

# School Counseling, Physical and Behavioral Health Services

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**School Health Programs are the only way to provide an equitable base of opportunity for our children, given that schools are the only place that all children are at ... (School health programs) provide an easy way for children to access services that can meet their physical and mental health needs...**

— *Joy Baker*  
*Elementary School Counselor*  
*Searsport, Maine*



**Forty-six percent of Maine high school students have had sexual intercourse. About thirty-eight percent reported that they rarely get help when they feel sad, empty, hopeless, angry, or anxious. Nine percent attempted suicide.**

— *Maine Youth Risk Behavior Survey, 2001*

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## DEFINITION

This component combines school counseling and guidance services, physical health services, and behavioral health services. Services can be provided on a school site by either school staff or community providers, or can be provided by linking with community health organizations. The component may include case management for students with multiple needs or ongoing needs, which allows for the coordination and integration of services through one provider.

School counseling services assist students with their academic, career, and personal/social development so that they can achieve school success. Grade K - 12 school counseling services help students meet these needs by providing a preventive, developmentally appropriate guidance curriculum for all students; short-term individual and small-group counseling in response to students' difficulties with typical developmental issues (such as puberty, adjustment to new school, etc.); consultation with teachers, immediate family members and other caregivers, and other helping professionals regarding appropriate and consistent interventions for students; and assessment of school climate and other school-based issues that require systemic responses.

Behavioral health services are offered in response to a broad range of needs including, but not limited to, mental health issues, mental disorders and their implications, mental retardation, developmental disabilities, and substance abuse and dependence. These services encompass prevention, treatment and crisis intervention, and include intensive support groups and individual counseling, family counseling and referrals.

Physical health services in schools include school nursing, school physician services, oral health services, and school-based health centers. School nurses provide direct nursing care and supervise and/or coordinate health services. School physicians advise the school administrative unit on school health issues, policies and practices. School-based health centers provide on-site preventive care, management of chronic illness in collaboration with the student's primary care provider, diagnosis and treatment of acute injuries and illnesses, and initial emergency treatment of injuries and illnesses with appropriate subsequent referral. Oral health services offer dental screening and sealant programs; referrals are made for dental treatment services.

School-based health centers may also offer behavioral health services. Other health specialists, such as athletic trainers, occupational, physical and recreational therapists, and speech/language pathologists, may provide services to students at the school in coordination with other school health staff.

## RATIONALE

Health problems and health risk factors are increasingly issues that interfere with the mission of schools. Health services support students' academic performance by reducing multiple barriers to health care and learning, and by helping all students to live healthier lives. Students whose health needs are met holistically by a multidisciplinary team of school-based and school-linked

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professionals can better focus on achieving school success. For some students, a single provider who coordinates and integrates services can increase access to the variety of services needed.

**School Counseling** – All students need specific skills and learning opportunities delivered in a proactive and preventive manner to ensure that they can achieve the *State of Maine Learning Results* standards. School counselors recognize that social/emotional health is fundamental to academic success and career aspirations. As an integral part of the school staff, school counselors can play a significant role in identifying critical issues and individual circumstances that require the attention of an interdisciplinary intervention team.

**Behavioral Health Services** – Students have social, personal, developmental, and mental health needs that must be addressed to ensure that they can be effective learners. Addressing emerging behavioral health needs early, and promoting mental health with prevention-oriented supports, are first steps to meeting these needs. School-based and school-linked behavioral health services also allow the behavioral health-care needs of our youth and children to be met in the least restrictive service environment suitable for each individual, in a timely fashion and in the most cost-effective manner. Students with mental disorders may need support services in the school environment.

**Physical Health Services** – Students have emerging and emergent health care needs, chronic disease management needs, and concerns about safety and health risks. School nurses address these needs by facilitating positive growth and development; promoting health and safety; developing health care plans; intervening with actual and potential health problems; providing case management services; and actively collaborating with families, physicians, administrators and staff to improve student health. Schools are required by law to maintain health records and provide health screenings that are coordinated by school nurses. Schools must have clear medical policies and procedures to meet the health care needs of all students and to respond to medical emergencies. Oral health screenings and sealants provide preventive services to reduce the incidence of dental caries. School-based health centers enhance these services by addressing the immediate primary health care needs without removing students from the school.

