



UNIVERSITY of MARYLAND  
SCHOOL OF MEDICINE



South Southwest (HHS Region 6)

**MHTTC**

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



# Sustaining Comprehensive School Mental Health Systems

South Southwest MHTTC

National Center for School Mental Health

February 28, 2023



UNIVERSITY of MARYLAND  
SCHOOL OF MEDICINE



**WELCOME!**



UNIVERSITY of MARYLAND  
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# National Center for School Mental Health (NCSMH)

Established in 1995 with funding from the 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.



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Visit the NCSMH website at  
[www.schoolmentalhealth.org](http://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





## Agenda

Introductions & Mindful Moment

Comprehensive School Mental Health Systems

Morning Break (15 minutes)

Funding & Sustainability

Lunch Break (30 minutes)

Recovery Supports for School Mental Health

Afternoon Break (15 minutes)

Sustainability Action Planning and Share Out



# Share Seamlessly, Steal Shamelessly!







# Introductions

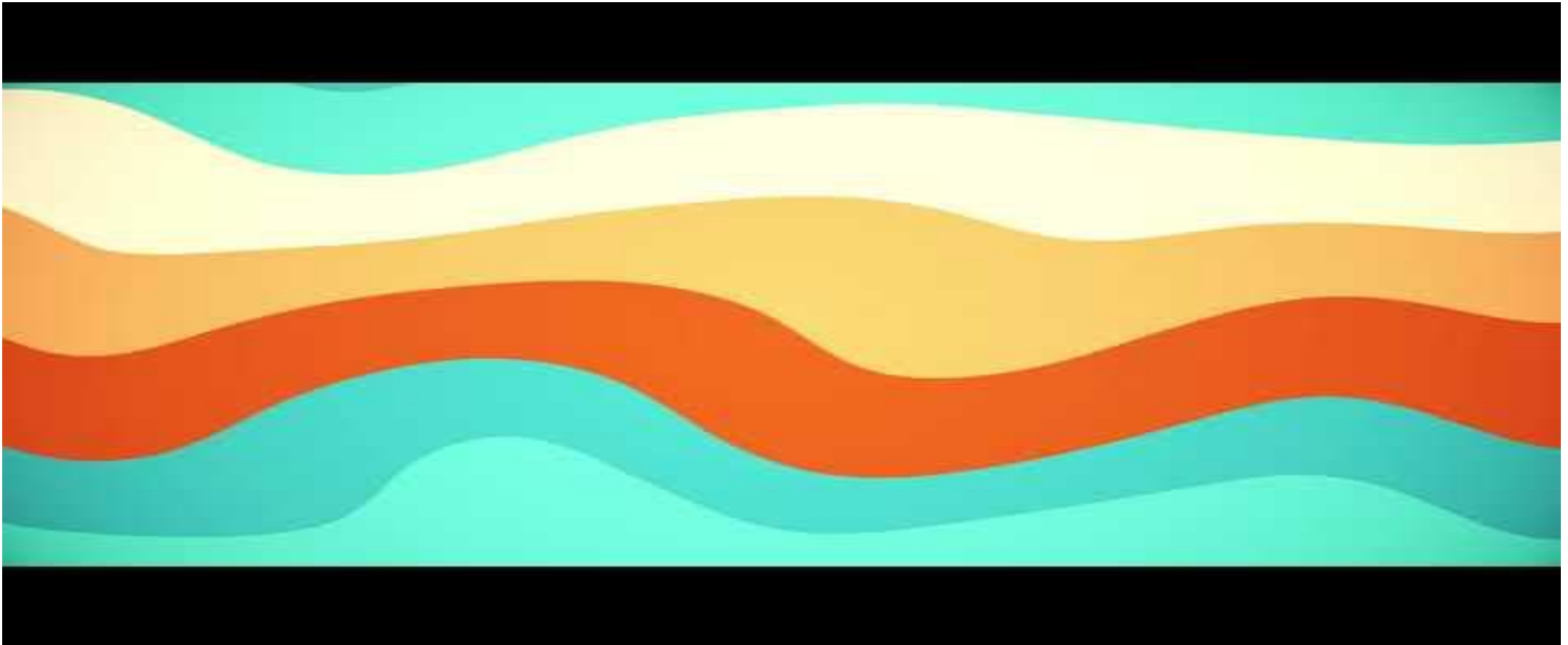
Welcome! Please introduce yourself in the chat! Please share:

