The Mental Health Coalition
— of Goodhue County —

Goodhue County Mental Health School Resource Guide

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School Staff

For additional resources or to submit questions, comments, suggestions, or corrections about this guide visit gccfc.org/mentalhealth

INTRODUCTION

This Mental Health Resource Guide answers frequently asked questions about mental health and mental health resources. This guide does not contain a comprehensive list of all the mental health resources in the county.

This Mental Health Resource Guide is a project of the Goodhue County Mental Health Coalition. It was created in response to a community need in partnership with Goodhue County Health and Human Services & the Goodhue County Child and Family Collaborative.

Goodhue County Child & Family Collaborative
Strong Families. Resilient Children.

Goodhue County Health & Human Services

gccfc.org
co.goodhue.mn.us/hhs

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Listed in alphabetical order

Crisis Response of Southeast Minnesota
(24/7 crisis phone counseling and face-to-face mobile crisis interventions)
1-844-CRISIS2

Crisis Text Line
Text "MN" to 741741

Hope Coalition's Sexual Assault Crisis Line
1-800-519-6690

South East Regional Safe Harbor 24 Hour Crisis Line
(For sexually exploited youth)
(507) 289- 0636

Suicide Prevention Hotline (English)
1-800-273-TALK (8255)

Suicide Prevention Hotline (En Espanol)
1-888-628-9454

Teen Crisis Line
(310) 855-4673

The Trevor Project
(LGBTQ Crisis and Suicide Hotline)
1-866-488-7386

Trans Lifeline
1-877-565-8860

SCHOOL-LINKED MENTAL HEALTH

School-Linked Mental Health (SLMH) programs offer effective mental health services right in schools. A therapist employed by a private mental health agency is located within a school building. Untreated mental health issues are a significant barrier to learning and educational success. Placing children's mental health services in schools provides a great opportunity for mental health promotion, prevention and early identification and intervention.

Many Goodhue County schools have a SLMH provider. Please check with your administration to see if there is a provider in your school.

How to Make a Referral

School Staff Referral:
Each school has a designated team that make referrals to the School Linked Mental Health Providers. School staff can refer a student to the designated staff in the school. The designated staff in the school reach out to caregivers, fill out the referral form, educational release form, and give the completed forms/information directly to the School Linked Mental Health provider.

Caregiver/Outside Referral:
A parent or caregiver who would like a student to be seen by the School Linked Mental Health provider can submit the referral form directly to the therapist at the school. A copy of the referral form and the contact information for the provider can be obtained from the school office.

What is a Mental Health Crisis?

A mental health crisis is any situation in which a person's behavior puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community.

Warning Signs of a Mental Health Crisis

NOTE: warning signs are not always present when a mental health crisis is developing.

- Inability to perform daily tasks like bathing, brushing teeth, brushing hair, changing clothes
- Rapid mood swings, increased energy level, inability to stay still, pacing, suddenly depressed, withdrawn, suddenly happy or calm after period of depression
- Increased agitation, verbal threats, violent or out of control behavior
- Abusive behavior to self and others, including substance use or self-harm
- Isolation from school, work, family, friends
- Loses touch with reality (psychosis)- unable to recognize family or friends, confused, strange ideas, thinks they're someone they're not, doesn't understand what people are saying, hears voices, sees things that aren't there
- Paranoia

What to Do in a Mental Health Crisis

A person experiencing a mental health crisis can't always communicate their thoughts, feeling, needs or emotions. They may also find it difficult to understand what others are saying; it is important to empathize and connect with the person's feelings, stay calm and try to de-escalate the crisis.

Mental Health First Aid: Remember ALGEE

Assess for risk of suicide

Listen non-judgmentally

Give re-assurance and information

Encourage appropriate professional help

Encourage self-help and other support strategies

Techniques that May Help De-escalate a Crisis

- Keep your voice calm
- Avoid overreacting
- Listen
- Express support and concern
- Avoid continuous eye contact
- Ask how you can help
- Keep stimulation level low
- Move slowly
- Offer options instead of trying to take control
- Avoid touching the person unless you ask permission
- Be patient
- Gently announce actions before initiating them
- Give them space; don't make them feel trapped
- Don't make judgmental comments
- Don't argue or try to reason with the person

If you can't de-escalate the crisis yourself or you feel the person is in danger of hurting themselves, others, or property, call a crisis number (see page 2).

