

>> Thank you for tuning into Healthy Minds Podcast. We host conversations with people who are really good listeners and we ask them to share with us. I'm Lucy Caldwell

and I work for the Fairfax County public schools.

Joining me today, I am excited to welcome.

Jim Gillespie. He's the youth and family services director for Healthy Minds Fairfax, which is a part of the Fairfax/Falls Church community services board in Fairfax County.

Mister Gillespie leads a talented

dedicated staff in striving to ensure that children, adolescents and their families have access to high quality integrated behavior health services and supports.

Since 2015, he's led Healthy Minds Fairfax in coordinating a full range of services across multiple County agencies

the school system

and private treatment providers to help children youth and families access mental health and substance use services in to improve the quality of the services.

He continues in that role.

In addition to his new responsibilities that will be talking about.

Mister Gillespie is a licensed clinical social worker with an M S W from Virginia Commonwealth University and an MBA from George Mason.

So hi Jim. thanks for being here.

Thank you for the opportunity it is great to join you and great to join this effort with Fairfax County public schools, absolutely healthy minds.

Fairfax, we named the podcast after you guys

you know having worked for the csp I was fortunate enough to work closely with you and helping to develop the website helping to develop the communications what parents need to know.

And while I'm not a little bit about healthy minds.

Fairfax,

maybe the audience doesn't tell us about what it is what it does and why it matters healthy minds.

Fairfax is a partnership between County government the community services board.

>> Fairfax County public schools are private providers, our families and our family organizations and our cities.

It has really has 2 goals you to

help families access mental health services for their students and help improve the quality of those start services across our entire community.

>> Well, how do people know to get a hold of healthy minds, Fairfax and what would make them know about it are there people referring to them or how did they know.

>> The best thing to do is Google healthy minds, Fairfax and you will come to our website, it is a Fairfax County website and it's designed to be a navigation tool for parents and for others who are looking for services for kids and families.

So on that website, you will learn about services provided by the community services board which is our public mental Health Center services provided by Fairfax County public schools

are private nonprofit agencies.

George Mason University and other educational institutions that actually provide mental health services for kids so it's a one-stop shop for residents of Fairfax County or the cities of Fairfax

and falls Church

to learn about all of the mental health and substance use
the service is available for their children and their families here in our
community.

>> It's really important.

The doctors and pediatricians and it says the greater community know about healthy
minds.

Fairfax, you noticed or had input about that.

>> I believe that the word is getting out we work very closely
with the pediatric community, particularly
the the

American Academy of Pediatrics, the Virginia branch we partner with them in an image
an initiative called Virginia mental health access program where we're training
pediatricians

on mental health services, how to be good providers of mental Health services, how
to be good referring for first to services
how to be really educated about that.

And as a matter of fact this fall through that

that Virginia mental health initiative, I Nova Keller center will be having a
mental health professional and a case manager that pediatricians offices can call in
to and learn about mental health resources in the community.

So it's a great partnership and our pediatricians and other and our other pediatric
primary care providers are just essential
because

there's still a stigma about mental health services and for many families
they're more comfortable initially talking with their physician their pediatrician
about the issues that their child is having than initially going to a mental health
provider.

So we're very pleased that our pediatricians have stepped to the plate over a 150 of
them have gotten intensive mental health training.

That's really good.

>> I wonder

how was healthy minds, Fairfax born what was the cause that somebody with in Fairfax
County either the government or private sector pediatricians
what was the tipping point where people recognize that we we need to do something
here.

>> Back in the early 2000 teens, there was a tragic spike in youth suicides here in
the Fairfax area.

And

the Board of Supervisors to school board recognized that they needed to respond
strongly and that some of the traditional ways of responding just we're not going to
work

we needed up the community partnership

we really needed to address this at the grassroots level and that's how healthy
months.

Fairfax was born it was never designed to be a stand-alone County program simply
providing a certain set of services,

it's designed to be a partnership

between the school system the county providers families everybody who cares about
kids in our family.

So that we can all do to do something different all do some things better to improve how we respond kids and families.

>> What about the monetary issue are there fees for this or or how does that all work sure.

>> Healthy minds.

Fairfax does provide some direct services for the most part we're bringing together the great services being provided by our community services board in our school system and others but we do have some direct services and I want to talk about 2 in particular.

One is called short term behavioral health services

and it is a short 6 to 8 session outpatient therapy intervention.

And it's for students with emerging mental health issues such as depression and anxiety

who are having trouble accessing services through their insurance or through other means.

