"Mental Health Screening in Schools Telemedicine, Wellness, Intervention, Triage and Referral The (TWITR) Project"

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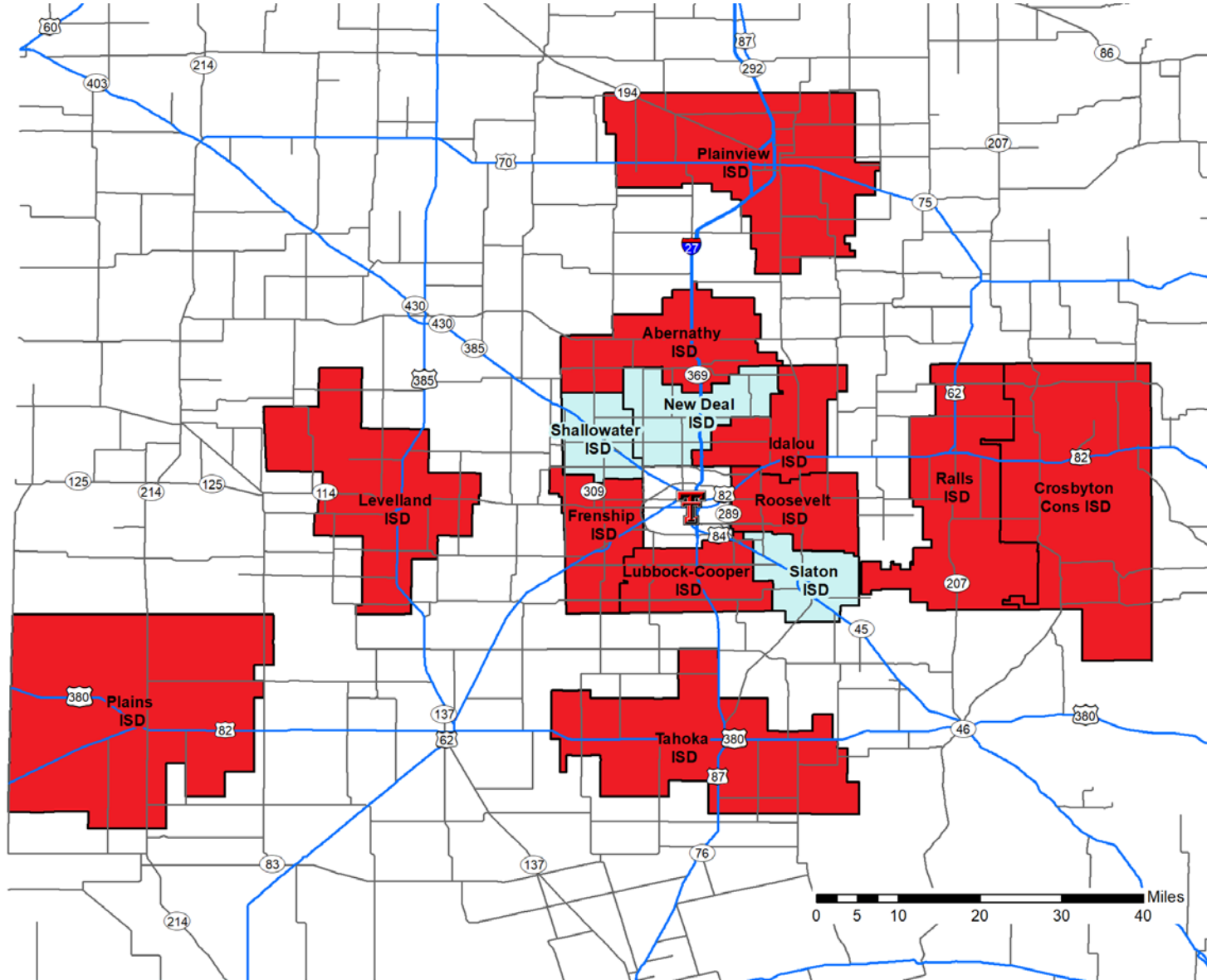**Texas Tech University Health Sciences Center**

Telemedicine Wellness, Intervention, Triage & Referral "The TWITR Project"

The primary purpose is to provide screening, assessment, and referral services to students who are judged to be immediate threats to do harm to themselves or others.