- Your Name, Role and District/State





# Mindful Moment







# Mental Health In COVID-19

## COVID-19 impact

- Fear of COVID-19 exposure
- Social isolation
- Changes in routines
- Familial stressors
- Contact-restriction procedures
- Increase in media consumption
- Exposure to direct and indirect experiences of infections, hospitalizations, and death

## Differential COVID-19 impact

- Significant increases in mental health concerns
- Experiences of racism
- Financial concerns
- Food insecurity
- Isolation
- Technological divide
- Unmet intergenerational and familial needs



# Mental Health In COVID-19



While some children reported positive changes in their lives due to COVID-19,

- Increased familial and peer engagement
- Use of personal coping mechanisms,

Many children have reported significant increases in mental health concerns,

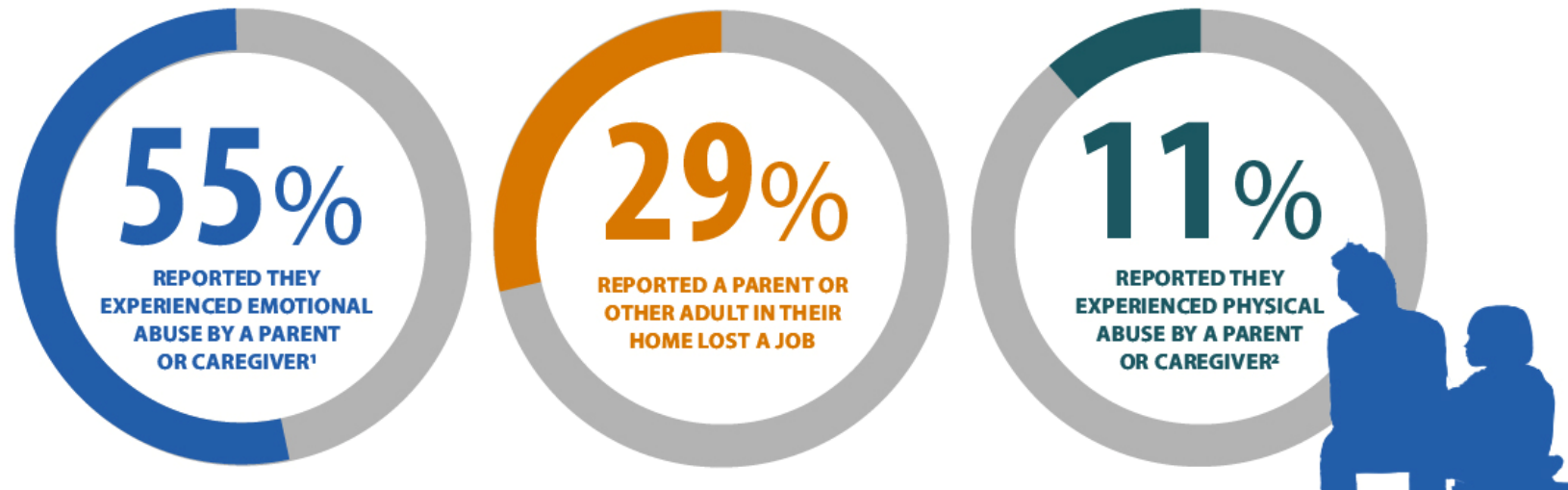
- Depressive and anxious symptoms,
- Suicidal ideations,
- Nonsuicidal self-injury
- Social and behavioral problems (Samji et al., 2022).