And there's no cost of that service is provided by private therapist's under contract with the county and school,

social workers and psychologists are the primary referral sources.

There is an income limit, but it is not its 400% of poverty which for a family of 4 is about a \$100,000.

So

there are many many families in our community

who can qualify and and so that's a no cost direct service providing mental health through

treatment directly to children has that killing him need.

Students in

kids are taking advantage of that and sort of what's the age range.

It's going very well for each year between 20250 students participate and services they typically typically get

5 to 7 sessions.

And we do a pre test in a post post some through

see how they're doing and

their depression improves during society improves they function better in school and the community and we're very pleased with that

and we really hope to expand

that yeah during this current year were able to expand to 3 more high schools and the middle schools that feed them

primarily we are serving students in high school student in most middle schools.

We're in just a few elementary school so far we're concentrating first on the on the older teen the teens

and then we're gradually moving our way into the elementary schools.

>> What I really like about what you just talked about was that treatment works people do get better, he's or kids.

They recognize there's an issue

they tackle it with the help of a professional and they get better absolutely.

>> And in short term behavioral health we require that our therapists who participate.

We have

got an evidence-based training in a method called
called cognitive behavioral therapy,
that is a research proven method to read to address mental health issues such as
depression and anxiety.

And that's why in 5 to 7 sessions or perhaps up to 9 or 10 sessions an we can see
significant improvement with those students.

Many of them that's all the treatment they need.

For the students with the deeper issues that the trauma
caused issues the more serious mental health problems.

We use those those initial sessions to stabilize them.

Do we reduce the risk factors and then the work with their parents to transition
them to longer term mental health services, sometimes with the community services
board and sometimes privately.

>> That sounds like it's going really well.

>> It is and another service that we're very excited about is a peer support
service.

Tell us about that, it's called family peer support partners
and

family peer support partners are

parents of older teens or young adults who have had mental health issues and these
parents feel like

they're beyond their at the point where their own children are now stabilized and
doing much better and they want to give back and hip and help other parents soon.

So they receive special training and professional supervision

and they're matched with parents of children and youth with mental health issues and
they can provide education support.

Advocacy guidance.

They can just be a

supportive presence green who has some idea of what that parent is going through.

>> Sometimes you don't feel like talking to your friends about it or you feel like
your friends, your spouse might be tired of hearing about it.

So these are sort of people who can just listen and offer their experience

how's that going are you having to recruit people or you want to cure it now in
here.

>> We are we are recruiting at all times, okay and our current provider is nami
northern Virginia, okay, and they're always looking for potential family pier.

Support partners and they're always looking for families who like to get that
service and you just contact nami northern Virginia directly

however I do have to say that after several years of being our provider

nami has decided to step back from that home

and we're in the process of selecting a new agency and we will know that agency's
name within the next very few weeks.

But I can tell you that nami has pledged to have a very seamless transition.

We anticipate that many of nami staff will work for the new provider

and that parent peer support partner services will continue without a hitch through
the fall.

>> What is the role that nami played exactly.

>> Nami took on the role of implementing these services from scratch about 6 years
ago when we received a federal grant to be able to implement the services

so they hired the initial group of family here supports our

partners and just help get us get off the ground from scratch. There is no cost for this service, there is no income level for the service. Any parent or caregiver of a child youth or even a young adult up until age, 22 can get this service for free.

Not only is it a great service in and of itself.

But the peer support partners are very knowledgeable about all of the other services in the community so they can help connect families to respite care and other kinds of services and supports that are available to them support groups

that are offered by nami the community services board and other agencies so it is a great service and there's no cost to it and we encourage any family to look into that.

>> It sounds like that would be a a good place to market and recruit for that would be physicians offices

and making sure that pediatricians know

about this service and then it's probably something you guys have thought of.

>> We definitely have thought of that once a year I Nova sponsors a pediatrician's conference

and I don't know what it'll be like this year writing previous years, it's been an in person conference

and we have had a table at that conference and the pediatricians are very interested they we put a packet of information together about

peer support partners, community services board services there's a

the school system Fairfax County public schools has a table there.

One thing about pediatricians they are very motivated to help kids absolutely you give them material, it's going back to the office and it's going to be used so they're very very interested in this.

>> Well, what are some of the trends you all are seen not only with the services you provide, but also in the community.

>> One worrisome trend is that the

annual youth survey that's done through Fairfax County public schools.