## GUIDELINES:

1. Establish and integrate school counseling, physical and behavioral health services as part of the school's mission of promoting student's personal growth – cognitive, emotional, social and physical.
2. Establish written policies to govern school counseling, physical and behavioral health services.
3. Base school counseling, physical and behavioral health services on an ongoing local assessment of needs and on the presence or absence of resources necessary to meet those needs.
4. Provide school counseling, physical and behavioral health services that balance prevention and intervention services for all major risk behaviors that pose immediate threats to health and safety, and those that have long-term consequences.

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5. Develop and implement a quality improvement plan to monitor and evaluate school counseling, physical and behavioral health services.
6. Ensure that school counseling, physical and behavioral health services are provided by qualified, certified, credentialed providers, in a manner that is consistent with professional standards and best practices.
7. Ensure that the school has an adequate number of providers of school counseling, physical and behavioral health services, and provides appropriate workspace for the services delivered.
8. Provide equitable, appropriate, and timely access to school counseling, physical and behavioral health services for all students.
9. Involve students, families or other caregivers, school personnel and community service providers in coordinating and collaborating with school counseling, physical and behavioral health services.
10. Inform all students, families, staff and community members about the array of school counseling, physical and behavioral health services available, and about how to access them.
11. Involve all students and, when appropriate, family members or caregivers as responsible participants in addressing student needs, and provide services within the context of the student's family, focusing on the student's levels of social, emotional, physical and educational growth and development.
12. Provide school counseling, physical and behavioral health services that are appropriately confidential and culturally, environmentally, and developmentally appropriate for students, their families and other caregivers.

**GUIDELINE 1: Establish and integrate school counseling, physical and behavioral health services as part of the school's mission of promoting student's personal growth – cognitive, emotional, social and physical.**

## **RATIONALE**

Students' growth and development are multi-faceted; therefore, school counseling, physical and behavioral health services must be multi-faceted and integrated to reduce barriers to learning and improve student success.

## **INDICATORS:**

- A. A written mission statement reflects the cognitive, emotional, social and physical aspects of growth and development.
- B. Links between the philosophy of Coordinated School Health Programs and the Guiding Principles of the *State of Maine Learning Results* are identified and emphasized..

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- C. The school offers a staff development program to ensure that all school personnel understand the mission statement, and know how to integrate it into their curriculum planning, implementation and evaluation and how to integrate it with delivery of services.
- D. Responsibility for integration of school counseling, physical and behavioral health services is assigned to a school administrator.
- E. A professional staff member from school counseling, physical and behavioral health services participates on the school system's administrative team.

**GUIDELINE 2: Establish written policies to govern school counseling, physical and behavioral health services.**

## RATIONALE

By establishing written policies and procedures, the school system ensures that school counseling, physical and behavioral health services are provided in a consistent manner and are based on best practices.

## INDICATORS:

- A. All guidelines for school health services are reflected in written policies, with appropriate designated/assigned responsibilities, and are based on best practices and professional standards in the appropriate areas.
- B. School health services operate under written administrative policies and procedures that are updated annually, including personnel policy; policy regarding exchange of information with parents, school personnel and community providers; emergency care; and record-keeping.
- C. Responsibility for periodic review of written policy is assigned to a school administrator.
- D. The school has on file and follows state and federal requirements.
- E. The school has written policies and procedures that include, but are not limited to, the following:
  - 1) Identifying and minimizing barriers to student learning and performance;
  - 2) Assessments, diagnoses and interventions;
  - 3) Personal and financial costs to schools and families for needed services;
  - 4) Guidelines or protocols including possible medical emergencies students may experience in a school setting;
  - 5) A plan for dealing with school/community crises (such as a fire or shooting) that includes comprehensive follow-up;
  - 6) Ongoing collection of data related to demographic and utilization variables, including their nature, scope and duration of program/service involvements, numbers of students involved, their ages and genders, ethnicity, nature of disorders/disabilities, etc.;

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- 7) Medication administration, both at school and on field trips, and related confidentiality and sharing of student information;
  - 8) Legal relationships and obligations in contracts between schools and community providers, and specifies guidelines for school system employees and school-based community providers;
  - 9) Staff development for school counseling, physical and behavioral health services personnel.
- F. Written policies are distributed and explained to all school system personnel as part of their orientation and in-service training.