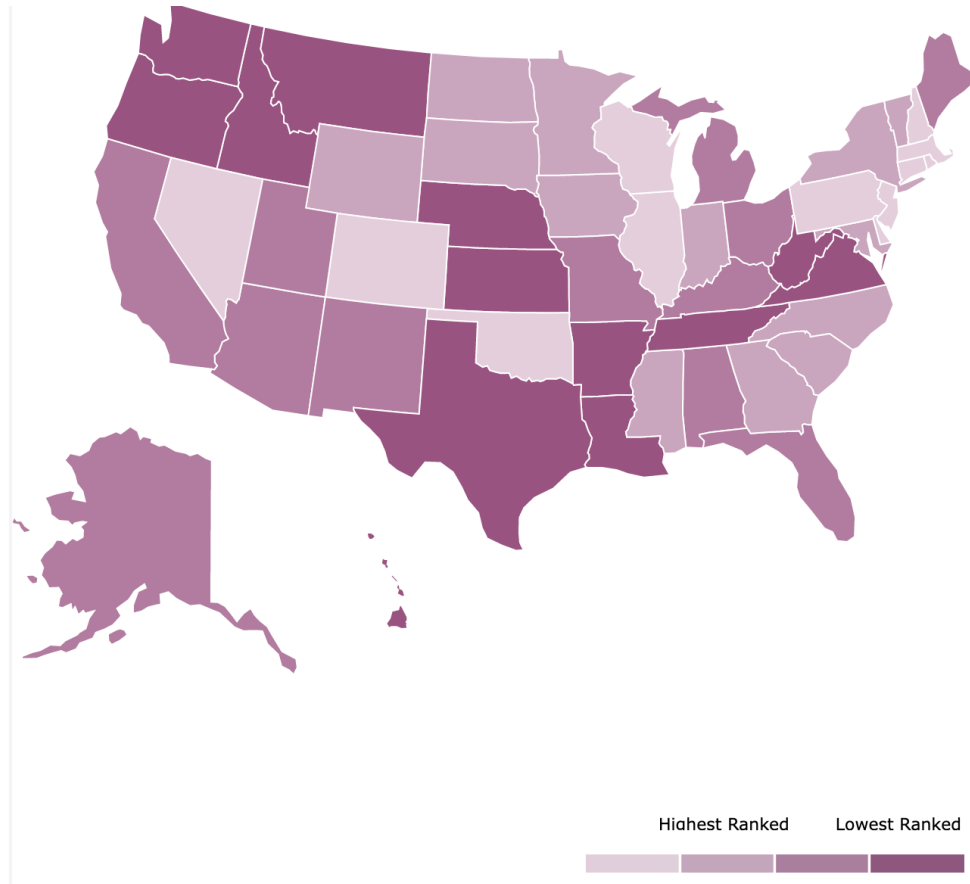
# Mental Health is a Crisis for Children and Adolescents

According to the new data, **in 2021, more than a third (37%)** of high school students reported they experienced poor mental health during the COVID-19 pandemic, and **44%** reported they persistently felt sad or hopeless during the past year.

## CDC DATA GIVE MORE INSIGHT INTO SEVERE CHALLENGES U.S. YOUTH HAVE ENCOUNTERED DURING COVID-19



# State of Youth Mental Health 2023



Assessed states prevalence of mental illness and access to care for youth. The seven measures that make up the Youth Ranking include:

- Youth with at Least One Major Depressive Episode (MDE) in the Past Year
- Youth with Substance Use Disorder in the Past Year
- Youth with Severe MDE
- Youth with MDE Who Did Not Receive Mental Health Services
- Youth with Severe MDE Who Received Some Consistent Treatment
- Youth with Private Insurance That Did Not Cover Mental or Emotional Problems
- Students (K+) Identified with Emotional Disturbance for an Individualized Education Program.

# Educator Mental Health and Well-Being

52%

of education professionals say their mental health has declined during the global pandemic



