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MOTIVATION

The Initiative for Student Wellness (ISW) School Based: Screening, Brief Intervention and Referral to Treatment (SB-SBIRT) is an innovative program born out of the desire to address the youth behavioral health crisis impacting our region. This crisis has been identified by the U.S. Surgeon General as a national priority and echoed by the Governor of Washington’s emergency declaration in March of 2021. The behavioral health challenges facing youth over the last couple of years have not only been exacerbated by a national pandemic, but the need has surpassed the availability of necessary resources to adequately address the crisis.

With suicide the second leading cause of death amongst youth and adolescents ages 10 to 24, and encompassing 15% of all suicides nationwide (Center for Disease Control, 2023), the realities facing youth are daunting. The idea of ISW was conceived in early 2019, but it only became a viable program in 2021 with the backing of the Spokane County Board of County Commissioners (BoCC) and secured funding. The initial phase of implementation commenced in the fall of 2022.

The impetus for moving forward with this project was not only driven by the desperate need expressed by the community for a solution to the youth mental health crisis, but the clear and distinct recognition that for change to be affected, Spokane County would need to lead through investing and pioneering the innovative first steps toward system change. Recognizing the unique and vital role that school systems play in the lives of youth and families, Spokane County collaborated directly with local school districts to implement ISW. This joint partnership facilitated the development and implementation process, allowing for the identification of solutions, incorporation of mental health treatment interventions, establishment of referral pathways, and the creation of processes that promote recovery, resiliency, and equitable access for students.
MOTIVATION CONT...

To ensure ISW avoided duplication of existing systems and provided services in an otherwise resource limited environment, implementing a pilot program was deemed vital, especially in schools lacking integrated behavioral health supports and sufficient community resource access for youth and families. To ensure strategic implementation during the pilot phase of ISW, smaller schools with a lower student census were found to be more suitable for targeted pilot programs. Furthermore, recognizing that insurance coverage is often a barrier for youth and families accessing behavioral health services, the ISW program is creatively funded through Spokane County Mental Health Sales Tax, allowing for any youth needing a behavioral health service to have access, removing limitations based on healthcare insurance or medical necessity, and preventing youth and families from enduring the arduous process of financial means testing. These crucial components of ISW provide for increased access, equitability, and responsive behavioral health services for any and all youth necessitating behavioral health services who may not otherwise have adequate access designed in a manner and located in an environment most conducive to their wellness.

The Spokane County Community Services Department (CSD) developed, enhanced, and implemented the ISW program in partnership with Reclaiming Futures, the developer, and license owner of the evidence-based SB-SBIRT universal screener called "Check Yourself." This partnership was pivotal in getting the program off the ground and establishing the integrated modality that underpins the ISW program. Additionally, Tickit Health, another partner, enabled the implementation of the screening tool in a digital format that was easy for students to navigate and only took 15-20 minutes to complete.

It is important to note that there are variations between the high school and middle school versions of the survey. The high school survey includes more nuanced questions related to older youth, such as relationships and complex themes around drug use. However, both versions ensure universal access for youth and schools without the challenges of complex system implementation or training while maintaining the highest industry standards for security and youth safeguards. Through our partnership with Tickit Health and Reclaiming Futures, the ISW program not only benefits from the proven success of the model and the reliability of an established and evidence-based screening tool, but also receives ongoing technical assistance training to support our project sites.

