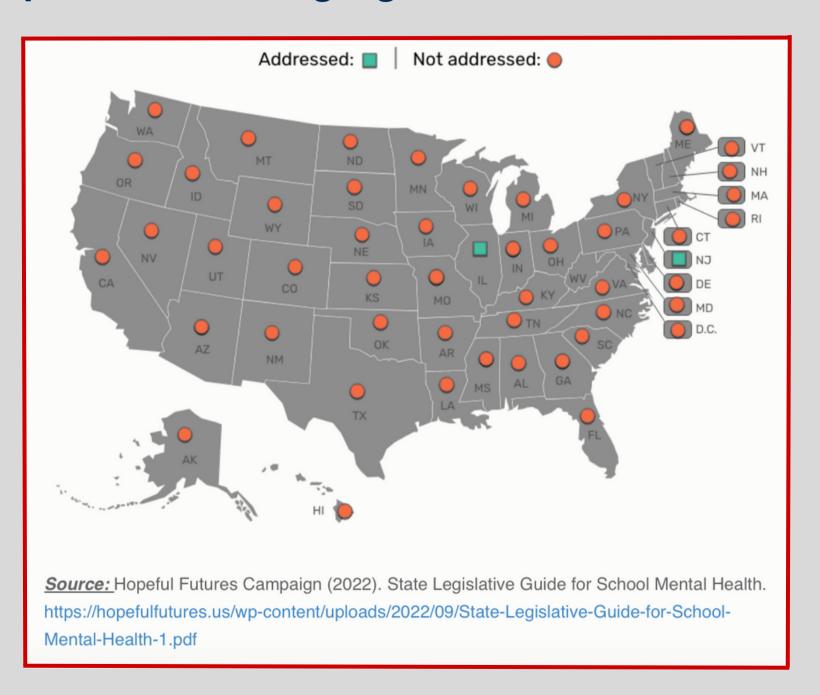






## **UNDERSTANDING & USING SHAPE**

# The map below displays states that have passed screening legislation.







The **SHAPE** System is a **free**, **private**, **webbased** platform that helps **centralize** school **mental health** infrastructure **data**.