The results just came out for that

and it's found that over the last

4 years or so

there's been a steady increase in the number of students

who are reporting having fairly serious depressive symptoms.

I it's not a huge jump right's basically students answer a question to the effect of

have they had

feelings of hopelessness and helplessness so serious enough

to that has impacted their home life for their school life some time in the last year.

The percentage of students who have answered that has steadily gone up and

I don't have that survey in front of me but I believe it's just a little over 30% of all some of all high school and middle aged students now

and that's concerning it's so it's lower than the national average

which is about 38% if you can believe that but the fact that almost a thing

3rd of our students have experienced serious depressive symptoms in the last year.

Means it just emphasizes how important mental health services are and Prevention services.

>> Absolutely in the tools that you talk about such as cognitive behavioral therapy for parents to be aware of them to know some of the specifics about them so really that's what we're trying to do with this podcast and I know with your programs that it's really about sharing the word to parents into other caring adults so they know what's available. And they also say they know how to recognize the signs and symptoms of some of these concerns what in along those lines that you hear from parents who get involved with healthy minds. Fairfax they come to you and what do they say to you. The

>> when wet weather it's approaching healthy months, Fairfax or parents who come to the community services board. Initially they're confused. Yeah, worried, and confused, worried because their child is exhibiting. On an unusual behavior. Their mood is much different they're not sleeping nearly as much as they used to or maybe they're sleeping a lot more on something very different is going on in and that thing in your gut as a parent is telling you that something is wrong. Because we don't know as most parents we don't know a lot about mental health issues we're not sure what's wrong. We don't know how serious it is so that initial reaction is often worry and confusion and a great desire to talk to somebody. It's it's a little different sometimes than a physical medical it issue where your first desire is usually have someone examine my child right good out of treatment. But first they want to talk with someone and luckily, there are many resources in our community we're appear it can have an initial conversation with a mental health professional and help steer the course for what the next steps for their child should be. It's really good to know.

>> With schools being closed of course there are fewer teachers who are seeing their students face to face. We are trying to reopen slowly and safely in have more in person programming. For the past couple months, I'm sure it's been tough to sort of for a teacher to gauge the mental health of a student. Have you seen a difference in your work.

>> We certainly have the number of referrals to the community services board for mental health services for for kids

has gone down dramatically and we're just so used to as you mention, school teachers, the school counselors. Having a lot of interaction with students even when they are worried about that student talking with the parents and arranging referral either either to the community services board or to a private mental health provider. And without that day-to-day interaction that those have gone down the other the other thing is most issues with kids that result in them getting into mental health services come from 3 school related things. Problems with school attendance. Problems with school behavior or problems with school performance or problems with grades, yeah and online learning has changed all of that so so those red lights, those warning signals that a child is having a mental health issue are not taken place in the same way that they usually do and so I think we're getting delayed identification of those issues true for example. Many children with serious anxiety disorders or depressive disorders exhibit that fire reluctance to go to school and difficulty goal of getting up and going to school because of those that have that serious depression or anxiety. Well, if you don't have to leave your house to go to school. It's going to take longer. For a parent door for a mental health professional to identify that your child is highly anxious were very depressed it because the there are their obligation to perform to go to school is not there in the same way.

>> Right right. Another thing that you mentioned was Tele health because now that everybody's virtual for the most part. Telehealth is something that people might not know about they might not they might be suspicious about it because it's something different House Tele health going and how does it work.

>> Back in March when covid hit in the community services board. 100% of our therapy services were being provided face to face within less than for weeks. All of our therapy services were being provided remotely through telehealth well we have a special application called zoom for health which is different from the regular zoom that you can get for free. It's a it's an enhanced product that's completely confidential completely private has fire walls and using zoom for health. We we are doing therapy with students and their families

using either laptops or desktops or ipads or or smartphones it's working out very well.

We've surveyed our clinicians and over 80% of the kids that we're serving are benefiting very well from telehealth so really it's been a tremendous benefit.

And now we are

back in the office providing some in office services in person services for that 20% of youth who are not benefiting so we know we are going back safely with all the appropriate precautions.

The dew face to face their a P

but telehealth is going to remain are very important resource for a lot of families for example transportation is a huge issue was a barrier to care.

If you have to take a bus or other public transportation.

It can take you longer to get to the therapy session, the NIT that it does to participate in it.

And now you can have that therapy session with no transportation.

Another real advantage is that here in northern Virginia.

A lot of private

therapist's

Dr.

Not in network with commercial insurance or Medicaid.