Spokane County CSD has also partnered with Spokane Public Schools (SPS) Behavioral Health and Northeast Washington ESD 101 to provide the direct treatment services associated with the ISW program. These partners were chosen specifically for their track record of delivering behavioral health services within school systems throughout Spokane County and their commitment to advocacy and improving the lives of youth through a quality array of services and treatment modalities. The data presented in this report will demonstrate the profoundly positive impact on students' lives, which would not have been possible without the partnership and direct treatment component offered by SPS Behavioral Health and Northeast ESD 101 for youth needing or requesting follow-up after completing the screener.
PROGRAM COMPONENTS

The ISW program primarily employs the evidence-based model of SB-SBIRT as the therapeutic and engagement modality for identifying the behavioral health needs of youth, providing necessary interventions, and ensuring a vital connection to the resources needed by the youth and their families. This modality is highly suitable for integration within structured academic systems, leveraging existing relationships within established school frameworks to achieve universal engagement. This not only normalizes the engagement process and reduces stigma, but also allows for a tailored approach to meet the individual needs of the student within a familiar environment. Implementation of the ISW program follows a systematic process outlined in the core components of the School-Based Screening, Brief Intervention, and Referral to Treatment (SB-SBIRT) modality.

SCREENING: Integral to identification and implementation of services, the screening process is the veritable gateway into the ISW program, ensuring appropriate and necessary services are provided based on the students’ needs. Ensuring universal access and engagement to services, every student in a target grade identified by the school is provided the opportunity to complete an SB-SBIRT survey. The survey is provided through a digital medium (laptop, tablet, etc.) chosen by the school district, utilizing Tickit Health’s digital “Check Yourself” tool developed in partnership with Portland State University, Reclaiming Futures, and Seattle Children’s. This secure, interactive online survey takes 15-20 minutes to complete and helps identify behavioral health concerns, resource needs, potential external or internal stressors, strengths, and protective factors.

Based on the identified needs of the students, each student is categorized using a tiered system after completing the screening. Tier 3 represents immediate safety concerns endorsed at screening, and these students are to be seen by the end of the school day. Tier 2 includes risks to health and well-being endorsed at screening, and these students are to receive follow-up no later than 2 weeks after screening. Tier 1 students have no risks endorsed at screening and are to be seen as needed.

BRIEF INTERVENTION: Students identified as needing follow-up through the screening process or those who request assistance at any time gain access to brief intervention services provided by a licensed mental health provider. These services are individualized based on the students’ needs and level of engagement. Each student identified as needing services and desiring voluntary engagement receives brief therapeutic intervention services tailored to their needs. Initially, ten (10) engagements are automatically approved, with extensions granted as needed to ensure continued support and linkage to medically necessary services based on individual acuity.

REFERRAL TO TREATMENT: If additional treatment/resource needs are identified or the acuity of the symptoms exceed the scope of brief intervention services, the mental health provider will facilitate a referral to treatment services as appropriate. Referral services also include coordination support to ensure youth access resources, community support programs, health and wellness information, or educational supports identified as part of the screening and engagement process.
Implementation of the ISW program began in the West Valley School District in the fall of 2022, with initial cohorts selected by grades and notices of the universal screening were provided to youth and families with the option to opt-out of the screener. Key school staff were identified to support the initial implementation, with a dedicated clinician funded to provide ISW program services stationed both within West Valley High School (WVHS) and Centennial Middle School (CMS).

Subsequent plans for a phased expansion were highlighted early in the program. However, with the overwhelming positive feedback received, expansion was scaled up. Beginning at the start of 2023 two (2) additional school districts were added to the program; Riverside School District (High School and Middle School) and Freeman School District (High School and Middle School). Further expansion included Cheney School District in the summer of 2023, with plans to provide ISW services in the high school and middle school, joining the Freeman and Riverside school districts for a fall 2023 implementation at each of these (3) additional district sites.

To ensure program viability, develop collaborative partnerships, and provide the necessary resources to support success, the Spokane County CSD works closely with each project site to provide in-depth instruction on the evidence-based SB-SBIRT modality, detailed training on program development and implementation, clinical coaching, ongoing technical assistance, and additional supports as needed. Regular planning sessions and development meetings are facilitated by the Spokane County CSD with the clinical provider, district leadership, and school staff to promote collaboration and a cohesive vision. These collaborations are crucial for early onboarding of the ISW program, addressing questions or concerns, exploring and developing roles, building relationships, and providing guidance to overcome any site-specific program barriers.