## 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.



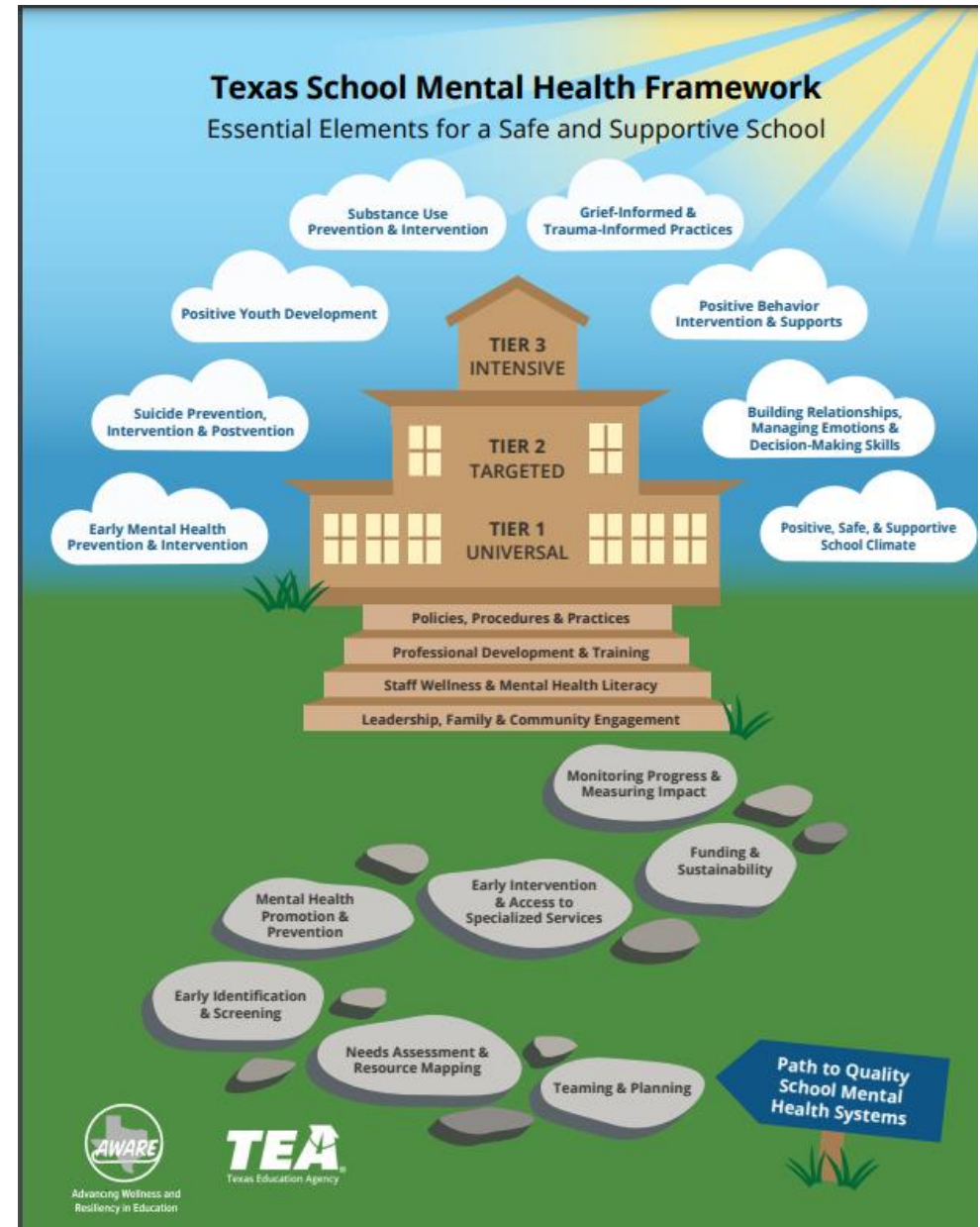
# Building Capacity in Schools



- Shortage of providers trained to meet mental health needs
- Changes in policies at the school and district level are needed
- Build capacity through all the systems