**GUIDELINE 3: Base school counseling, physical and behavioral health services on an ongoing local assessment of needs and on the presence or absence of resources necessary to meet those needs.**

## RATIONALE

Ongoing individual and systemic assessment of needs and resources provides a sound basis for continuing successful services and for initiating or realigning services to meet identified gaps.

## INDICATORS:

- A. Reliable and valid assessments are conducted to identify the service needs of the student population, with special attention given to procedures that minimize bias and are sensitive to diversity.
- B. Assessments address the needs of the student, not the resources available.
- C. Triennial audits of existing school and community resources and documented alignment with needs are conducted.
- D. All school-based assessment activities are coordinated with those of other agencies involved in assessing student/family strengths and presenting issues.
- E. All students and their families are able to participate in systemic needs assessments, with necessary modifications or alternative assessment strategies as needed.
  - 1) Staff are trained to understand and implement appropriate assessment procedures.
  - 2) Relevant data are gathered regularly during the implementation of appropriate interventions.

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**GUIDELINE 4: Provide school counseling, physical and behavioral health services that balance prevention and intervention services for all major risk behaviors that pose immediate threats to health and safety, and those that have long-term consequences.**

## **RATIONALE**

In conjunction with health education and other components of CSHP, school-based health services minimize the chances that students will engage in a variety of risk behaviors resulting in serious harm. Services also help students to develop healthy behaviors that reduce risks to themselves and others.

## **INDICATORS:**

- A. School counseling, physical and behavioral health service programs are designed, implemented and evaluated on a K-12 continuum.
- B. School counseling, physical and behavioral health services for all students include prevention of the major risk behaviors identified by the Centers for Disease Control and Prevention.
- C. Behaviors that pose immediate threat to self and others receive immediate attention and a significant allocation of resources.
- D. Appropriate crisis response is provided to address incidents that threaten the sense of security at a school or are disruptive to teaching and learning.
- E. Appropriate comprehensive follow-up interventions are provided following crises to meet the needs of those who are experiencing lingering effects.

**GUIDELINE 5: Develop and implement a quality improvement plan to monitor and evaluate school counseling, physical and behavioral health services.**

## **RATIONALE**

Continuous monitoring and evaluation of school counseling, physical and behavioral health services ensures the quality of those services.

## **INDICATORS:**

- A. School and community interventions are monitored, coordinated and appropriately woven together to address student and family needs.

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- B. School improvement plans include both academic and non-academic areas.
- C. The quality plans for school counseling, physical and behavioral health services are readily available for review.
- D. Steps are taken to analyze and use quality assurance data.
- E. Improvements are planned toward more effective program/service coordination and integration.
- F. Appropriate staff development is provided. School personnel incorporate quality improvement strategies into their program planning, implementation and evaluation.

**GUIDELINE 6: Ensure that school counseling, physical and behavioral health services are provided by qualified, certified, credentialed providers, in a manner that is consistent with professional standards and best practices.**

## RATIONALE

Professional credentialing and established qualifications provide assurance that students and their parents or other caregivers receive services from providers with appropriate skills and knowledge. All staff need continuing education and training to remain current with best practices.

## INDICATORS:

- A. A designated professional with appropriate training, experience and expertise oversees the management of school health services.
- B. Only professionals with appropriate experience, who are certified by the Maine Department of Education and who are credentialed in the State of Maine, provide health services.
- C. Professionals who provide school counseling, physical and behavioral health services within a school district have clearly defined roles and responsibilities that are delineated in a written job description.
- D. Service providers have appropriate access to clinical supervision from within their specialty area to ensure that their practice adheres to the highest ethical standards.
- E. Unlicensed and/or uncredentialed school staff assisting school counseling, physical and behavioral health service providers are trained and supervised appropriately for the specific functions assigned to them.
- F. Staff development is provided for school counseling, physical and behavioral health service personnel to increase their knowledge and use of both innovative and research-based practices in prevention, assessment and intervention services.

