

Telemental Health in Schools

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Through a partnership with the Department of Social Services (DSS), schools have the opportunity to support students in receiving mental health services at no charge to the school. This partnership provides schools with additional support in helping students and their families access available mental health services through the publicly funded behavioral health system, as well as an understanding of when/how to refer students for mental health services. These services are available through any of the 11 [Community Mental Health Centers](#) (CMHC) located throughout the state. This ongoing opportunity can help districts develop collaborative relationships with their local CMHC to develop screening processes to identify students in need, establish referral pathways for students, and develop and implement telemental health services in schools to increase access to needed services when in-person services aren't available, or for those situations when telehealth services are a better fit.

Below is key information school leaders may need to determine whether to access these services. For more information, contact [Andrea Effling](#) at the DOE.

What roles does each entity play?

- DSS:
 - Conduit with the community mental health center (CMHC) in each region
 - Provides payment to the CMHC for services rendered in a school
 - Provides necessary technology/equipment to the school when necessary to facilitate telehealth services
 - Supports schools and CMHCs to develop a process for identifying and referring students with mental health needs
- DOE:
 - Liaison for schools with other entities and resource for best practices in the school setting
- Community Mental Health Centers:
 - Provide direct services to youth in schools
 - Bill DSS directly for services provided
 - Helps schools understand basic requirements of providing clinical mental health services
- School Districts:
 - Designate a school staff member experienced in matters of confidentiality to serve as the primary point of contact, or “champion,” in the school for the provision of clinical mental health services
 - Set aside a private meeting space for students to access telemental health services
 - For districts currently implementing the tiered structure of a Positive Behavioral Interventions and Support (PBIS) system, integrate a written referral procedure into your current PBIS team decision-making process to assess if telemental health supports are needed for a student. The process should include criteria necessary to

determine which students would benefit from this Tier 2/3 mental health supports, and all school staff should be made aware of how to refer a student.

- For districts not currently using a tiered system, develop a written procedure for identifying students in need of telemental health supports, and determine who will be responsible for reviewing the referrals. The process should include criteria necessary to determine which students would benefit from mental health supports, and all school staff should be made aware of how to refer a student.
- Schools are not required to use a formal screening process to make the determination on who is in need of telemental health services. Some examples of criteria a school may want to use include, but are not limited to:

Recent trauma

Past trauma

Anxiety

Disruptive behavior

Increase in office discipline referrals

Changes in mood

Changes in academic performance

Changes in engagement with peers and staff

Increase in visits to the nurse's office

Is this a new initiative in South Dakota?

Launching telemental health statewide is a new initiative for the DOE and DSS. For the past several years, several similar grant opportunities have been available to numerous schools to access telemental health services through similar processes which are now available to all districts. This includes schools that were part of the Project AWARE grant (such as Bridgewater-Emery and Wagner School District) and schools within the 21 counties impacted by natural disasters in 2019. In addition, schools that fall within Mellette, Todd, Tripp, Gregory, Charles Mix, Douglas, Hutchinson, Bon Homme, Yankton, Clay and Union counties also have had access through a grant held by Lewis and Clark Behavioral Health and Southern Plains Behavioral Health Services.

Why is this program available now?

The successful implementation of the projects referenced above, and the benefits of supporting youth and families in access to mental health services, indicate that this program could serve to fill a significant need throughout the state.

Do I need to sign up now?

No. DOE and DSS expect funding to be available to support this program long-term. However, this is a program that can be beneficial now in meeting the needs of a district's student population. It can also be useful as districts contemplate strategies to address the social emotional needs of their students.

When identifying my school's point of contact, what qualifications should I be looking for?

Note that access to clinical mental health services (at the Tier 2 or Tier 3 levels) in a school setting requires that the adult overseeing the identification process and provision of services be well-versed in maintaining student health information confidentiality. The school POC will also be asked to serve as the liaison with the CMHC in the school's region to schedule student appointments.

How much extra time will this require of my staff?

The answer will depend on a number of considerations. Tasks the school will need to take into account include: completing screening consent forms, conducting screenings, processing screenings, completing any paperwork required by the CMHC and the district per policy, communication with parents, making a referral to the CMHC, the initial set up of equipment, and scheduling of appointments. The DOE can connect interested schools with those already implementing telemental health for a perspective from peers.

What type of informed parental consent do I need to have in place to participate?

Schools should be familiar with the requirements of [13-3-51.2](#), and specifically subsection (2) and (4). If a school has questions about what requirements for parental consent are necessary, schools should consult with their school attorney.

What liability does my district face in either the screening process for mental health needs, or the provision of services in a school setting?

Any questions around liability should be directed to the school’s attorney.

What other considerations should schools keep in mind when contemplating using telemental health?

Schools may find the questions below useful when considering if telemental health is a good option for their school and its implementation.

- What kind of overall parental, community, school, and staff acceptance with the use of telemental health would be beneficial? What types of communication and outreach will be needed?
- How will HIPPA be upheld in the school setting? How will FERPA be supported with the provider? What other legal considerations are necessary?
- What mental health services will be provided by the virtual delivery? (examples: treatment for depression, eating disorder, anxiety disorders, attention deficit hyperactivity disorder, conduct disorder, substance abuse)

If this is not the right opportunity for my district at this time, are there other options to add services, either school-based or community-based, mental health services for our school community?

Yes. Reach out to [Andrea Effling](#) with the DOE’s Office of Student Wellness and Supports to be connected with other options; schools can also refer to the DOE’s [mental health webpage](#).