## **Coalition Worksheet for Youth Suicide Prevention Task Force**

Please complete as much as possible and submit to <a href="mailto:Crystal.Moe@ag.ks.gov">Crystal.Moe@ag.ks.gov</a>

Name of your	Kansas School Counselor Association
organization:	Kansas Association of Counselor Education and Supervision
Best Contact	Name: Dr. Judy Hughey
Information to be	Email: jhughey@ksu.edu
Publically Shared:	Website: https://sites.google.com/view/ksschoolcounselor/home
Tublically Shared.	Phone: 785-532-8905
Purpose of your organization:	School counselors design and deliver comprehensive school counseling programs that promote student achievement. These programs are comprehensive in scope, preventive in design and developmental in nature. A comprehensive school counseling program is an integral component of the school's academic mission. Comprehensive school counseling programs, driven by student data and based on standards in academic, career and social/emotional development, promote and enhance the learning process for all students. School counselors focus their skills, time and energy on direct and indirect services to students. To achieve maximum program effectiveness, the American School Counselor Association recommends a school-counselor-to-student ratio of 1:250 and that school counselors spend 80 percent or more of their time in direct and indirect services to students.
What efforts have proven to be successful in your purpose to address youth suicide:	<ul> <li>Implementing a school counseling core curriculum that proactively enhances awareness of mental health; promotes positive, healthy behaviors; and seeks to remove the stigma associated with mental health issues</li> <li>Providing responsive services including internal and external referral procedures, short-term counseling or crisis intervention focused on mental health or situational (e.g. grief, difficult transitions) concerns with the intent of helping the student return to the classroom and removing barriers to learning</li> <li>Recognizing warning signs: changes in school performance (changes in grades, attendance), mood changes, complaining of illness before school, increased disciplinary problems at school, experiencing problems at home or family situation (stress, trauma, divorce, substance abuse, exposure to poverty conditions domestic violence), communication from teachers about problems at school, and dealing with existing mental health concerns</li> <li>Providing school-based prevention and universal interventions and targeted interventions for students with mental health and behavioral health concerns</li> <li>Providing students with individual planning addressing their academic, career and social/emotional (including mental health) needs</li> <li>Educating teachers, administrators, parents/guardians, and community stakeholders about the mental health concerns of students, including recognition of the role environmental factors have in causing or exacerbating mental health issues and provide resources and information</li> <li>Advocating, collaborating and coordinating with school and community stakeholders to ensure that students and their families have access to mental health services</li> <li>Recognizing and addressing barriers to access mental health services and the associated stigma, including cultural and linguistic impediments</li> <li>Adhering to appropriate guidelines regarding confidentiality, the distinction between public and private information and consultation</li> </ul>

	<ul> <li>Directing students and parents to school and/or community resources for additional assistance through referrals that treat mental health issues (suicidal ideation, violence, abuse and depression)</li> <li>Helping identify and address students' mental health issues while working within the ASCA's Ethical Standards; Competencies for School Counselors; and national, state and local legislation (Family Educational Rights and Privacy Act and Health Insurance Portability and Accountability Act), which guide school counselors' informed decision-making and standardize professional practice to protect both the student and school counselor</li> <li>Seeking to continually update school counselor professional knowledge regarding the students' social/emotional needs</li> <li>Consulting with counselor educators and appropriate community stakeholders</li> <li>Working with KACES to prepare more school counselors to meet the needed student counselor ratio of 1-250.</li> </ul>
What hurdles have you experienced and/or lessons learned through your efforts:	<ol> <li>The lack of residential care settings is a barrier to effective treatment.         Hospitals often do not have adequate beds to admit the number of students in need of care.</li> <li>Access to appropriately educated professional staff in hospitals, residential settings, and counseling centers is an impediment for students and families seeking mental health treatment options.</li> <li>Communication between community service providers and school counselors can be a barrier to treatment and a successful transition in returning to school from treatment.</li> </ol>
Recommendations or suggestions for the task force to consider:	<ol> <li>Mandate and provide licensed school counselors PreK-12 for all students in all schools.</li> <li>Abide by a ratio no greater than 1 licensed school counselor to 250 students as recommended by the Kansas School Counselor Association and the American School Counselor Association.</li> <li>Allow and expect licensed school counselors to spend 80% of time on direct and indirect services with students.</li> <li>Implement comprehensive school counseling programs PreK-12.</li> <li>Incentivize "Grow your Own" opportunities for areas of licensed school counselor shortage.</li> <li>Revise procedures that serve as eligibility barriers to KS school counselors in federal student loan repayment programs. Publicize the Kansas rural economic development program for select geographic areas that includes a student loan repayment program.</li> <li>Align pay scale for counselors similar to education needed (60 graduate credit hour programs and other incentives), aligned with other mental health professionals in the school setting (stipends).</li> </ol>