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**GUIDELINE 7: Ensure that the school has an adequate number of providers of school counseling, physical and behavioral health services, and provides appropriate workspace for the services delivered.**

## RATIONALE

Access to quality services for all students depends on adequate staffing and facilities.

## INDICATORS:

- A. Each school has sufficient staff to address the students' needs for a comprehensive continuum of prevention and intervention services that takes into account program goals, characteristics of the education system, the specific population to be served, the severity of their presenting conditions, and the degree to which the setting is urban or rural.
- B. At a minimum, schools should provide for the following level of services:
  - 1) School counseling services are available in every school for both prevention and intervention programs.
  - 2) Physical health services are available to meet the needs of the student population.
  - 3) School nursing services are available in every school every day.
  - 4) Behavioral health services are available in every school every day, according to the needs of the student population.
  - 5) Each school board has appointed one or more school physicians (Title 20-A, Sec.6402-A).
- C. Appropriate space is assigned in a way that maximizes the match between intervention processes (e.g., individual, group and family counseling) and student/family factors (e.g., the need for privacy, the need to accommodate a highly active youngster).

**GUIDELINE 8: Provide equitable, appropriate, and timely access to school counseling, physical and behavioral health services for all students.**

## RATIONALE

The provision of equitable, timely and appropriate school counseling, physical and behavioral health services for all students decreases the risk of acute and chronic conditions and promotes physical and emotional wellness.

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## INDICATORS:

- A. The school provides short-term, on-site interventions for effectively responding to critical situations.
- B. The school implements a screening program for social, emotional and physical health needs at major transition intervals and for students new to the district.
- C. All positive screening findings are followed up within an appropriate time period.
- D. The school allocates sufficient resources to implement procedures in a timely, appropriate and effective manner.
- E. The school develops effective strategies that address specific barriers, such as language, gender and cultural differences.

**GUIDELINE 9: Involve students, families or other caregivers, school personnel and community service providers in coordinating and collaborating with school counseling, physical and behavioral health services.**

## RATIONALE

Collaborative planning and program coordination allow for the perspectives of different professional disciplines to be included in program planning and management, along with the knowledge and perspectives of students and their families. This promotes more effective and efficient delivery of services, which in turn enhances students' health and their capacity to learn.

## INDICATORS:

- A. The school has established a health advisory council that includes students, family members, other caregivers, school personnel, community representatives and services providers.
- B. In addition to its other responsibilities, the school health advisory council:
  - 1) Assists in determining service priorities.
  - 2) Addresses controversial issues.
  - 3) Participates in quality assurance activities.
- C. An interdisciplinary team meets regularly to discuss and share common issues and assist in coordinating services.
- D. The school has established ongoing case management services to ensure coordination and integration of interventions.
- E. School-based services are coordinated with those of other community agencies and services providers.
- F. The school system delineates legal relationships and obligations in contracts between schools and community providers, specifying roles and responsibilities for both employees and school-based community providers.

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**GUIDELINE 10: Inform all students, families, staff and community members about the array of school counseling, physical and behavioral health services available, and about how to access them.**

## **RATIONALE**

An informed school community is better prepared to advocate for and access appropriate services.

## **INDICATORS:**

- A. The school and/or community compiles information on the number, nature and scope of programs and services available to students and families at the school, in the district, and in the surrounding communities (including a range of resources to minimize the impact of risk factors and enhance protective factors and resiliency).
- B. The school informs all stakeholders about available programs and services and how to access them, using multiple means of communication and the range of languages represented in the community.
- C. The school has an established step-by-step process that facilitates enrollment and overcomes barriers to student and family follow-through in enrolling in recommended interventions.
- D. Public information is annually reviewed for accuracy and thoroughness.

**GUIDELINE 11: Involve all students and, when appropriate, family members or caregivers as responsible participants in addressing student needs, and provide services within the context of the student's family, focusing on the student's levels of social, emotional, physical and educational growth and development.**

## **RATIONALE**

Student- and family-focused interventions allow for participatory problem-solving. This enhances the quality of service planning, delivery and support.

## **INDICATORS:**

- A. Services involve students as responsible participants in their health care.
- B. Service providers encourage participation of families or other caregivers as appropriate.