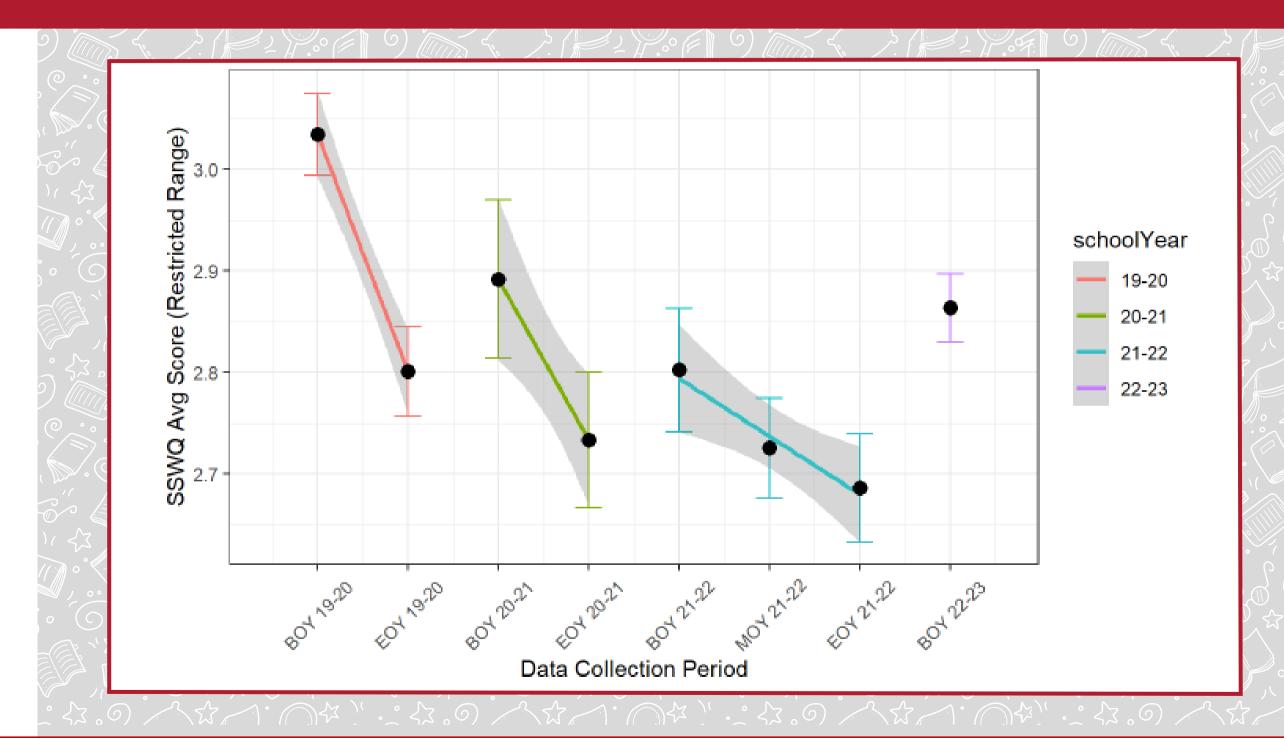
## **SCHOOLWIDE WELL-BEING DATA**

#### Average Student Subjective Wellbeing Scores Across Time

#### All schools pooled together

- Trend lines by school year.
- Error bars represent 95% confidence intervals.