And it can be very difficult to provide a therapist who will take your insurance for the first time we're starting to reach out to private therapists who are not based in northern Virginia, but our license to practice in Virginia, and facilitating families

connecting with them

to get their therapy services through telehealth wow and so now that's going to rely lawn

Medicaid in the private insurers continuing to accept telehealth

has a look as a legitimate way of providing the service because that was not permitted prior to covid

but our record has been so good in terms of the effectiveness of telehealth that we really believe that they will continue that

and that will open up resources for families that they didn't have before.

>> Absolutely it sounds like it.

And you know,

everybody's getting used to being online

for every kind of service pretty much so why wouldn't mental health services as well,

even not having physical.

>> Yeah we many of us if not most of us about the experience now

of having an appointment with a doctor online

and we know there are limitations to that

and in our mental health system we have set that up to that

our emergency services for example, or in person.

You can bring yourself or your child to the Mary field Center at any time of the day or night in an emergency and you will be seen face to face by a therapist

by a doctor and so we still have the face to face services between and we have the ability to use them as telehealth isn't working.

It is so such a an important tool now for us to be able to use

to reach out to a lot of kids and families that we're having trouble accessing services before.

>> It's really good news in this is a time we need some good news.

What before I let you go just a couple of stories a couple success stories student come to mind where

people have sought to treatment they've gotten help and they're doing OK or about parent, his got involved.

They have anything you'd like to share so people can sort of you know a lot of the language you're using

is sort of hard for people to understand

if you haven't had a child maybe

you know we talk we use language but what we're really trying to

illustrated somebody maybe a student or a young person who smokes pot.

Every day all day that you might have a name for that,

but so I want to hear a success story if you have any that come to mind

that will illustrate the good healthy minds, Fairfax and what the funding is really going to to help people.

>> Sure I'm going to give you one kind of on

opposite ends of the spectrum, okay up

one of the healthy months, Fairfax programs is called the Children's Services act that through the Children's Services act.

The county is able to help families access route very intensive treatment services for when their children have

very

complex needs very high-risk needs

and they can access some services and insurance and other sources we don't fund and not long ago.

Csb director Daryl Washington got a letter

from a family that had gotten

both csb and CSA services

and the gist of that letter was

that their daughter had been in and out of psychiatric hospitals, several times within very few months could not stabilize safely in the community but

through

this the CS the community services boards

high fidelity wraparound services which is supported by the Children's Services act.

They were able to put together a very individualized plan very customize planned for this girl and her family that involve not only

traditional treatment services,

but also support services

involving her and recreational activities

on a contact connecting her with extended family and

this very customer service plan was written was able as a result she was able to stabilize

and for many many months had not been in the hospital and was safe and

then on the other things.

Yeah it was great news for a girl that a family

was

almost gave up hope on right on the other end of the spectrum in short term behavioral health services.

We contract with the a small company that.
Family satisfaction surveys for the families that have participated in the reason we do that is that many of the families who get that service, primarily speak Spanish at home.
And and so
that company will reach out to them in their own language and administer that the satisfaction survey
and
it's been very gratifying in that the therapist to participate they rate the improvement
of of the of the child from their perspective
and they usually
find that about 70% of the children that they treat they think of had significant improvement.
When we
when we survey the families, however, that number goes up to over 90% and the comments again and again are
you listen to my family you care about my family you care about my daughter.
You have you helped us she's happy now she's no longer said she doesn't cry at night and they had
just in very plain spoken, straightforward terms saying.
So you reached out you helped us in our time of need or son or daughter is is doing better now I and
they don't expect them to be doing perfectly right but they see the results of that intervention even more positively than the therapist to provide the intervention do it's really really good news.
>> That's why I wanted you to come here today because I felt other people need to know about healthy minds.
Fairfax about the services
that Fairfax County is providing in conjunction with fcps
but what you said really does
remind me of what our superintendent often says every child by name and by need and I feel like healthy minds for actually goes a long way for that thank you so much Jim Gillespie for joining healthy minds.
Podcast today and I hope that all the listeners
have learned something in please don't hesitate
to look up healthy minds, Fairfax and learn more about the program.
You can reach out to Jim Gillespie or anybody at your school weather.
No matter what grade your child may be in
please reach out because our therapists are there.
We have psychologist at every school social workers,
they're there to help and they can connect you with healthy minds, Fairfax and some of the short-term behavior health programs.
Do you have a topic, you'd like healthy minds podcast to explore.
>> Please let us know send your suggestions to help the mines.