Recurring check-ins with program stakeholders also provide the added benefit of non-invasive program oversight and monitoring, keeping the Spokane County CSD abreast of any programmatic challenges, potential funding impacts, or emerging trends that may require more direct intervention. ISW providers and school staff experience the day-to-day workings of the ISW program and provide invaluable insight in solving problems and providing critical feedback for program improvement. This was identified as a key takeaway in our year-end review of lessons learned, because without the stalwart partnership and support of the school and district staff, the program would have ended before it began.
YEAR- END DATA REVIEW

The close of the 2022-2023 School Year heralded the successful and full implementation of the ISW program along with completed screenings for all students at Centennial Middle School (CMS) and West Valley High School (WVHS) within the target grades identified. CMS target grade(s) included seventh (7th) grade students, and West Valley High School identified tenth (10th) grade students. In total, between both schools, 285 students were screened via the universal screening tool. Although initial screenings provided at the onset of the program had Spokane County CSD providing onsite technical assistance, program providers and school staff quickly became proficient allowing for Spokane County CSD to transition to the role of technical support and facilitator of virtual team huddles. This provided an unencumbered role of program management to lead discussions on screening results, provide program oversight, and identify when to step in and provide further assistance. Spokane County CSD has continued to meet monthly through virtual meetings with school staff and SPS Behavioral Health, the contracted behavioral health provider located within CMS and WVHS throughout the remainder of the school year.

Beginning with implementation specifics at CMS, during the 2022-2023 school year 142 seventh-grade students were screened via the Check Yourself screening tool, and of those 142 students, 71 (50.0%) students were identified in the Tier 3 or Tier 2 risk categories, necessitating direct follow up by the ISW behavioral health clinician. Of those identified in the highest risk categories, the survey questions and subsequent responses with the highest frequency triggering the Tier 3 and 2 risk categories were compiled and analyzed.

SB-SBIRT RISK CATEGORIZATION

The image below provides information on how the universal screener uses a tiered follow-up structure that prioritizes students who endorse risk factors. The below algorithm was used to categorize students as Tier 1, Tier 2, or Tier 3 based on the risk factors endorsed. All students received personalized feedback and answered questions about protective factors and relevant context such as goals, home life, and coping strategies.

<table>
<thead>
<tr>
<th>Levels</th>
<th>Tier 1 (Personalized Feedback/No Flag)</th>
<th>Tier 2 (Brief Intervention)</th>
<th>Tier 3 (Immediate BI + referral)</th>
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<tr>
<td>Screening Criteria</td>
<td>• Reports low sleep only</td>
<td>• Reported using substances (including e-cigs or cigarettes/tobacco) in the past school year</td>
<td>• Endorses self-harm or suicidal thoughts, ever tried to kill themselves</td>
</tr>
<tr>
<td>All students regardless of behaviors endorsed see feedback on:</td>
<td>• Tips for improved sleep</td>
<td>• Reported somatic symptoms (frequent pains and aches) more than half the days or nearly everyday</td>
<td>• Feels harassed/threatened in some way in the past year and feels their safety is currently at risk</td>
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<tr>
<td></td>
<td>• Info that most teens don’t drink or use marijuana and the risks of alcohol and marijuana use</td>
<td>• Depression symptoms (PHQ-2 +)</td>
<td>• Wants to speak with a counselor confidentially in the next few weeks.</td>
</tr>
<tr>
<td></td>
<td>• Info about the harms of vaping on your health</td>
<td>• Anxiety symptoms (GAD-2 +)</td>
<td>• Reports intention to use marijuana or alcohol in the next year (including e-cigs or cigarettes/tobacco) (maybe or likely to use)</td>
</tr>
<tr>
<td></td>
<td>• Tips to prevent depression, why checking your mood is important</td>
<td>• Wants to speak with a counselor confidentially in the next few weeks.</td>
<td>• Feels harassed/threatened in some way in the past year</td>
</tr>
<tr>
<td></td>
<td>• All students regardless of behaviors endorsed see feedback on:</td>
<td>• Reports intention to use marijuana or alcohol in the next year (including e-cigs or cigarettes/tobacco) (maybe or likely to use)</td>
<td>• Feels angry, worried, or sad on most days (and does not also endorse ok, great, or good).</td>
</tr>
<tr>
<td>Relevant Context</td>
<td>• Biggest supports, best qualities</td>
<td>• Feels harassed/threatened in some way in the past year</td>
<td>• Wants to speak with a counselor confidentially asap</td>
</tr>
<tr>
<td></td>
<td>• Goals, coping strategies</td>
<td>• Feels angry, worried, or sad on most days (and does not also endorse ok, great, or good).</td>
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TIER 3 QUESTIONS INCLUDE:

- During the past year, have you ever hurt yourself on purpose like cutting, burning, or hitting?
- During the past year, did you ever seriously think about ending your life?
- Have you ever tried to kill yourself?
- Because of bullying, I feel my safety is at risk right now.

TIER 2 QUESTIONS INCLUDE:

- Has anyone bullied, threatened, or harassed you in real life or on social media?
- Is there something you would like to talk to a counselor about in private?
- In the past year, how many times have you drank alcohol?
- In the past year, how many times have you used marijuana/cannabis?
- In the past year, how many times have you used a vaping device containing nicotine and/or other flavors?
- How likely are you to drink alcohol in the next year?

In addition to providing follow-up and services to youth identified from the screener as needing intervention, CMS staff demonstrated their dedication and commitment to the wellbeing of their students by taking on the impressive initiative to follow-up with every student screened in the program. Despite the program modality indicating only youth categorized into Tier 3 and Tier 2 require compulsory follow-up, CMS staff went above and beyond by ensuring that each student screened was provided access to behavioral health support and information on available resources. Individualized feedback and encouragement were also provided to each student recognizing their identified strengths, informal and formal supports, and stated goals identified in the screening process. This dedication to serving students only further enhances the success of ISW by amplifying the program’s overall goals of promoting behavioral health recovery for youth in Spokane County.

Alongside CMS, WVHS also implemented ISW in the fall of the 2022-2023 school year and completed screening the target cohort of tenth-grade students who opted into the process. Similar to the implementation at CMS, Spokane County CSD provided initial on-site technical assistance during the screening process and participated in the post-screening follow-up. Spokane County CSD’s transition to program oversight and meeting facilitation occurred concurrently with CMS, with ongoing technical support and collaborative reviews provided at a minimum of monthly, with ad hoc meetings as needed. Completion of student screenings was made possible through a collaborative effort with WVHS administrators and SPS Behavioral Health, who worked jointly to develop mutually agreed upon timeframes and student cohorts for screenings throughout the year to ensure each youth had access to appropriate follow-up if needed. Coordination with SPS behavioral health and WVHS administrators was effortless throughout implementation, as each demonstrated their commitment to serving youth through the ISW program by being creative in identifying solutions to barriers and showing evident passion for providing individualized care and prompt responsiveness to ensure all necessary services were provided.

At WVHS, a total of 143 youth received a screening during the school year. Of the 143 youth screened, 77 (53.8%) were categorized in Tier 3 or Tier 2 based on their responses to the survey. This data is consistent with data collected by CMS and further substantiate the need for comprehensive and integrated behavioral health services for youth in our community at large.