# **SCHOOLWIDE WELL-BEING DATA**

# Example: San Juan County

















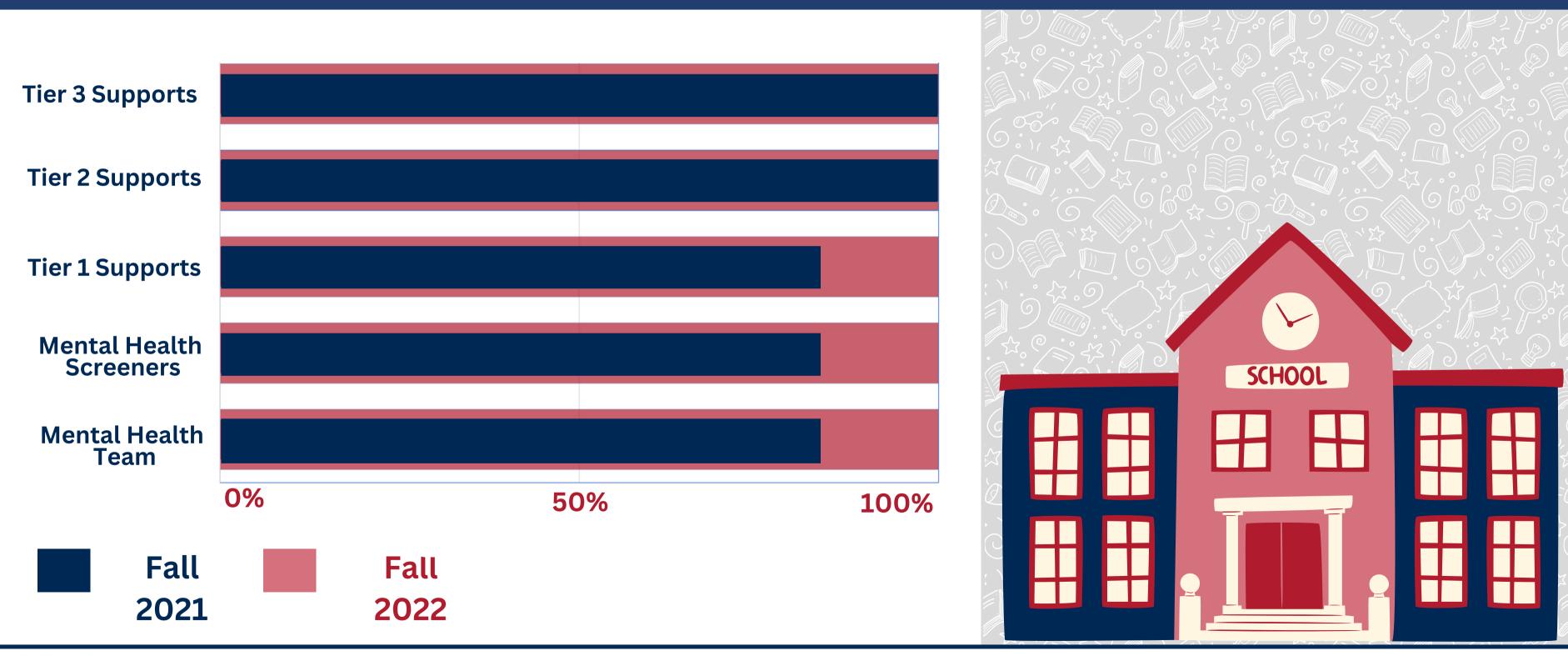






# SCHOOL MENTAL HEALTH DOMAINS' ASSESSMENT

We asked **schools** to **assess their school mental health domains** 











## **CUMULATIVE PSYCHIATRY REFERRALS**

Schools **began** to give **psychiatry referrals** to the **Collaborative beginning** in **August 2021**.

There has been a positive, upward trend of cumulative psychiatry referrals.

Psychiatrist made recommendations regarding:

- School-based (classroom, therapy)
- Home-based (medication)
- Crisis interventions















#### **PSYCHIATRY**

#### COMMUNITY, CONNECTION, & PARTNERSHIP

The Utah School Mental Health Collaborative (**USMHC**) is a **statewide initiative** that adopts **psychiatric consultations** into **school mental health** frameworks. The program was piloted in **four school districts** across **two years**.









