Practical and Sustainable Strategies for Leveraging COVID Relief Funds to Support Student and Staff Mental Health

hosted by the Department of Education and the Department of Health and Human Services

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National Center for School Mental Health
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@NCSMHTweets
National Center for School Mental Health (NCSMH)

• Established in 1995 with funding from the US Department of Health and Human Services (HHS), Health Resources and Services Administration

• The NCSMH mission is to strengthen policies and programs in school mental health to improve learning and promote success for America's youth.

Visit the NCSMH website at www.schoolmentalhealth.org
Commitment

• Racial and social justice lens
• Cultural responsiveness and equity
• Developing and modeling equitable and anti-racist policies and practices
• Learn, heal, grow together
1. Improve quality of care and use of best business practices that promote sustainability among 50 percent SBHCs/CSMHSs
2. Increase number and utilization of SBHCs/CSMHSs by 15 percent
3. Increase state policies and programs that promote quality, sustainability, and growth of SBH services

Funded by the Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau
Program Officer: Savannah Kidd, M.S., MFT
Comprehensive School Mental Health Systems National Quality Initiative CoIIIN States and Entity

Bureau of Indian Education/Indian Health Service
On Today’s Agenda

• Great Need
  • Elevated Rates and Severity of Youth and Staff Mental Health Concerns Related to COVID Impact

• Comprehensive School Mental Health Systems to Help
  • Multi-tiered System of Support for Students, Families and Educators

• Using COVID Relief Funds to Advance School Mental Health
  • Examples from the field
  • Free national resources

• Q&A
“More than 10 months into the pandemic, mental health is a simmering crisis for many of the nation’s schoolchildren, partly hidden by isolation but increasingly evident in the distress of parents, the worries of counselors and an early body of research.”

“Holed up at home, students dwell in the glare of computer screens, missing friends and teachers. Some are failing classes. Some are depressed. Some are part of families reeling with lost jobs, gaps in child care or bills that can’t be paid. Some students care for, or grieve, relatives with covid-19.”
Mental Health Concerns

• Over 1/3 of students experienced poor mental health during pandemic.
  • Higher rates for lesbian, gay, and bisexual students.
  • Higher rates for women and girls.
• 44% of students felt “persistently sad or hopeless” over prior year.

CDC 2021 Adolescent Behavior and Experiences Survey (ABES)
Educator Mental Health and Well-Being

Pre-pandemic
• 2/3 of educators usually feel stressed out (2x more than general population)
• 58% of educators- 7 or more days of poor mental health in past month

Teaching During the Pandemic
• Educators reported working longer hours.
• 1 in 3 teachers indicated the pandemic has made them more likely to leave teaching.
School-Based Mental Health: A National Priority

A Webinar from The Kennedy Forum
Featuring U.S. Secretary of Education Miguel Cardona, Ed.D.

November 12, 2021, 2:00-3:30pm ET

AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health

A declaration from the American Academy of Pediatrics, American Academy of Child and Adolescent Psychiatry and Children's Hospital Association:

As health professionals dedicated to the care of children and adolescents, we have witnessed soaring rates of mental health challenges among children, adolescents, and their families over the course of the COVID-19 pandemic, exacerbating the situation that existed prior to the pandemic. Children and families across our country have experienced enormous adversity and disruption. The inequities that result from structural racism have contributed to disproportionate impacts on children from communities of color.

This worsening crisis in child and adolescent mental health is inextricably tied to the stress brought on by COVID-19 and the ongoing struggle for racial justice and represents an acceleration of trends observed prior to 2020. Rates of childhood mental health concerns and suicide rose steadily between 2010 and 2020 and by 2018 suicide was the second leading cause of death for youth ages 10-24. The pandemic has
Where do we go from here?

Anxiety/Fears
Loss
Equity

Hope and Resilience
Social Connectedness

• **Connections to adults and peers from school** was associated with decreased:
  • Feelings of persistent sadness and hopelessness.
  • Suicidal ideation.
  • Suicide attempts.