Of these identified in the highest risk categories, the survey questions and subsequent responses with the highest frequency triggering the Tier 3 and 2 risk categories were compiled and analyzed.
### Centennial MS  West Valley HS

**During the past year, have you ever hurt yourself on purpose like cutting, biting, burning, or hitting?**
- Centennial MS: 13%
- West Valley HS: 15%

**During the past year, did you ever seriously think about ending your life?**
- Centennial MS: 14%
- West Valley HS: 13%

**Have you ever tried to kill yourself?**
- Centennial MS: 5%
- West Valley HS: 3%

**Has anyone bullied, threatened or harassed you in real life or on social media within the last year?**
- Centennial MS: 19%
- West Valley HS: 10%

**Has anyone bullied, threatened or harassed you in real life or on social media within the last month?**
- Centennial MS: 6%
- West Valley HS: 4%

**Has anyone bullied, threatened or harassed you in real life or on social media within the last week?**
- Centennial MS: 4%
- West Valley HS: 3%

Because of bullying, I feel my safety is at risk now.
- Centennial MS: 1%
- West Valley HS: 1%

**Within the last year, have you purposefully vomited, taken diet pills, or not eaten to lose/control your weight?**
- Centennial MS: 6%
- West Valley HS: 13%

### Centennial MS  West Valley HS

**In the past year, did you drink alcohol once or twice?**
- Centennial MS: 6%
- West Valley HS: 15%

**In the past year, did you drink alcohol monthly?**
- Centennial MS: 15%
- West Valley HS: 1%

**In the past year, did you drink alcohol weekly or more?**
- Centennial MS: 1%

**In the past year, did you use a vaping device containing nicotine and/or other flavor once or twice?**
- Centennial MS: 7%
- West Valley HS: 8%

**In the past year, did you use a vaping device containing nicotine and/or other flavor monthly?**
- Centennial MS: 2%
- West Valley HS: 1%

**In the past year, did you use a vaping device containing nicotine and/or other flavor weekly or more?**
- Centennial MS: 4%

**In the past year, how many times have you used marijuana/weed/cannabis once or twice?**
- Centennial MS: 8%
- West Valley HS: 8%

**In the past year, how many times have you used marijuana/weed/cannabis monthly?**
- Centennial MS: 1%
- West Valley HS: 2%

**In the past year, how many times have you used marijuana/weed/cannabis weekly or more?**
- Centennial MS: 2%
ISW SOLUTIONS TO IDENTIFIED NEED

The data from both schools reveals a significant number of students reporting various concerning risk factors that require follow-up. These factors include self-harm or suicidal ideation/thoughts, environmental stressors like bullying, substance use, and disordered eating concerns. These factors negatively impact the youth's functioning and mental health. Additionally, 86% of students screened reported being not currently enrolled or engaged with a mental health therapist. This data was surprising, considering the number of students reporting significant risk factors, as more students would benefit from brief or more comprehensive outpatient treatment.

The ISW program ensures that any student endorsing a risk in the survey or requesting additional follow-up receives the necessary support and connection to services to resolve their concerns and promote overall wellness. Universal screening, along with identifying students not receiving behavioral health services from a therapist in the community, enables ISW to provide interventions and linkages to additional resources for youth who may not have otherwise been identified by school staff as needing support. ISW plays a vital role in early identification and prevention of behavioral health needs, academic and bullying concerns, and provides a solution for youth lacking necessary resources.

Information garnered from ISW also provides specific examples of the impact of the youth behavioral health crisis in our region and allows for targeted funding based on data to address the unique needs of the youth in Spokane County. ISW data helps create a launch point for funding other services in the community, as significant wait times for additional services for youth referred from ISW were noted by SPS Behavioral Health clinicians. The information also helps identify regional trends and the need for further resource development, as well as options to expand services within schools, such as information and resources on bullying and substance use.