# Texas Framework





# Comprehensive School Mental Health Systems

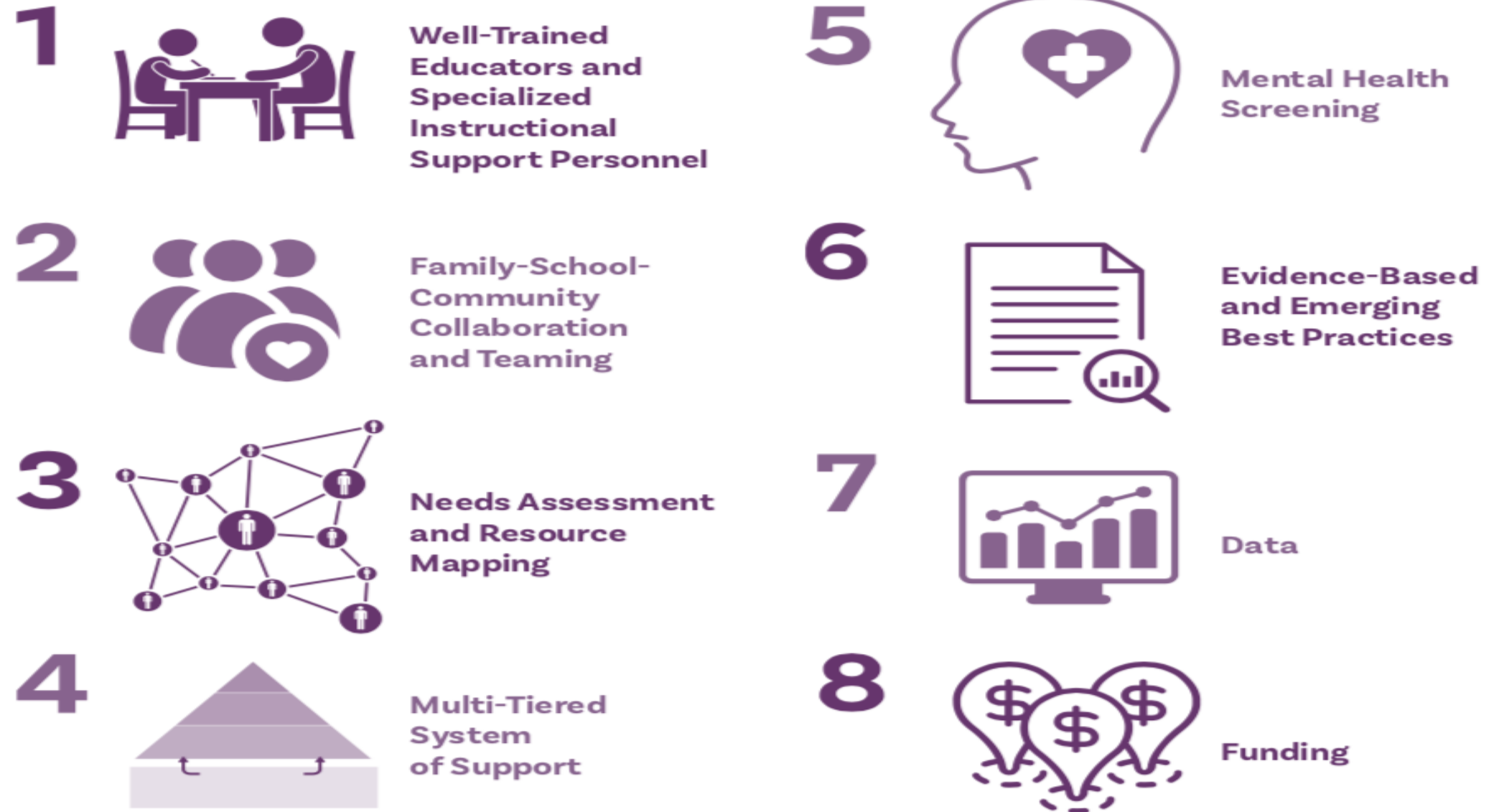
“provide an array of supports and services that **promote positive school climate, social and emotional learning**, and mental health and well-being, while **reducing the prevalence and severity of mental illness**.