Common Warning Signs of Suicide

- Giving away personal possessions
- Talking as if they're saying goodbye or going away forever
- Taking steps to tie up loose ends, like organizing personal papers or paying off debts
- Making or changing a will
- Stockpiling pills or obtaining a weapon
- Preoccupation with death
- Sudden cheerfulness or calm after a period of despondency

What to Do if You Suspect Someone is Thinking about Suicide

Say something like:
- Are you thinking about killing yourself? (be direct—don't say "Are you thinking about hurting yourself)
- Do you have a plan? Do you know how you would do it?
- When was the last time you thought about suicide?

If the answer is "Yes" or you think they might be at risk of suicide, you need to seek help immediately.
- Call a mental health professional
- Remove potential means to complete suicide, such as weapons and medications to reduce risk.
- Call a crisis number or call 911

What not to do:
- Promise to keep it a secret. Instead say "I care about you too much to keep this a secret"
- Don't debate the value of living or argue that suicide is wrong
- Don't ask in a way that indicates you want "no" for an answer ("You're not thinking about suicide, are you?")
- Don't try to handle the situation alone

What not to say:
- "We all go through tough times like these. You'll be fine."
- "It's all in your head... just snap out of it."

***Your school may have a specific policy on how to respond if a student is struggling with a mental health issue.
Please talk to your administrator.***

What are Adverse Childhood Experiences (ACEs)?

Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years). For example:

- experiencing violence, abuse, or neglect
- witnessing violence in the home or the community
- living in a home with substance misuse or mental health issues
- parental separation, or having a family member incarcerated
- experiencing poverty or homelessness
- experiencing bullying at school
- discrimination, racism, and other oppression

What are the consequences of ACEs?

ACEs can have lasting, negative effects on health, well-being, and opportunity. These experiences can increase the risks of injury, sexually transmitted infections, maternal and child health problems, teen pregnancy, involvement in sex trafficking, and a wide range of chronic diseases and leading causes of death such as cancer, diabetes, heart disease, and suicide.

ACEs can cause toxic stress (extended or prolonged stress). Toxic stress from ACEs can change brain development and affect such things as attention, decision-making, learning, and response to stress.

Children growing up with toxic stress may have difficulty forming healthy and stable relationships. They may also have unstable work histories as adults and struggle with finances, jobs, and depression throughout life. These effects can also be passed on to their own children. Some children may face further exposure to toxic stress from historical and ongoing traumas due to systemic racism or the impacts of poverty resulting from limited educational and economic opportunities.

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Signs of trauma you may see in the classroom

Trauma is particularly challenging for educators to address because kids often don't express the distress they're feeling in a way that's easily recognizable — and they may mask their pain with behavior that's aggressive or off-putting. Identifying the symptoms of trauma in the children can help educators understand these confusing behaviors.

- Excessive anger
- Unusual startle reactions
- Loss of appetite
- Extreme fatigue
- Physical or verbal aggression
- Regular tardiness or absence from class
- Perfectionistic, controlling or anxious behavior
- Difficulty concentrating
- Frequent headaches or stomachaches
- Low self-confidence
- Irritability
- Clinginess
- Trouble making friends
- Self-harm or suicidal ideation
- Hoarding
- Risky behaviors
- Panic attacks
- Extreme self-reliance
- Running away
- Defiance
- Alienation from peers

BEHAVIOR

ACES/TRAUMA

Strategies to respond to trauma

Proactively applying trauma-informed classroom strategies benefits all students. Students respond positively when educators get to know their individual circumstances, affirm their identities and cultivate empathy in the classroom. Here are some ideas to consider incorporating in your teaching practice:

Establish social and emotional safety in your classroom.

Social and emotional safety is the cornerstone of positive classroom outcomes. Research shows that students need to feel both physically and emotionally safe to learn. Students experiencing trauma, including bias, bullying and social isolation, are more likely to feel unsafe.

Strategies
- Classroom contracts
- Explicit anti-bullying or community-building curricula
- Timely interventions in conflicts and hurtful exchanges
- Teaching and modeling of empathy and active listening skills

Create a behavior-management plan that focuses on positive reinforcement.

Discipline and behavior management are central to classroom culture and often present unique challenges for students responding to traumatic events or experiences. Foster compassion for and among your students. Focus on praising students for appropriate classroom behavior, not on punishment.

Strategies
- Implement student-generated agreements and contracts
- Adopt "zero indifference" (NOT zero-tolerance) policies
- Seek out training in restorative justice techniques
- Explore stress-management strategies to diffuse tense situations and help students process feelings in the moment
- Give students opportunities to demonstrate their strengths

Increase your self-awareness and trauma competency.

