Behavioral Health 101: Exploring Best Practices for Behavioral Health in Schools

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Healthy Students, Promising Futures Learning Collaborative

Healthy Students, Promising Futures Learning Collaborative was developed by:

• U.S. Department of Education (ED)
• U.S. Department of Health and Human Services (HHS)
• With support from Healthy Schools Campaign (HSC) and Trust for America’s Health (TFAH)
13 Participating States

• California
• Colorado
• District of Columbia
• Massachusetts
• Minnesota
• Mississippi
• New Jersey
• New York

• Ohio
• South Carolina
• Tennessee
• Virginia
• Washington
• And growing....
Learning Collaborative Goals

Increase access to school-based health services through:

• Developing and implementing state vision and strategies to scale up school-based Medicaid services

• Identifying and assessing the options for delivering health services in schools (school nurses, partnerships with providers such as hospitals, health centers, school-based health centers, mobile health, telehealth)

• Addressing barriers and leveraging new opportunities, including through ESSA

• Receiving technical assistance on delivery models, Medicaid reimbursement and policy opportunities from federal policymakers and national and state organizations

• Assessing opportunities for innovative partnerships
Identifying Innovative Strategies

Schools are considering a range of delivery and reimbursement models. Teams are considering:

- Delivery models including school nurses and other SISP, relationships with providers such as hospitals and health centers, school-based centers
- The role and opportunities of managed care
- Identifying innovative models for expanding capacity such as telehealth
- How to serve specific student populations or students with high health care needs that impact learning
Addressing Behavioral Health in Schools

State teams continually identify behavioral health as a need. Concerns include:

• Behavioral health workforce shortages
• Funding for services
• Partnerships with healthcare and community-based organizations
• Assessing unmet needs
MTSS Framework and Colorado Example
Sarah Mathew, Colorado Department of Education
In Colorado, a Multi-Tiered System of Supports (MTSS) is defined as:

a prevention-based framework of team-driven data-based problem solving for improving the outcomes of every student through family, school, and community partnering and a layered continuum of evidence-based practices applied at the classroom, school, district, region, and state level.
1. TEAM-DRIVEN SHARED LEADERSHIP

Teaming structures and expectations distribute responsibility and shared decision-making across school, district, and community members (e.g. students, families, generalists, specialists, district administrators, etc.) to organize coordinated systems of training, coaching, resources, implementation, and evaluation for adult activities.
A consistent process is used by stakeholder teams and applied at multiple levels to analyze and evaluate relevant information to plan and implement strategies that support sustainable improved student and system outcomes.
3. FAMILY, SCHOOL, AND COMMUNITY PARTNERING

The collaboration of families, schools, and communities as active partners in improving learner, classroom, school, district, and state outcomes.
4. LAYERED CONTINUUM OF SUPPORTS

Ensuring that every student receives equitable academic and behavioral support that is culturally responsive, matched to need, and developmentally appropriate, through layers that increase in intensity from universal (every student) to targeted (some students) to intensive (few students).
5. EVIDENCE-BASED PRACTICES

Approaches to instruction, intervention, and assessment that have been proven effective through research indicating improved outcomes for students.
LEADERSHIP FOR CO MTSS

- Shared leadership within CO MTSS exists at all levels (school, district, region, and state).
- For MTSS implementation to be successful, it is critical to establish leadership teams at each level of the system; these teams will ensure effective implementation across all levels of the system (district, school, classroom, and individual student).
- Initially, the team creates a common vision and establishes common language in order to clarify purpose and desired outcomes.
- Through data-based problem solving and decision-making, system support needs are identified, and plans are constructed.
- Leadership teams engage in ongoing review and evaluation of progress data to determine how to best allocate funding and available resources.
School Behavioral Health Services Framework

**Tier 3 FEW**
- Crisis Response
- Re-entry Plan
- Individual/Group Counseling/Therapy

**Tier 2 SOME**
- Progress Monitoring
- Evidence-Based Interventions

**Tier 1 ALL**
- Referral Process
- Behavioral Health Screening
- Social, Emotional Learning Opportunities
- Positive Behavior Supports