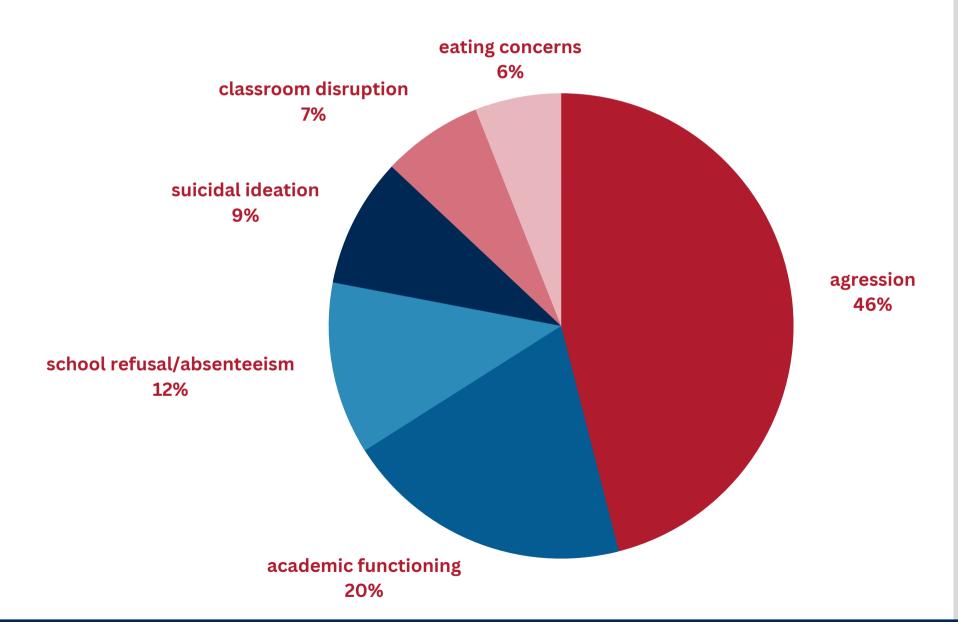


#### **FUNCTIONAL OUTCOMES**

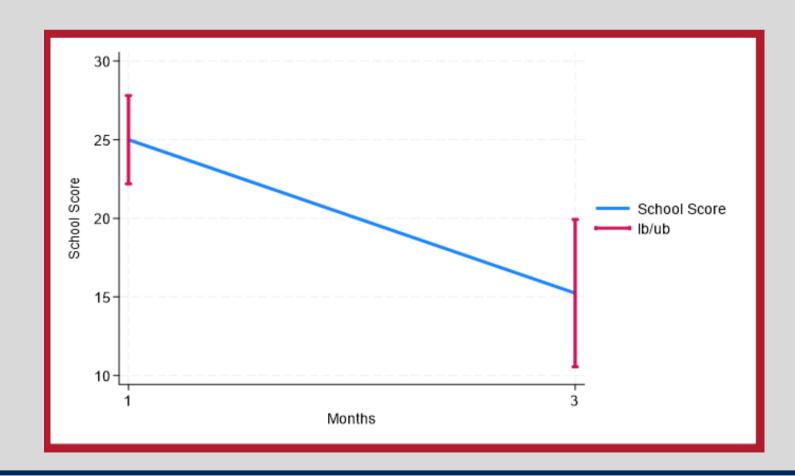
While 10% of school-aged children experience mental health disorders, only 1 in 5 of these children access psychiatric services. Schools provide an accessible and familiar entry point to such services, particularly for children with limited resources.



#### Reasons for referral:



Conclusion: Children with externalizing symptoms populated the majority of referrals. Significant functional improvement was measured in children presenting for follow-up. These results support further prospective investigation into the efficacy of school-based psychiatry consultations.