• **Around 1 in every 2 students felt close to adults and peers** from school during the pandemic.

• **Schools are uniquely positioned to support youth at higher risk for these concerns and provide opportunities for connection.**

CDC 2021 Adolescent Behavior and Experiences Survey (ABES)
Using Recovery Funds to Support Student and Staff Well-Being

- ESSER Funds for SEAs and LEAs
- Can use funds to support student and staff wellbeing and mental health
- Leveraging ESSER Funds to Access Sustainable Funding Streams (e.g. Medicaid)
- bit.ly/restart-recovery-guide
What can schools do?
Comprehensive School Mental Health

Multi-tiered System of Support for Students, Families and Educators
Figure 5: Multi-Tiered System of Support

TIER 3
+ Targeted interventions for students with serious concerns that impact daily functioning

TIER 2
+ Supports and early intervention for students identified through needs assessments as at risk for mental health concerns

TIER 1
+ Promotion of positive social, emotional, and behavioral skills and overall wellness for all students

Foundational Elements
+ Professional development and support for a healthy school workforce
+ Family-School-Community partnerships
• Positive school climate

• Culturally responsive, trauma-responsive school policies and practices

• Staff well-being

• Mental health literacy for school staff and students

• Social Emotional Learning (SEL)
Early Identification, Intervention and Treatment in Schools

• Screening/well-being check-ins

• Evidence-based psychosocial interventions – e.g., CBITS/Bounce Back, TF-CBT

• Psychiatric care
Comprehensive School Mental Health Systems

“provide an array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness.”

These systems are built on a strong foundation of district and school professionals, including administrators, educators and specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses and other school health professionals),

all in strategic partnership with students and families, as well as community health and mental health partners.” Hoover et al., 2019
Figure 3. Core Features of a Comprehensive School Mental Health System

1. Well-Trained Educators and Specialized Instructional Support Personnel
2. Family-School-Community Collaboration and Teaming
3. Needs Assessment and Resource Mapping
4. Multi-Tiered System of Support
5. Mental Health Screening
6. Evidence-Based and Emerging Best Practices
7. Data
8. Funding
FIGURE 4. AN EXAMPLE OF COMPLEMENTARY ROLES AND RESOURCES OF COMMUNITY PARTNERS AND SCHOOL DISTRICTS IN COMPREHENSIVE SCHOOL MENTAL HEALTH SYSTEMS

Why Mental Health Treatment in Schools?

Youth are 6x more likely to complete mental health treatment in schools than in community settings (Jaycox et al., 2010)

![Treatment Initiation and Completion](chart.png)

N=118 youth randomly assigned to clinic-based or school-based trauma treatment after Hurricane Katrina (Jaycox et al., 2010)
Value

Figure 2. The Value of Comprehensive School Mental Health Systems: Positive Outcomes

- Better academic outcomes
- Access to care
- Early identification and intervention
- Positive school climate and safety
- Youth, family, educator and peer engagement
- A continuum of services
- Better psychosocial outcomes

- Findings from 36 primary research, review, and meta-analysis articles
- 2000-2017

- Benefits of school behavioral health clinical interventions and targeted interventions on a range of academic outcomes –
  - Grades
  - Attendance
  - State test scores
  - School connectedness
Guidance from the Field

• Why Address Mental Health in Schools
• A Public Health Approach to School Mental Health
• The Value of School Mental Health
• Core Features of a Comprehensive School Mental Health System
• Opportunities, Challenges and Recommended Strategies
• Local Spotlights
• State Spotlights
• Moving Forward

www.schoolmentalhealth.org/AdvancingCSMHS
How States Can Use ESSER Funds to Support School Mental Health