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- C. Service providers ensure that informed consent is obtained from families and/or students for all assessments and interventions, as appropriate and in compliance with state and federal law.
- D. Interventions are developed to meet individual student and family needs by using the least restrictive and least disruptive interventions in the most appropriate environments.
- E. The school provides opportunities for all students to engage in positive roles, at school and in the community, as part of their service, recreational and enrichment experiences.
- F. Trainings are conducted to help parents and families develop skills, such as communication, that support the healthy development of their children.

**GUIDELINE 12: Provide school counseling, physical and behavioral health services that are appropriately confidential and culturally, environmentally, and developmentally appropriate for students, their families and other caregivers.**

## RATIONALE

Students benefit most from services when they meet their cultural, environmental and developmental needs. Appropriate sharing of relevant student information can enhance the ability of school personnel to address the student's needs. However, students and their parents or legal guardians have legal and ethical rights to have some information kept confidential.

## INDICATORS:

- A. The school system's policies adhere to state and federal laws and regulations of all professional standards.
- B. Policies and procedures address ethical and legal concerns, including consumer decision-making, informed consent, privacy, mandated reporting and information sharing.
- C. The school personalizes interventions to adapt to relevant individual, cultural, environmental and developmental differences.
- D. School staff are provided general education on the health needs of students, and specific information on the functional needs of an individual student when that information is needed to improve that student's academic performance or health.

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## MAINE RESOURCES AND CONTACTS

<b>School Nursing</b>	DeEtte Hall Department of Education Tel: 624-6688 Fax: 624-6691 E-Mail: <a href="mailto:deette.hall@state.me.us">deette.hall@state.me.us</a>
<b>Special Education State Ward/Residential</b>	Christine Bartlett Department of Education Tel: 624-6650 Fax: 624-6651 E-Mail: <a href="mailto:christine.bartlett@state.me.us">christine.bartlett@state.me.us</a>
<b>School-Based Health Centers Adolescent Pregnancy Programs Adolescent Health Family Planning Information</b>	Nancy Birkhimer Department of Human Services Tel: 287-5361 Fax: 287-3993 E-Mail: <a href="mailto:nancy.birkhimer@state.me.us">nancy.birkhimer@state.me.us</a>
<b>Special Education – Federal Programs</b>	John Kierstead Department of Education Tel: 624-6650 Fax: 624-6651 E-Mail: <a href="mailto:john.kierstead@state.me.us">john.kierstead@state.me.us</a>
<b>Children’s Mental Health Services</b>	Ron Taglienti Dept. of Behavioral & Developmental Services Tel: 287-4264 Fax: 287-9915 E-Mail: <a href="mailto:ron.taglienti@state.me.us">ron.taglienti@state.me.us</a>
<b>Oral Health School Oral Health Program School-Based Dental Sealant Programs</b>	Kris Perkins Department of Human Services Tel: 287-3263 Fax: 287-4631 E-Mail: <a href="mailto:kristine.perkins@state.me.us">kristine.perkins@state.me.us</a>
<b>School Counseling Dropout Prevention Homeless Education Alternative Education Truancy</b>	Shelley Reed Department of Education Tel: 624-6637 Fax: 624-6771 E-Mail: <a href="mailto:shelley.reed@state.me.us">shelley.reed@state.me.us</a>
<b>Student Assistance Team</b>	Roger Richards Department of Education Tel: 624-6683 Fax: 624-6651 E-Mail: <a href="mailto:roger.richards@state.me.us">roger.richards@state.me.us</a>
<b>Special Education Student Assistance Team Field Services</b>	Ansley Newton Department of Education

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	Tel: 624-6685 Fax: 624-6651 E-Mail: <a href="mailto:ansley.newton@state.me.us">ansley.newton@state.me.us</a>
<b>STD Treatment &amp; Follow-up HIV Antibody Counseling &amp; Testing</b>	Sally-Lou Patterson Department of Human Services Tel: 287-6448 Fax: 287-6865 E-Mail: <a href="mailto:sallylou.patterson@state.me.us">sallylou.patterson@state.me.us</a>

## NATIONAL RESOURCES

### American Academy of Pediatrics

[www.aap.org](http://www.aap.org) School Health [www.schoolhealth.org](http://www.schoolhealth.org)