- Provides school-based screening, assessment, and referral services to students that are typically struggling with behavioral and mental health issues.   Currently active in 10 West Texas ISDs.

- Uses Telemedicine technology to link remote rural schools that are without sufficient counselors, psychiatrists, and other mental health service providers.

- Provides mental health recognition and training services to educators and school resource officers to promote greater recognition and prompt referral.

- Outcome data has demonstrated a reduction in truancy (17%), reduction in student discipline referrals (25%), and increase in student overall GPA (3.6%).
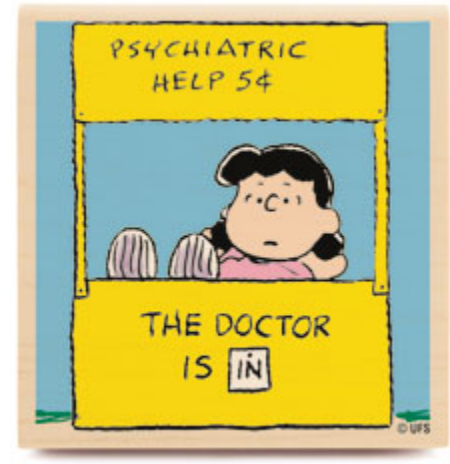
TWITR Referral Process

The TWITR Process: Assessment

- TWITR Project staff will make contact with the referral school administration when they arrive at the school. The Telepsychiatry staff will follow the school districts procedures for signing in and out of the building.

- During this visit the TWITR Project staff can request student records [current grades, truancy reports, discipline referrals, and any other pertinent information] to assist in understanding the student's academic /social history and to monitor changes in student's behavior throughout the school year.

- TWITR Project staff will then complete the initial student evaluation, administer required TWITR Project assessments to the student, and other applicable parties [parent/guardian, teacher/counselor]. TWITR project staff will also obtain guardian/ parent signatures on required psychiatry forms.

Assessments

1) Child Mania Rating Scale

2) Children's Loneliness Questionnaire (CLQ)

3) CRAFFT (Car, Relax, Alone, Forget, Friends, Trouble)

4) Hopelessness Scale for Children (HSC)

5) Mood and Feelings Questionnaire (Parent & Child Instrument)

6) Screen for Child Anxiety Related Disorders (SCARED) (Parent & Child Instrument)

7) National Stressful Event Survey Short Scale (NESSS) (Child Instrument)

8) Vanderbilt ADHD Assessment Scales (Parent instrument)

9) Structured Assessment of Violence Risk in Youth (SAVRY) (Clinician)

TWITR Outcomes

- Number of School Staff Trained = ~1640

- Number of students impacted = ~41,807

- Number of referrals = 414

- Number triaged = 215 (all by telemedicine)

- Number removed from school = 25

- Number in-school supervision = 44

- Other outcomes = reduction in truancy (17%), reduction in student discipline referrals (25%), increase in student overall GPA (3.6%)

Follow Up Study (N=118)

- Itinerate students – 88 (75%)

- Family criminal history – 53 (45%)

- Student lives with Mom – 66 (56%)

- Student lives with Dad – 17 (14%)

- Student lives with other family – 19 (16%)

Of 47 pairs studied

- Youth report significantly more social anxiety compared to parents.
- 98 (83%) report hopelessness,
- 65 (55%) report anxiety
- 53 (45%) report loneliness
- School avoidance (highest risk groups 56 (47%) females; 35 (30%) Hispanic)

Why Telemedicine for TWITR?

- Provides easier access to mental health services not available in rural areas.

- Convenient for parents to make appointment(s) at school rather than traveling.

- Reduces the amount of time student(s) is(are) out of class.

- Often more comfortable for students to discuss issues online rather than face-to-face.

- Quick and easy set-up of equipment.

- Provides opportunity for simultaneous appointments.

- Provides attending physician the opportunity to provide services to more patients within a given amount of time.

- Cut the wait time from 6 weeks to 3 days (sooner in emergent events)