• Understand the Policy Environment
• Foster Meaningful Collaboration
• Strengthen and Expand School Medicaid Programs
• Promote MTSS Implementation
• Enhance Data Systems and Collection
• Build LEA Capacity
Sustainable Funding Streams

- Every Student Succeeds Act (ESSA) Title Funding:
  - Titles I, II, III, IVA
- Individuals with Disabilities Education Act (IDEA)
- Federal grant programs (e.g., Project AWARE, CDC Healthy Schools Program)
- State and local funding
- Community partnerships
- Medicaid
Expansion of School-Based Medicaid Programs

School-based Medicaid

- Strong school-based Medicaid programs require coordination among state Medicaid, SEA and LEA staff, at a minimum.
- Dedicating staff to coordinate Medicaid programs at every level helps to clarify and facilitate the implementation of school-based Medicaid reimbursement.
- Investments in infrastructure are important to the long-term success of programs.
- A robust, transparent policy ecosystem--including research, guidance documents and policy manuals--helps promote understanding and compliance.
- Education, technical assistance and opportunities for continued learning are needed to facilitate school-based Medicaid programs.
- Family and staff education and engagement are critical components of a successful program.
School Medicaid Resources

- CCSSO’s Understanding School Medicaid: A Primer for Chief State School Officers
  - [Understanding School Medicaid | CCSSO](https://healthyschoolscampaign.org/resources/single/a-guide-to-expanding-medicaid-funded-school-health-services/)

- Healthy Schools Campaign’s Guide to Expanding Medicaid-Funded School Health Services
  - [https://healthyschoolscampaign.org/resources/single/a-guide-to-expanding-medicaid-funded-school-health-services/](https://healthyschoolscampaign.org/resources/single/a-guide-to-expanding-medicaid-funded-school-health-services/)
STATE EDUCATION LEADERS CAN TAKE THE LEAD IN ESTABLISHING CSMHS BY TAKING FIVE KEY STEPS:

1. Establish a statewide strategy and framework that focuses on supporting students’ academic development and student and staff wellbeing and connection, including mental health.

2. Form strong, diverse partnerships to develop and implement the strategy.

3. Take an asset-based approach that focuses on strengths and values diversity in race, culture, language, ability and thought.

4. Align efforts with existing efforts and COVID recovery.

5. Prioritize capacity-building at the local level to advance CSMHS.
State Use of ESSER Funds to Support School Mental Health

- Approximately 50% of state plans listed students’ mental, social, emotional and behavioral health, including trauma, as one of the top 3 pandemic-related issues currently facing students and schools.

- Common strategies include: the use of a MTSS framework or a Whole Child framework, enhanced counseling or guidance services, integrating SEL into instructional approaches, summer programming and offering virtual and on demand tools and resources.
State Use of ESSER Funds to Support School Mental Health

- Iowa
  - Grants to LEAs
  - Iowa Center for School Mental Health

- Arizona
  - School Safety Grant Program- School Counselor and School Social Worker Positions

- Maryland
  - Maryland School Mental Health Response Program- Response and Consultation to Schools Across the State

- Oklahoma
  - Grants to LEAs- school-based mental health professionals
  - Oklahoma School Counselor Corps.

- District of Columbia
  - Educator wellness platform

https://docs.google.com/spreadsheets/d/1PSgwA2w9KkjinCgBMbTff8wO07FMeodrXlx4eSPCMCMA/edit#gid=0
District Use of ESSER Funds

- Hiring school-based mental health providers
- Investing in technology platforms (e.g. electronic health record systems) to support delivery of school mental health services
- Hiring district level staff (e.g. school Medicaid coordinator, MTSS coordinator) to support school level program implementation
- Providing professional development opportunities on school mental health
- Enhancing data systems (e.g. student information systems) to capture mental health data
- Providing mental health supports to school staff
Well-being & Connection Resources

Visit [https://learning.ccsso.org/wellbeing-and-connection](https://learning.ccsso.org/wellbeing-and-connection) to access CCSSO’s resources for states to support student and staff well-being & connection.
Free National SMH Resources
What is SHAPE?