Moreover, half of all students in both schools were identified as needing in-person follow-up, highlighting the need for proper funding for behavioral health supports within the school system. ISW's unique funding model funds behavioral health professionals located within the schools, allowing for timely, individualized, and effective support, enabling the ISW Program to reach as many students as possible. With the continued expansion of ISW, the program is well-positioned to target the behavioral health needs of youth and provide real-time feedback on mental health issues facing the children and adolescents of Spokane County.
This first-year data gathered from ISW is also similar to data obtained through other surveys implemented in Washington state. The Washington Healthy Youth Survey showed the data for Spokane County mirror national trends, with the Spokane Regional Health District (SRHD) data for 2021 revealing 30-40% of 8th, 10th and 12th grade youth report “feeling sad or hopelessness almost every day for two weeks or more in a row” and estimates that “two-thirds of children with mental health problems do not get the help they need” (County Health Insights, n.d.). This data is a clear reflection of the statewide impact of the youth mental health crisis, and programs like ISW provide the necessary resources, skills, and supports youth desperately need to create a healthier and safer environment for generations to come. However, unlike the Healthy Youth Survey the ISW program modality integrates treatment and referral services, ensuring immediate support and enhancing more positive long-term outcomes.

Through implementation of ISW, a total of 25 school staff between CMS and WVHS were trained in ISW. These positions ranged from superintendents, administrators, teachers, and school counselors. Due to this, ISW has a greater impact on the culture within the school system which allows for more students to receive the services they need at school, in the community, and at home. Having additional staff trained in ISW also removes service gaps due to a wider range of cross-system partners being knowledgeable of behavioral health programs and community resources and allows for greater preventative and protective measures to be implemented, ensuring behavioral health awareness and services are expanded. Providing education and awareness to additional individuals also amplifies the program goals and the reach of ISW in areas of advocacy, community awareness, and partnerships with existing resources. These identified areas are vital to ensuring the mental health crisis among youth is addressed head-on, and ISW is uniquely positioned at the forefront and leading the way through system change.
BRIEF INTERVENTIONS AND CLINICIAN OUTREACH

Data from ISW clinicians regarding follow-up with students identified as needing support or requesting to be seen is also tracked and recorded in the Spokane County CSD’s Health Information Systems Raintree program. Follow-up by clinicians is categorized into four (4) different codes: Screening, Engagement, Treatment, and Referral.

Between CMS and WVHS, clinicians conducted:
- 235 brief interventions resulting in 269 hours of direct treatment services.
- 86 Engagement contacts totaling 40 hours of contact with students explaining the program, offering support, or connecting to additional services in the community or at school.
- Referrals to ongoing mental health services, Substance Use assessments, clothing and food resources, as well as referrals to school counselors for reasons such as academic needs and bullying concerns have been the primary referral sources from ISW clinicians.

The above data demonstrates ISW clinicians provided an immense number of services to students throughout the school year; this occurred through engagement with students, providing information about the program, where to find support if needed, direct treatment hours serving youth in need, and referrals made to additional resources. This service array provides a real-time window into the existing need within schools in our communities and speaks to the profound impact ISW clinicians have in providing a solution through interventions and engagement with students. ISW also addresses common barriers to youth seeking services such as stigma associated with behavioral health. Through education, awareness, and the normalization of behavioral health challenges as a vital part of well-being, behavioral healthcare can become commonplace in our communities in Spokane County.

Recognizing that the behavioral health needs of students don’t cease at the culmination of the school year, Spokane County CSD has worked closely with SPS Behavioral Health to establish ongoing services during the summer months for youth who continue to need support. ISW clinicians have provided direct information regarding the benefit of the continuation of services in the areas of continuity of care for ongoing behavioral health support, structure, to reduce feelings of loneliness and isolation during the summer months, and to allow for connection to other community resources or more intensive forms of behavioral health treatment as needed.
GOALS AND SUPPORTS IDENTIFIED BY YOUTH

A crucial aspect of the ISW program is the recognition that an individual’s goals, strengths, family, and other identified supports play a vital role in overall well-being and life satisfaction. ISW uniquely emphasizes these traits which are highlighted when taking the universal screener. Through this avenue, ISW takes a holistic approach as opposed to a deficits-based model to serving youth and seeks to amplify voice and choice by partnering alongside each youth enrolled in the program. This is accomplished by offering individualized treatment and highlighting and expanding the positive areas identified by the youth. Strengths, goals, and supports are also incorporated and emphasized by the ISW clinicians when following-up with youth to create trust, hope, identify protective factors, and resiliency in helping to achieve success in the areas identified by the individual when taking the screener.