**FOUNDATION**
- Family-School-Community Partnerships
- Mental Health Stigma Reduction
- Staff Professional Development
- Positive School Climate and Culture
- Accountability Systems
- Data-Based Decision Making

District and School Teams Drive the Work
Building the infrastructure to support School Mental Health through Medicaid School Health Services, Project AWARE, School Health Professional Grants, Bullying Prevention Programs and School Personnel Development Grant
Since 1997, Colorado statute has supported that Medicaid SHS funds support “the health of all students”
COLORADO MEDICAID SCHOOL HEALTH SERVICES

• This program is a partnership between the CO Department of Healthcare Policy and Finance, and the CO Department of Education, which assists Districts in developing and implementing a Local Service Plan that addresses the health needs of all students.

• As part of the LSP many districts direct funding to mental and behavioral health for all students, including school health professionals, training and program support.

• In 2015-16 $4,186,924 SHS dollars were spent on mental and behavioral health services in Colorado schools (62 FTE)
COLORADO PROJECT AWARE
(funding from SAMHSA)

Aims to build a comprehensive, coordinated and integrated school behavioral health services system that supports every student in Colorado in reaching their fullest potential in school and life.
The Colorado Department of Education collaborates with behavioral health stakeholders across the state to improve mental health awareness and response. In addition to broader, statewide activities, Project AWARE has partnered with three local education agencies (LEAs) to support best practices to inform Colorado schools and communities interested in accomplishing similar goals.

*Aurora Public Schools
*Fountain/Fort Carson Schools
*Thompson School District
CO AWARE COMPONENT 2

In addition to our 3 LEA partners, Project AWARE is implementing YMHFA training across the state. Using this and other evidence-based programs, Project AWARE aims to improve school climate, safety and substance abuse prevention. Through increased collaboration based on a Multi-Tiered System of Supports (MTSS), models will be developed that sustainably fund the provision of high impact school and community-based behavioral and behavioral health services.
COLORADO SCHOOL HEALTH PROFESSIONAL GRANT

- Funding the Marijuana Cash Tax Fund that supports behavioral health including substance use prevention in schools.
- School Health Professional are defined as: CO State Licensed School Psychologists, School Social Workers, School Counselors, and School Nurses.
- School Districts can apply for FTE, Professional Development and Training, resources to develop and implement high quality behavioral health programming including evidence programs that address substance use prevention and universal screening.
- To date, $2.28 million dollars yearly, funding to 66 schools, 44 FTE, and 22 grantees.
- 2017-18 appropriation increase of $9.4 million, (11.98 total) and now open to elementary schools
The purpose of the 2016-2021 CO SPDG project is to develop an integrated Multi-Tiered System of Supports (MTSS) framework in Colorado at the state, regional, district, school, and early childhood level through models of successful implementation that can be scaled up across the state. These models will result in increased implementation of evidence-based practices and improvement in academic and behavioral outcomes for all students in Colorado including those with disabilities.
SCHOOL BULLYING PREVENTION GRANT

The Colorado School Bullying Prevention and Education Grant Program is authorized in statute to provide funding to reduce the frequency of bullying incidents. This includes:

• Implementing evidence-based bullying prevention practices with fidelity;
• Family and community involvement in school bullying prevention strategies; and
• Adopting specific policies concerning bullying education and prevention.

• In 2016-17, 14 districts have been received awards to distribute funds to 73 schools ($2.9 million dollars in state appropriated funds through MJCTF)
COMPREHENSIVE HEALTH EDUCATION STANDARDS

Colorado’s Emotional and Social Wellness Standard (ESW) is located within the Comprehensive Health & Physical Education content area.

• The ESW standard provides a developmental framework regarding social-emotional skills that are expected at each grade level.

The ESW Standard includes mental, emotional, and social health skills that enable a student to:

• recognize and manage emotions
• develop care and concern for others
• establish positive relationships
• make responsible decisions,
• handle challenging situations constructively,
• resolve conflicts respectfully,
• manage stress,
• make ethical and safe choices; examine internal and external influences on mental and social health;
• identify common mental and emotional health problems and their effect on physical health.
COMPREHENSIVE HEALTH EDUCATION STANDARDS

• Prevention and Risk Management, as well as the two other standards under Comprehensive Health & PE, is also highly connected to ESW, articulating healthy relationships and violence and bullying prevention.