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),

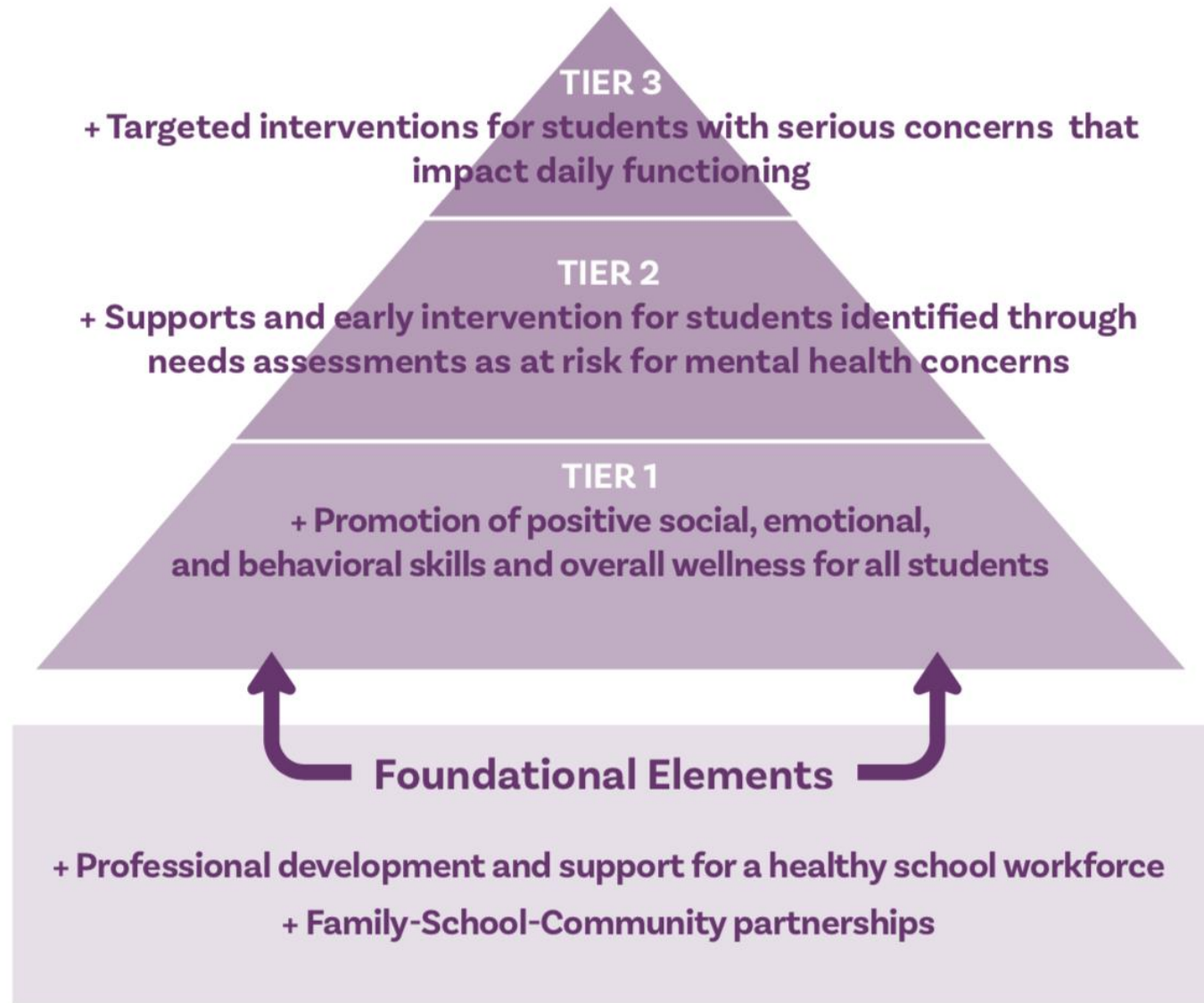
**all in strategic partnership with students and families, as well as community health and mental health partners.”** *Hoover et al., 2019*



**Figure 3. Core Features of a Comprehensive School Mental Health System**



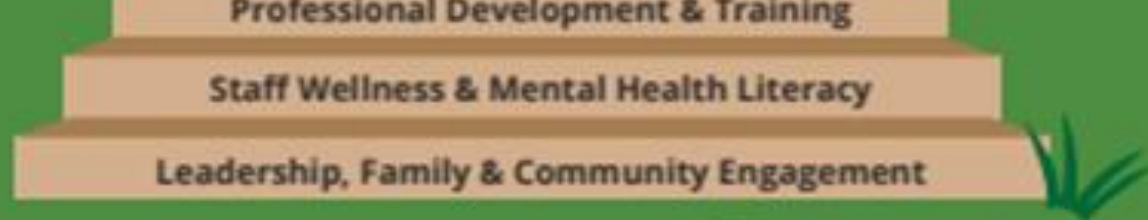
**Figure 5: Multi-Tiered System of Support**











Advancing Wellness and  
Resiliency in Education



# Texas School Mental Health Framework

TIER

3

Coordination of intensive/specialized interventions for students with serious concerns that affect daily functioning

2

Targeted supports and early intervention for students identified, including through needs assessments, as at-risk for mental health concerns

1

Promotion of positive social, emotional, and behavioral skills, trauma-informed practices and prevention activities designed to support the overall wellness of all students

Policies, protocols, professional development and support for a healthy school workforce

Family-School-Community

## MTSS level

## Approach


## Example activities

### TIER 1 Universal



**Broad mental health-behavioral health-related activities including promotion and prevention that are selected and implemented to meet the needs of all students.**