Your FREE, interactive tool designed to improve school, district, and state mental health accountability, excellence, and sustainability.

Learn More

Improve student mental health in your schools, districts, and states. Sign up for:

Myself  My School  My District  My State
Map school mental health services and supports.

Assess system quality using national performance standards.

Receive custom reports and strategic planning guidance and resources.

Utilize additional SHAPE features including the Screening and Assessment Library.

Use district and state dashboards to collaborate with schools and districts in your region.

www.theSHAPEsystem.com
National School Mental Health Quality Assessment- SMH-QA

Quality Domains
- Teaming
- Needs Assessment and Resource Mapping
- Mental Health Promotion for All (Tier 1)
- Early Intervention and Treatment Services and Supports (Tiers 2/3)
- Screening
- Impact
- Funding and Sustainability

(NCSMH, 2019)
Custom Reports
Strategic Planning Guide

The following pages can be used as a tool to plan your next steps for this domain. We encourage you to complete this with your team.

Please state a specific goal within this domain. (For example, for the Teaching domain, one goal might be that the school mental health team will better collect and use data to identify students who need mental health support.)

**GOAL:**

How will you know if you’ve achieved success within this goal? (For example, for the Teaching domain and your goal is to better collect and use data to identify students who need mental health support, one way of measuring success might be that by the end of the academic school year, the school mental health team will review student mental health screening data for the entire student body twice per year to identify students in need of services and make a plan for meeting those needs.)

**INDICATOR OF SUCCESS:**

What opportunities exist related to this goal?

- What have been our past successes?

- What current work is taking place related to this goal?

- What are our available resources (leadership, infrastructure, staffing, partnerships)?

What barriers exist related to this goal?

- What would prevent us from moving forward with this goal?

- What would we need to overcome these barrier(s)?
The Resource Center houses publicly available resources representing key components of comprehensive school mental health. Teams are encouraged to use custom reports from the Quality Assessment to navigate the Resource Center and guide the selection of appropriate resources.
Quality Guides

Provides guidance to advance school mental health quality and sustainability

Includes:
- Background
- Best practices
- Action steps
- Examples from the field
- Resources
State School Mental Health Profile

The State School Mental Health Profile will help your state assess several school mental health indicators including: infrastructure, technical assistance and training, state policies, financing, staffing, and emerging SMI issues (including SEL, telepsychiatry, 504). The state profile will take approximately 1-2 hours to complete as a team.

State Agencies & Organizations
Last updated on: 12/18/2019
Take Survey View Responses

State Level Leadership
Last updated on: 12/26/2019
Take Survey View Responses

Policy
Last updated on: 12/18/2019
Take Survey View Responses

Funding
Last updated on: 12/18/2019
Take Survey View Responses

Services and Supports
Last updated on: 12/18/2019
Take Survey View Responses

Innovations and Emerging Areas
Last updated on: 12/11/2019
Take Survey View Responses

Staffing and Community Partnered Behavioral Health
Last updated on: 12/18/2019
Take Survey View Responses

Barriers and Resources
Last updated on: 12/18/2019
Take Survey View Responses
### My Districts

Monitor progress and view SHAPE reports from districts in your state.

<table>
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<tr>
<th>District</th>
<th>Shares Data with State</th>
<th>Star Status</th>
<th>Admins</th>
<th>Team Members</th>
<th>Mental Health Profile Report</th>
<th>Mental Health Quality Report</th>
<th>Trauma Responsiveness Report</th>
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National School Mental Health Best Practices- Implementation Guidance

Modules  www.mhttcnetwork.org

Mod 1  Foundations of Comprehensive School Mental Health

Mod 2  Teaming

Mod 3  Needs Assessment & Resource Mapping

Mod 4  Screening

Mod 5  Mental Health Promotion for All (Tier 1)