### American Medical Association

Adolescent Health On-Line [www.ama-assn.org/adolhlth](http://www.ama-assn.org/adolhlth)

### American Psychiatric Association

1400 K Street, NW, Washington, DC 20005

Phone: (202) 682-6000 Website: [www.psych.org](http://www.psych.org)

### American Psychological Association

750 First Street, NE, Washington, DC 20002

Phone: 1-800-374-2721 Website: [www.apa.org](http://www.apa.org)

### American School Health Association

[www.asgaweb.org](http://www.asgaweb.org)

### Bureau of Primary Health Care

*Healthy Schools, Healthy Communities*

[www.bphc.hrsa.dhhs.gov/hshc/hshcfact.htm](http://www.bphc.hrsa.dhhs.gov/hshc/hshcfact.htm)

### Center for Health and Health Care in Schools

[www.healthinschools.org](http://www.healthinschools.org)

### Center for Mental Health Services

Substance Abuse and Mental Health Services Administration

Parklawn Building, 5600 Fishers Lane, Rockville MD 20857

Phone: (301) 443-7713 Website: [www.samhsa.gov](http://www.samhsa.gov)

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## **Center for School Mental Health Assistance**

University of Maryland, Department of Psychiatry  
680 West Lexington Street, 10<sup>th</sup> floor, Baltimore, MD 21201-1570  
Phone: 888-706-0980

## **Centers for Disease Control and Prevention**

[www.cdc.gov/nccdphp/dash](http://www.cdc.gov/nccdphp/dash)

## **Community Toolbox**

[www.ctb.lsi.ukans.edu](http://www.ctb.lsi.ukans.edu)

## **Education Development Center**

Center for School Health Programs  
55 Chapel Street, Newton, MA 02458-1060  
Phone: (617) 969-7100 Website: [www.edc.org/HealthIsAcademic](http://www.edc.org/HealthIsAcademic)

## **Families USA**

[www.familiesusa.org](http://www.familiesusa.org)

## **Harvard University**

Center for Children's Health [www.hsph.harvard.edu/children/links.htm](http://www.hsph.harvard.edu/children/links.htm)

## **Mental Health in Schools Training and Technical Assistance Center**

Department of Psychology  
University of California at Los Angeles  
Los Angeles, CA 90095-1563 Phone: (310) 825-3634  
Website: [www.smhp.psych.ucla.edu](http://www.smhp.psych.ucla.edu)

## **National Assembly on School-Based Health Care**

666 11<sup>th</sup> Street, NW, Suite 735, Washington, DC 20001  
Phone: (202) 638-5872 Website: [www.nasbhc.org](http://www.nasbhc.org)

## **National Association of School Nurses**

[www.nasn.org](http://www.nasn.org)

## **National Center for Education in Maternal and Child Health**

2000 15<sup>th</sup> Street North Suite 701, Arlington, VA 22201-2671  
Phone: (703) 524-7802 Website: [www.brightfutures.org](http://www.brightfutures.org)

## **National Conference of State Legislators**

[www.ncsl.org/programs/health/pp/schlfund.htm](http://www.ncsl.org/programs/health/pp/schlfund.htm)

## **National Mental Health Association**

1021 Price Street, Alexandria, VA 22314  
Phone: 1-800-969-6642 Website: [www.nmha.org](http://www.nmha.org)

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## **National School Boards Association**

1680 Duke Street, Alexandria, VA 22314

Phone: (703) 838-6722 Website: [www.nsba.org/schoolhealth](http://www.nsba.org/schoolhealth)

## **Research and Training Center on Family Support and Children's Mental Health**

[www rtc.pdx.edu/index.htm](http://www rtc.pdx.edu/index.htm)

## **Robert Wood Johnson Foundation**

[www.rwjf.org](http://www.rwjf.org)

## **Urban Institute**

[www.urban.org](http://www.urban.org)

## **REFERENCES**

National Center for Education in Maternal and Child Health. *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*. Arlington, VA: MCE/MCH.

National Center for Education in Maternal and Child Health. *Bright Futures in Practice: Mental Health and Bright Futures for Families*. Arlington, VA: MCE/MCH.