- Staff development for staff who interact regularly with students
- School-wide culturally responsive systems of support
- Interpersonal/social, emotional, behavioral skill-building lessons
- Teaching mental health awareness
- Advisory with lessons and caring adult access for all students
- Self-referral process and promotion of help-seeking behavior without stigma to access services and supports
- Grief- and trauma-informed practices, policy, and procedures
- School-wide positive behavior support and mental health practices, including suicide and bullying prevention and interventions; and behavior regulation and co-regulation practices
- School climate improvement surveys and improvement efforts
- Universal screening
- Referral pathways for early identification of needs and warning signs of a mental health condition, suicide, or substance abuse
- Positive youth development activities for all students

| MTSS level  | Approach  | Example activities  |
|---|---|---|
| <p><b>TIER 2<br/>Selected</b></p>  | <p><b>Targeted early intervention services and supports to some students identified as at risk of mental health concerns.</b></p> | <ul style="list-style-type: none"> <li>• Evidence-based classroom or small group interventions for additional skill-building, such as problem-solving, conflict resolution, building/maintaining relationships, goal-setting, responsible decision-making, stress management, and resiliency building</li> <li>• Brief individual interventions, such as brief solutions-focused counseling, check in-check out, Check and Connect</li> <li>• Parent engagement, family group psychosocial education</li> <li>• Low-intensity classroom-based supports, such as daily teacher/student check-in, restorative practices and circles, etc.</li> <li>• Data collection and monitoring progress</li> <li>• Responsive services available to address student needs as they arise—immediate access to a counselor, social worker</li> <li>• Gated screening</li> <li>• Identification of early warning signs protocols</li> <li>• Referrals to community resources and parent engagement</li> <li>• Volunteer community mentoring program</li> </ul> |



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### **TIER 3 Intensive**



**Mental health treatment or specialized services to support selected students with social, emotional, behavioral, and/or mental and behavioral health needs.**

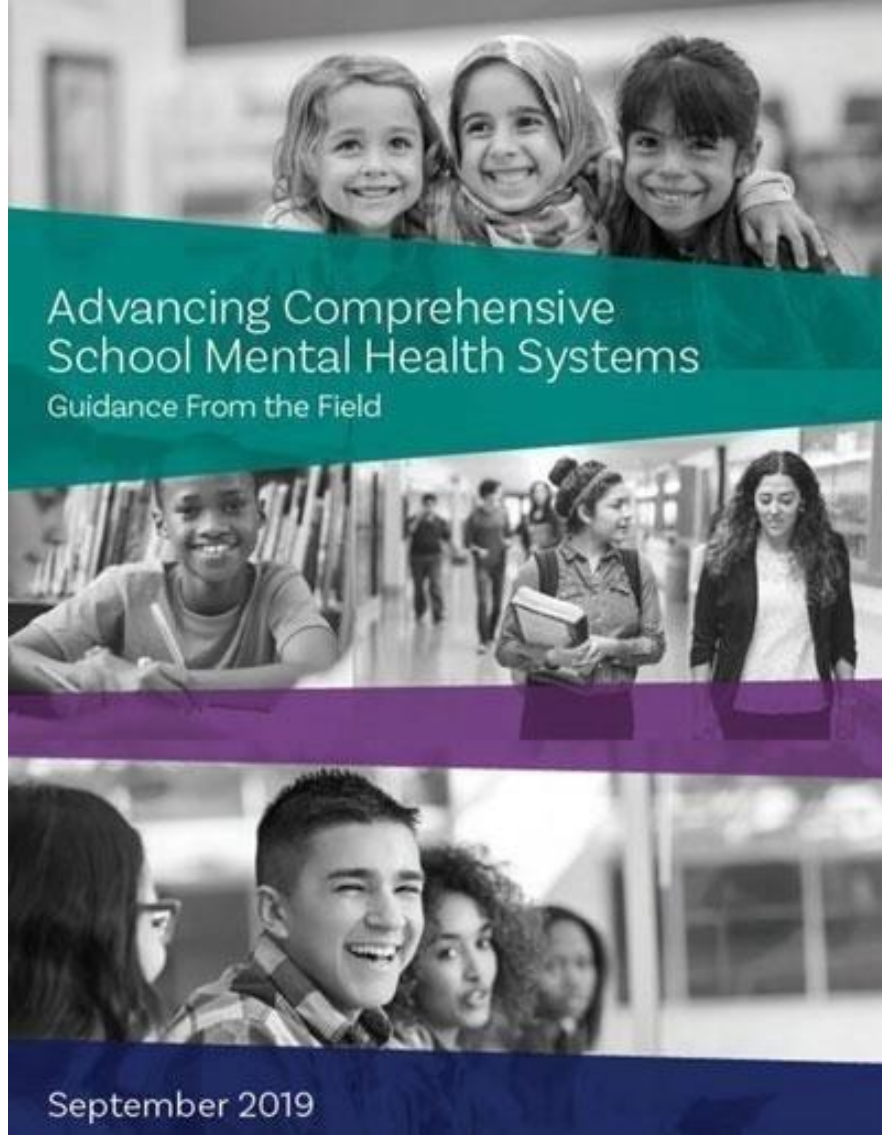
- Increased intensity of individual evidence-based therapeutic interventions by mental health professionals, including telehealth
- Crisis plans—i.e., suicide prevention and intervention protocols
- Safety plans, for suicide prevention or return from treatment or hospitalization
- Group or family therapy
- Reentry plans from disciplinary alternative education program (DAEP)
- Recovery groups
- Data collection and monitoring progress
- Case management
- Case coordination with mental health providers, physicians, etc.
- Coordination with SPED for assessment and Individualized Education Program (IEP) services