Mod 6  Early Intervention and Treatment (Tiers 2/3)

Mod 7  Funding and Sustainability

Mod 8  Impact

National School Mental Health Curriculum: Guidance and Best Practices for States, Districts, and Schools

Trainer Manual
Module 6: Early Intervention and Treatment (Tiers 2/3)

National School Mental Health Best Practices: Implementation Guidance Modules
Quality Indicators

- Provide access to needed services and supports.
- Determine whether services are evidence-informed.
- Ensure all services and supports are evidence-informed.
- Ensure fit with strengths, needs, and cultural and linguistic considerations
- Ensure adequate resources for implementation.
- Provide interactive training and ongoing supports.
- Monitor fidelity.
- Ensure intervention goals are SMART.
- Monitor student progress across tiers.
- Implement a systematic protocol for emotional and behavioral crisis response.
# Intervention Planning Form

School or district mental health teams are encouraged to complete this form when planning to adopt an intervention. The primary goal of this form is to help teams predict appropriate intervention staffing and time burden.

![Intervention Planning Form](image-url)

### Example: Check In, Check Out

<table>
<thead>
<tr>
<th>Tier</th>
<th>Planning/Preparation</th>
<th>Supervision</th>
<th>Delivery</th>
<th>Evaluation and Feedback</th>
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<td>Teachers</td>
<td>Aug-Dec</td>
<td>Oct-May</td>
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<td>Dec, May</td>
</tr>
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</table>
1. Develop a plan to track implementation of core components of the EBP.

2. Monitor adaptations to the EBP to check fidelity.

3. Ensure that quantitative and qualitative data are obtained to monitor fidelity.

4. Develop a plan to address low-fidelity adherence.


Implementing EBPs in School Settings Checklist

1. Develop a plan to track implementation of core components of the EBP.

2. Monitor adaptations to the EBP to check fidelity.

3. Ensure that quantitative and qualitative data are obtained to monitor fidelity.

4. Develop a plan to address low-fidelity adherence.

Example Crisis Response Protocol

Crisis Protocol for Days of No Mental Health Coverage

1. **Child Abuse/Neglect**
   - Suspect abuse or neglect?
     - **YES**
       - Notify Principal Immediately
       - Follow School Protocol for Mandatory Reporting
     - **NO**

2. **Homicide**
   - Student is thinking of or planning to seriously harm someone else?
     - **YES**
       - Notify Principal Immediately
       - Call Guardian
     - **NO**

3. **Suicide**
   - Student is thinking of or planning to seriously harm themselves?
     - **YES**
       - Notify Principal Immediately
       - Refer to Kognito Training
       - Ask:
         1. Do they have a plan?
         2. Do they have access to means to carry out this plan?
       - **YES to EITHER**
         - Call Guardian and BCARS
         - (410) 547-5490
     - **NO** to both
       - Call Guardian

***Send email to School Based Mental Health Team for students who would normally be sent to School Based Mental Health Professional (see Path C in Student Behavior Flow Chart): Someone will follow up with the student and involved parties the next day of coverage***

Published by New Song Learning Center Mental Health Team, 2017
Permission is given to duplicate this document for professional use, as long as it is unaltered and complete.
Classroom WISE:
Well-Being Information and Strategies for Educators

Developed by the MHTTC Network in partnership with the National Center for School Mental Health
SMH Resources Summary

• Join our NCSMH listserv or follow us on Twitter
  • http://www.schoolmentalhealth.org/Connect/Listserv--Newsletters/
  • @NCSMHtweets

• Sign up for SHAPE
  • https://www.theshapesystem.com/

• National SMH Best Practices– Implementation Guidance Modules
  • https://mhttcnetwork.org/now-available-school-mental-health-curriculum
  • https://mhttcnetwork.org/centers/global-mhttc/school-mental-health-curriculum-always-and-now-learning-series
Questions?

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