Increase your knowledge about trauma and how it may manifest for your students. Remember, students respond to trauma in different ways, and their responses may be influenced by cultural traditions, religious beliefs or familial relationships. Connect with students and their families to identify resources and services that can inform how best to support students who experience trauma.

Strategies
- Seek professional development on working with specific identity groups
- Share support resources with other educators
- Connect with community organizations
- Engage in ongoing self-assessment and reflection on your trauma responsiveness

The four positive experiences that matter

Experience shapes brain development., especially in early childhood and adolescence. Just as ACEs and trauma can impact the brain, so can positive experiences. Research has shown that there are four positive experiences that can protect children from ACEs, as well as mitigate the effects of ACEs.
- Being in nurturing, supportive relationships
- Living, playing, and learning in safe, stable, protective and equitable environments
- Engaging in constructive social/civic activities that develop a sense of connectedness
- Learning social and emotional competencies

When kids have positive relationships and experiences, their outcomes are dramatically better. They are more likely to be motivated, socially responsible, ethical and empathetic. They are also more likely to get good grades and stay away from risky behaviors.

Talk About It

If a student is struggling with stress, depression, and/or anxiety- acknowledge it. It is real and a major part of their lives. Talking about mental health and normalizing it helps kids know that they're not alone. Never dismiss a student's feelings. Avoid saying "you will get over it" or "it's just a part of being a kid."

Incorporate Mindfulness into the Classroom

Research has shown that practicing mindfulness is an effective way to reduce stress and relieve many of the symptoms associated with mental health disorders. Incorporating yoga, breathing exercises, or other mindfulness exercises into the classroom may help improve the mental health of students.

Teach Kindness & How to Build Healthy Relationships

The ability and opportunity to develop positive relationships that lessen stress and isolation and help to build a positive and supportive network is important for all kids, but especially those struggling with mental health.

Support Emotional Regulation

When a child is dysregulated, it is harder for them to listen, comprehend, and cope.
Remember the Three "R"s

- **Regulate**: focus on soothing the child. Make them feel safe, calm and secure.
- **Relate:** Validate their feelings with your word and tone of voice. Focus on connecting to the child
- **Reason:** Once the child is calm, you can talk about alternative behaviors. Until the child is regulated, they are unlikely to have the mental capacity to understand, listen, and reason.

Other Tips

- Allow flexible deadlines when possible
- Provide choices as much as possible and help students feel like they have some control over their environment
- Encourage involvement in extra-curricular activities
- Model calmness and self-control
- Identify a place where a student can go for privacy when they need some time to regain self-control
- Encourage accountability and follow-through, but not in ways that promote stress and discomfort
- Build relationships with students to develop person-centered supports. There is not a one size fits all approach.
- Ask for help

Any person employed by a school or within the field of education is a mandated reporter and must report allegations of maltreatment. If you have reason to suspect a student has been abused or neglected in a public or charter school, you should report the incident to the Minnesota Department of Education, Student Maltreatment Program.

Alleged child maltreatment that has occurred in a family, family childcare and family foster care settings should be reported to Goodhue County Health & Human Services by calling (651) 385-3200

GLOSSARY OF TERMS

Anxiety Disorders: a group of common mental health disorders. People with Anxiety Disorder will experience things like mental and physical tension about their surroundings, apprehension about the future, and will have unrealistic fears. It is the amount and intensity of the anxiety sensations and how they interfere with life that makes them disorders.

Behavior Disorders: are a group of mental health disorders that are characterized by persistent or repetitive behaviors that are uncommon among children of the same age, inappropriate, and disrupt others and activities around the child.

Case Management: a range of services provided to assist and support individuals in developing their skills to gain access to needed medical, behavioral health, housing, employment, social, educational, and other services essential to meeting basic human services. This also includes providing linkages and training for the person served in the use of basic community resources, and monitoring of overall service delivery. Case management services are available for adults and children. Eligibility is required.

Children's Therapeutic Services & Supports (CTSS): a flexible range of mental health and rehabilitation services for children and youth with emotional disturbance and their families. The services are for children and youth who need higher levels of service than standard outpatient therapy. CTSS services can be basic community-based therapy services, such as in a home or school. They can also be more intensive site-based services, such as day treatment.

Diagnostic Assessment (DA): is a written report that documents the clinical and functional face-to-face evaluation of a person's mental health. The DA is necessary to determine a member's eligibility for mental health services though Minnesota Health Care Programs.

Emotional Dysregulation (ED): the inability to manage the intensity and duration of negative emotions such as fear, sadness, or anger.

Mental Illness: health conditions involving changes in emotion, thinking or behavior (or a combination of these). Mental illnesses are associated with distress and/or problems functioning in social, work or family activities.