As schools commonly play a supportive role not only in the lives of the youth, but in the lives of families, ISW is situated to impact the community in unique ways that go beyond individuals served through the program. ISW data provides feedback on family home life and supports identified by the individual, allowing for strengthening trust, providing necessary services to youth and their families, and reducing stigma related to mental health and substance use interventions across generations.

The most common goals identified by CMS students from the screener were:
- Improving/keeping up grades, improve in sports/athletics and spend more time with friends.

In the area of positive supports, the highest-rated were both mothers and fathers, along with friends and teacher/coaches.

The screening tool also highlights the importance of support at school, specifically the identification of:
- “At school, there is an adult who will help me if I need it” (63% of students answered “Yes,” 24% answered “sometimes”).
- “At school, there is an adult who really cares about me” (60% “Yes,” 27% “sometimes”).
- “At school, there is an adult who tells me when I do a good job” (63% “Yes,” 26% “sometimes”).

The most common goals identified by WVHS students from the screener were:
- Improve/keep up grades, get/stay healthy, improve in sports/athletics, get a job, and spend more time with friends.

When looking at the biggest supports identified by youth taking the screening, individuals such as parents, siblings, friends, and teachers/coaches were identified as some of the strongest supports.

The biggest supports identified within the school by WVHS students were demonstrated as such:
- “At School, there is an adult who will help me if I need it,” (87% “yes” or “sometimes.”)
- “At school, there is an adult who really cares about me,” (86% “yes” or “sometimes.”)
- “At school there is an adult who tells me when I do a good job,” (90% “yes” or “sometimes.”)
- “At school, there is an adult who listens to me when I have something to say,” (91% “yes” or “sometimes.”)
- “At school, there is an adult who believes that I will be a success,” (92% “yes” or “sometimes.”)

As clearly reflected in the responses from the universal screening tool, students identified strong support systems and goals related to success within the school environment. ISW plays a crucial role in helping students actualize these goals, expand supports, and create a healthier and safer student body and community.
One of the primary goals of the ISW program was to reduce disparities in accessing care and improve outcomes for students from underrepresented groups. The universal screening process ensures that all students, regardless of their background, circumstances, and income level, receive equitable access to services. ISW supports students in the following ways:

1) Providing culturally-sensitive therapeutic services: Adolescents from diverse backgrounds may face unique challenges related to their cultural, socio-economic situation. Culturally sensitive therapeutic services help them feel understood, accepted, and validated, promoting positive outcomes and overall well-being.

2) Addressing systemic barriers: Adolescents from marginalized communities may face systemic barriers contributing to mental health challenges. ISW provides a safe space for adolescents to discuss and work through these challenges with a therapist.

3) Empowering adolescents to advocate for themselves: Therapy helps build self-awareness, self-confidence, and communication skills, empowering youth to advocate for themselves and others in their communities, promoting equity and giving them a voice.

4) Fostering empathy and understanding: Therapy can help youth develop empathy and understanding for others who may come from different backgrounds or who have different lived experiences. This can promote diversity, equity, and inclusion by breaking down stereotypes and biases, and helping youth learn to appreciate and celebrate differences in others.