• Successful post secondary workforce readiness depends on an array of social and emotional competencies.

• Furthermore, social skills are critical for negotiating life’s challenges and developing satisfying relationships.

• By providing a progression of grade level expectations of the skills necessary for students to engage in healthy and productive relationships, the ESW Standard promotes 21st century learning and workforce readiness.
COLORADO RESOURCES


http://www.coloradoedinitiative.org/resources/schoolbehavioralhealth/

https://www.cde.state.co.us/offices/healthwellnessoffice

California Example
Deanna Niebuhr, Partnership for Children & Youth
School-based Mental Health Systems: Principles for Building
School Mental Health Services are linked with...

- Increase in access
- Improved behavior
- Improved academic performance
Principles to Guide School Mental Health Programs

#1 Ongoing needs assessment and mapping

#2 Youth development & cultural responsiveness

#3 Link with positive school climate

#4 School staff partner w/ community

#5 Coordinate/referred through a site team

#6 Faculty training/consultation
Principle #1

Mental health programs and services are responsive to the needs identified in your school community.
Conducting a Needs Assessment

- Establish a diverse planning team
- Map existing services
- Collect data: attendance, suspension/expulsion, California Healthy Kids Survey, public health data
- Survey the knowledge, attitudes and beliefs of students, families, teachers, administrators, community
Principle #2

Mental health services and programs are planned with youth involvement and provided with cultural humility.
Youth Engagement

- Mental health education
- Youth & family advisory committees
- Wellness ambassadors
- Peer education
- Student Fishbowls

Cultural Responsiveness

- Cultural and language match for direct services
- Translated materials
- Implicit bias training for adults
- Partner with cultural organizations
- Family advisory committee
Principle #3

Mental health services are built from a positive school climate and delivered in a tiered intervention framework.
Mental Health Services by Tier

Tier 3: Intensive
What are we doing for students who are in-risk?

Tier 2: Targeted
What are we doing for students who are at-risk?

Tier 1: Universal
What are we doing for ALL students?
Mental Health Services by Tier

**Tier 3: Intensive**
Clinical groups; Intensive individual mental health services; Multi-system case management; Crisis intervention; Home visits

**Tier 2: Targeted**
Assessment & Referral; Support and empowerment groups; Coordination of services teams; Alternatives to suspension; Mentoring AODA counseling; Short term individual counseling

**Tier 1: Universal**
Schoolwide health education & promotion activities; Teacher PD, consultation, and staff wellness; Youth development activities; Schoolwide social emotional initiatives (RP, Anti-bullying); Schoolwide positive behavior initiatives (PBIS, Single School Culture)
Principle #4

Mental health services are leveraged through strong school staff and community provider partnerships.
School Role

• Set up referral system
• Gather & analyze needs and utilization data
• Coordinate on-site services
• Liaison with community-based services

Community Partner

• Provide direct services to students
• Cover services during school breaks and summer vacations
• Provide additional services to families, e.g. housing, employment, and social resources
Principle #5

Mental health services are coordinated and referred through a school-site team.
Multi-Disciplinary Teams

- Include school and community-based support, health and mental health staff.
- Establish confidentiality and documentation procedures.
- Refer students based on broad criteria.
- Individualized interventions assigned to student, teacher, family, team members.
- Establish follow up processes to ensure interventions worked or to make another plan.
- Carve out time to discuss school-wide issues.
Principle #6

Mental health training and consultation is offered to teachers, administrators, and other school staff.
Competencies for Teachers and other School Staff

- Child/Adolescent development
- Common mental health needs
- Positive classroom management and discipline
- Trauma-informed practices
- Self-care/stress-management
QUESTIONS?
Contact

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- For more information about the Healthy Students, Promising Futures Learning Collaborative, contact Alex Mays (alex@healthyschoolscampaign.org) or Anne DeBiasi (adebiasi@tfah.org)

Healthy Schools Campaign
healthyschoolscampaign.org

Trust for America’s Health
healthyamericans.org