Mental Health/Mental Well-Being: is a state of well-being in which individuals realize his or her own abilities, can cope with normal stresses of life, can work productively and fruitfully, and are able to make a contribution to his or her community.

Mood Disorders: are a group of mental health disorders related to problems in how the brain controls emotions. A person with a mood disorder experiences an abnormal change in mood.

Parent Child Interaction Therapy (PCIT): is an evidence-based treatment for young children with behavioral and emotional disorders that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns.

Personality Disorders: are a group of mental health disorders in which a person has a rigid and unhealthy pattern of thinking, functioning and behaving. A person with a personality disorder has trouble perceiving and relating to situations and people. This causes significant problems and limitations in relationships, social activities, work and school.

Positive Behavior Interventions and Supports (PBIS): is a framework for schools to encourage good behavior. It teaches kids about behavior, just as they would teach about other subjects. The focus is on prevention.

Protective Factor: is anything that decreases a person's chances of getting a disorder or having a negative outcome. An example of a protective factor is having a supporting family or community.

Psychiatrist: is a medical doctor who specializes in the understanding, diagnosing and treating mental disorders. They are able to prescribe medications.

Psychologist: is a Ph.D. level specialist who is licensed to practice professional treatment of mental, emotional, and behavioral disorders.

Psychotherapy: is a type of treatment for emotional, behavioral, personality, and other psychiatric disorders based mainly on person to person communication.

Psychotic Disorders: severe mental disorders that cause abnormal thinking and perceptions. People with these types of disorders often experience delusions and hallucinations. Schizophrenia is one type of psychotic disorder.

Resilience: the ability to bounce back after set backs.

School Counselor: school professionals that promote academic performance and achievement, personal and social development, and overall career planning and development.

School Emergency Response Teams: Each school's emergency response team serves as a first responder for school emergencies, assists building and district administration in developing and revising building-level crisis plans, and implements the crisis management plan to respond to threats and active emergency situations.

School-Linked Mental Health: refers to mental health services delivered in a school setting.

School Psychologist: school professional that support students, families, and teachers in academic and emotional success. They utilize their professional knowledge in human development and mental health to both identify issues potentially impeding a student's overall success and find appropriate, working solutions.

School Social Worker: trained mental health professionals with a degree in social work who provide services related to a person's social, emotional and life adjustment to school and/or society. School social workers are the link between the home, school and community in providing direct as well as indirect services to students, families and school personnel to promote and support students' academic and social success.

Serious Emotional Disturbance (SED): refers to children (under the age of 18) who have a diagnosable mental, behavioral or emotional disorder of sufficient duration to meet very specific diagnostic criteria, that results in functional impairment which substantially interferes with or limits the child's role or functioning in family, school and community activities.

Social Emotional Learning (SEL): is a the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.

Social Worker: an educated professional trained to respond to a variety of situations, assess immediate needs, and implement a plan to assure safety and improve well being.

Stigma (related to mental illness): is attaching negative qualities to mental disorders (such as thinking people with a mental disorder are dangerous). Stigma is a strong force and may keep people from speaking about their mental health, getting help, or receiving treatment.

Suicide: is death that occurs as a result of an action designed to end one's life.

Suicidal Ideation: refers to thoughts, images, or fantasies of harming or killing oneself.

Teletherapy: is when a therapist or counselor provide psychological counseling and support over the internet through email, video conferencing, online chat, or a phone call.

Therapist: is a person who is professionally trained and/or skilled in the practice of a particular type of therapy.

FIND A MENTAL HEALTH PROVIDER

Fast-TrackerMN.org

Fast Tracker is a website that connects people to mental health and substance use disorder resources.   They connect individuals, families, mental health and substance use disorder providers, physicians, care coordinators, and others with a real-time, searchable directory of mental health and substance use disorder resources and their availability within Minnesota. Search for services/resources by one or a combination of these criteria such as insurance plans, specific services, and availability.
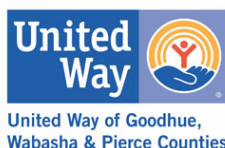
Call: 2-1-1
Toll Free: 800- 543-7709
Local: 651-291-0211
Text: Text your zip code to 898-211 (Available M-F 8am- 7pm)

United Way 2-1-1 provides free and confidential health and human services information for people in Minnesota. They are available 24 hours a day, 7 days a week to connect you with the resources and information you need. Whether you are in crisis, or need a little support, they're here to help. Call, text, or chat with your local 211 to speak with a community resource specialist in your area who will help you find services and resources that are available to you.