Overall, ISW provides a safe and supportive environment for adolescents from diverse backgrounds to work through mental health challenges, address systemic barriers, and develop skills to navigate a complex world. These services are provided regardless of a student's ability to pay, ensuring equal access to necessary services.
ISW STUDENT AND STAFF IMPACT STATEMENTS

During the end-of-year review, qualitative data was collected regarding the direct impact experienced by staff and students in the ISW program. A few statements highlighted for feedback have been identified below:

- “The ISW project allowed us to finally start to have an answer to the mental health needs of our students.”
- “By implementing the mental health project, we could start to serve the whole child.”
- “It is exciting to serve students who otherwise would not have been noticed.”
- “ISW allowed students to make connections to staff in school they might not have previously been aware of.”

Direct feedback from students regarding ISW:

- “It’s about time the school starts to look at mental health and take it seriously.”
- “Mental health is really bad right now, and I am glad that WVHS is beginning to talk about it.”
- “Because of ISW, I was able to get the help I needed, and I don’t feel like hurting myself anymore.”

The feedback from staff and students speaks directly to the importance of ISW in the lives of the youth. Programs like ISW help to remove stigma surrounding behavioral health and touches at the very heart of the youth mental health crisis in our state and provides a direct approach to addressing this need. ISW is pioneering what it means to provide quality services that are youth centered, while providing preventative and protective factors all while minimizing barriers to accessing care.
COMMUNITY RECOGNITION OF ISW

Recognizing the transformative and innovative impact the ISW program has on integrated care within educational settings and the long-term benefits on the health and wellbeing of youth and families in the community, Spokane County CSD saw prudent to share this program with the National Association of Counties (NACo). This took the form of an application for a NACo achievement award for formal recognition of ISW in the role of improving the health and wellness of youth in Spokane County. NACo serves roughly 40,000 elected officials and 3.6 million county employees with goal of advocacy in county priorities, to promote exemplary county policies and practices, nurture leadership skills, optimize county and taxpayer resources, and enrich the public’s understanding of county government (https://www.naco.org/about/about-naco).

We were pleased to be notified that ISW won a 2023 NACo achievement award in the specific area of Children and Youth and receive subsequent recognition from the Spokane County Board of County Commissioners (BoCC) for the work in the community. Receiving this award on a national level further identifies ISW as a program that is leading the way in addressing youth behavioral health.

MOVING FORWARD AND FUTURE EXPANSION

As demonstrated in our findings, the data and feedback from the schools and program stakeholders identified in the first year of ISW implementation showed significant achievement in the target areas the program sought to achieve, and ultimately proved more successful than anticipated. Using lessons learned and the successes of this year as a springboard, we plan on continuing our efforts through further expansion into new school districts, and expanding our partnerships with community resources to support the ongoing needs of youth in Spokane County. The ISW Program provides access to individualized behavioral health services and promotes equitable health access and whole body wellness as well as amplifies supports and goals identified by students, and reduces stigma often associated with mental health and substance use. The SB-SBIRT model unique to the Spokane ISW allows for implementation within schools that meet the needs of the student population, provides education and awareness of behavioral health, and by screening entire grade levels of students helps to normalize behavioral health as a crucial aspect of well-being.

Looking ahead to the fall of 2023, ISW is positioned to be fully implemented in three (3) new school districts, totaling eight (8) schools overall, with a projected goal of over 1,000 students screened between all project sites. Given the clear success of ISW and the information received from school staff and students, ISW will be a driving force in setting the standards in our community and state in providing youth behavioral health services and creating a healthier and safer community.

ACKNOWLEDGEMENTS

ISW’s success would not be possible without the immense support and dedication to the program by our contracted behavioral health providers, schools, executive leadership at Spokane County, and ultimately the Spokane County Board of County Commissioners for support and commitment in funding the project. Their commitment to ensuring vital behavioral health services to the county’s most vulnerable residents makes our communities more vibrant and and healthier place for future generations. ISW truly exemplifies the mission of Spokane County CSD by empowering Individuals experiencing mental illness and/or substance use challenges to achieve success in their recovery journey, through the provision of high quality and a culturally responsive array of services dedicated to empowering Individuals and their families to achieve safer, healthier, and more independent lives.