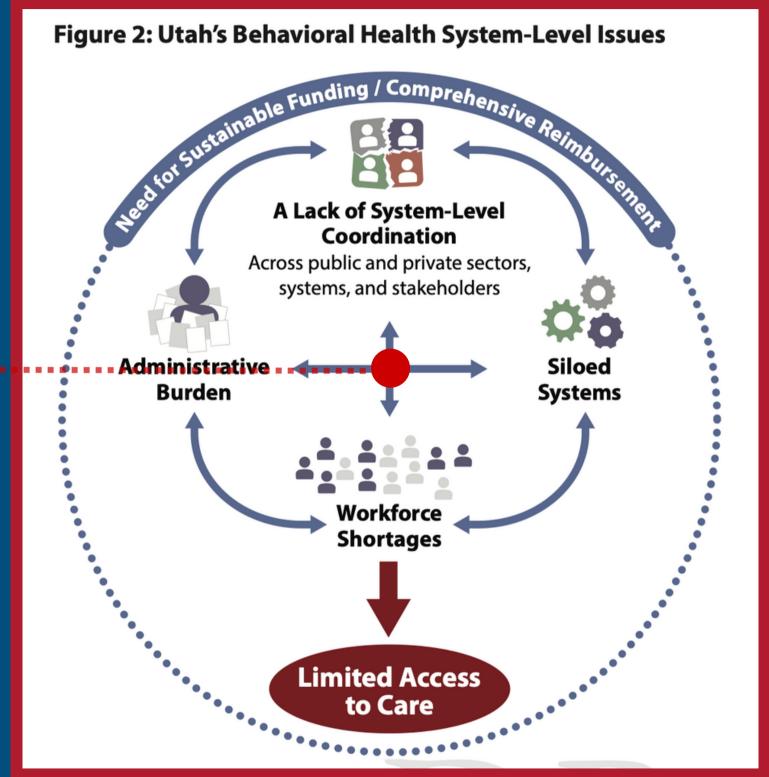






## **UTAH BEHAVIOR HEALTH ASSESSMENT & MASTER PLAN**





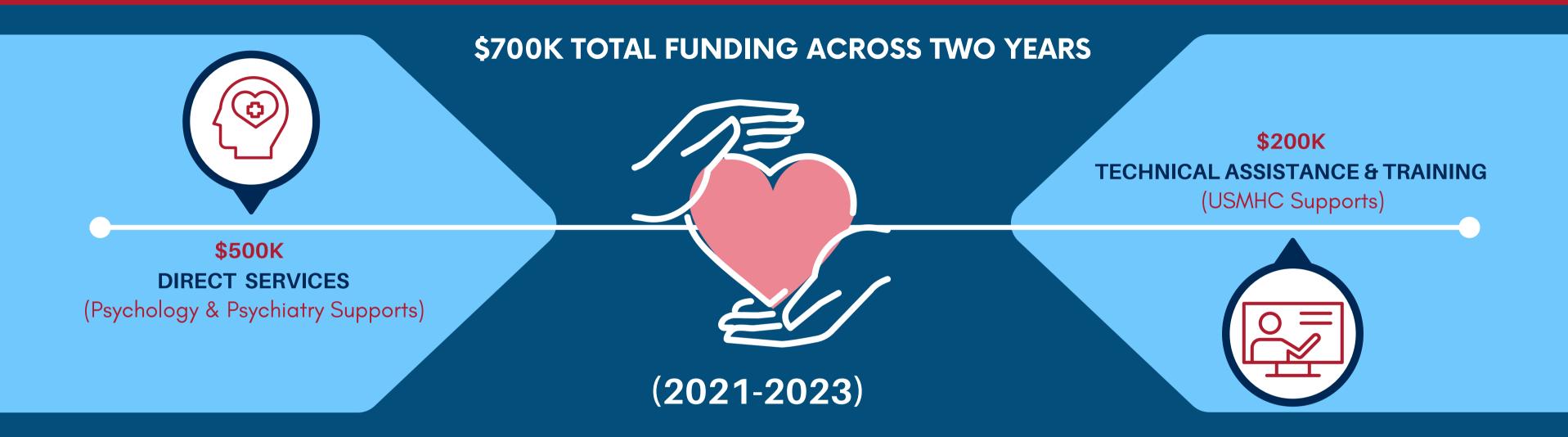








## **FUNDING SUPPORTS**



The Utah School Mental Health Collaborative uses these funds to expand technical assistance, training, and psychiatry services to rural Utah schools.









#### **CONTACT OUR TEAM**

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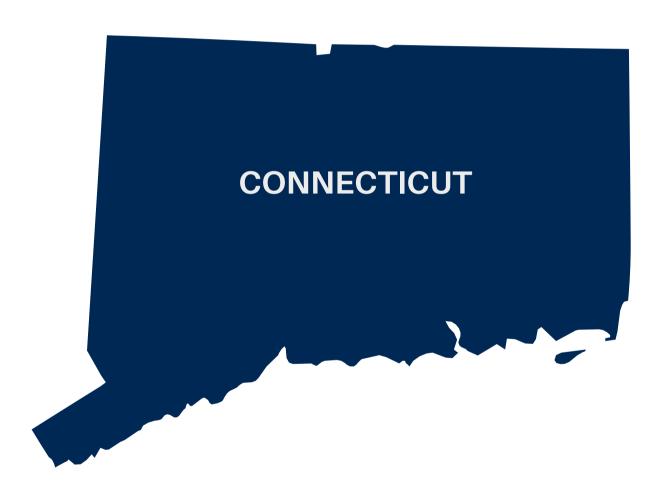






## HOW STATES ARE HELPING SCHOOLS & DISTRICTS GET INTO SHAPE

How are other states using SHAPE?



Connecticut Department of Children and Families, the Child and Health Development Institute (CHDI)