TELETHERAPY

Teletherapy is when a therapist or counselor provides psychological counseling and support over the internet through email, video conferencing, online chat, or a phone call. Teletherapy may improve access to care for people who live in remote areas, lack transportation, can't get an appointment with a local provider in a timely manner, or simply because they find it more convenient. The practice can also enhance psychological services by allowing psychologists to support clients between visits. Some teletherapy services are not covered by insurance.

Commonly Used Teletherapy Services

Company/App Name	Telehealth Modality	Cost
American Well americanwell.com	Video conferencing	$79/session; some insurances reimburse
BetterHelp betterhelp.com	Asynchronous messaging, live chat, live phone, video conferencing	Plans begin at $35/week
Breakthrough breakthrough.com	Video conferencing	Determined by therapist; some insurances reimburse
Minnesota Online Counseling mnonlinecounseling.com	Video conferencing, live phone, live text	Contact for more information. Participates in a variety of insurance plans
River City Clinic rivercityclinic.com	Video conferencing, live phone (initial assessment in person)	Contact for more information. Participates in a variety of insurance plans
7 Cups of Tea 7cups.com	Asynchronous messaging	Plans begin at $37.50/week or $150/month
Talk Space talkspace.com	Asynchronous messaging, video and voice messaging	Plans begin at $32/week

This is not intended to be a comprehensive list of all telehealth services. Please contact your local provider to see if they offer telehealth services.

INSURANCE

Insurance is a crucial tool that can grant access to needed treatment to get well. Health insurance helps pay for mental health care needs including checkups, visits to specialists, emergency care, and hospital stays. In most cases insurance will keep a person from paying the full cost of medical services. Getting insured or reviewing your current insurance plan may seem complicated, but knowing the basics can help you navigate the system successfully. Health plans and insurance companies must apply similar rules to mental health and substance use disorder benefits as they do to physical health benefits.

What to know

Your health insurance is required to offer benefits for mental health and substance use services that are at least the same as those for physical health. This includes benefits for:

- Payment, such as deductibles, copayments, coinsurance and out-of-pocket limits.
- Treatment, such as visits covered.
- Care management, such as requirements to get treatment authorized before getting it.

What to Do

Exercise your rights

If you don't think your health insurance is covering mental health and substance use services as they should, you can do the following:

- **Contact your health insurance company.** If your plan denies payment, it must give you the reason for the denial in writing.
- **File an appeal.** If your plan denies a claim, you have the right to appeal it.
- **Contact your health plan's state regulator.** The three state agencies listed below oversee health plans in Minnesota. They are available to assist you with questions or concerns.
    - **Public program enrollees:** Contact the Ombudsman for Public Managed Health Care Programs at 651-431-2660 or 1-800-657-3729.
    - **Individual or small group insurance policy enrollees:** Contact the Minnesota Department of Commerce at 651-539-1600 or 1-800-657-3602.
    - **For individual or small group HMO policy enrollees:** Contact the Minnesota Department of Health at 651-201-5100 or 1-800-657-3916.

This information is from the Minnesota Department of Health Quick Card, "Mental Health"

If you do not have medical insurance visit mnsure.org or call Goodhue County Health & Human Services at (651)385-3200 to see if you qualify for a public insurance program.

TRANSPORTATION

There are services in Goodhue County for community members who need transportation to and from medical appointments.

Faith In Action In Red Wing Services
651-327-2400
Volunteer drivers will transport individuals to local appointments. Requests must be made 2 days in advance of services, and rides will depend on availability of drivers.

Hiawathaland Transit
866-623-7505
Hiawathaland Transit is operated by Three Rivers and is available to everyone for any reason. Their buses can transport anyone anywhere within city limits! In other communities, A Dial-A-Ride bus is available (please note: in cities where both route and Dial-A-Ride exist, some eligibility restrictions do apply to the Dial-A-Ride service).

Hiawathaland Auxiliary Regional Transit (HART) Program
866-623-7505
hart@threeriverscap.org
Drivers transport residents of Goodhue, Rice & Wabasha counties who are unable to utilize public transportation, using their personal vehicle. Individuals can receive rides to and from destinations such as medical appointments, shopping, entertainment, supportive services, friendly visits, volunteer work, and more.

Red Wing Mobility
651-388-9215
Provides transportation to medical or dental appointments in State Certified vehicles. Some restrictions do apply.

RideConnect
866-567-7242
South Country Health Alliance members may be eligible for non-emergency medical transportation (NEMT) services to help them get to and from their health care appointments. RideConnect offers safe and reliable rides to covered medical, behavioral health, and dental appointments.

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