**FIGURE 4. AN EXAMPLE OF COMPLEMENTARY ROLES AND RESOURCES OF COMMUNITY PARTNERS AND SCHOOL DISTRICTS IN COMPREHENSIVE SCHOOL MENTAL HEALTH SYSTEMS**



Source: Weist, M. D., Short, K., McDaniel, H., & Bode, A. (2016). *The school mental health international leadership exchange (SMHILE): Working to advance the field through opportunities for global networking.*





# Guidance from the Field

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- 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](http://www.schoolmentalhealth.org/AdvancingCSMHS)









# Jamboard

## Temperature Check for Funding and Sustainability





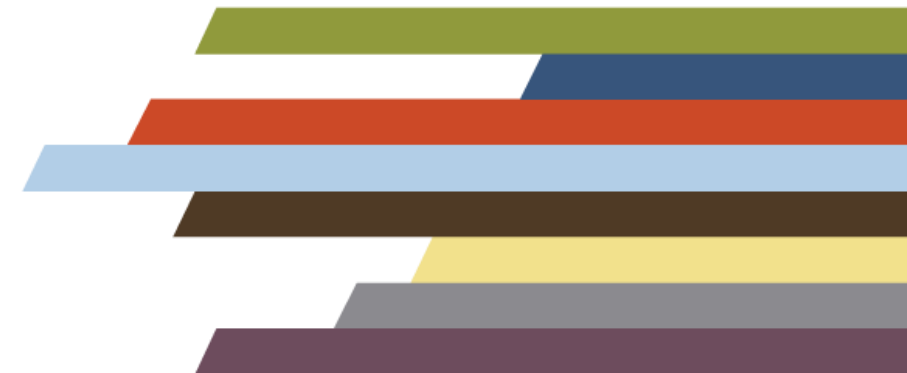
**MHTTC**

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# **Module 7: Funding and Sustainability**

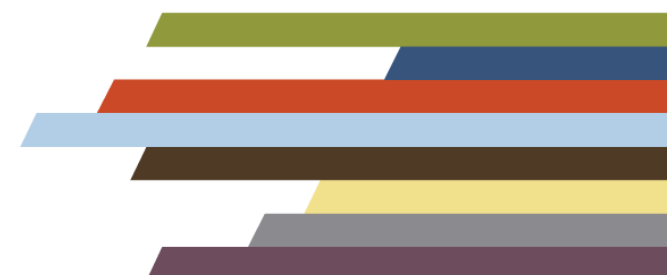
National School Mental Health Curriculum





# What Do We Mean by School Mental Health Funding and Sustainability?

Strategies to optimize financial and nonfinancial assets needed to maintain and improve your school mental health system over time.



## Funding and Sustainability

### Used best practices to:

- Use multiple and diverse funding and resources to support the full continuum of school mental health .
- Leverage funding and resources to attract potential contributors.
- Have strategies in place to retain staff.
- Maximize expertise and resources of partners to support ongoing professional development.

### Had funding and resources to support:

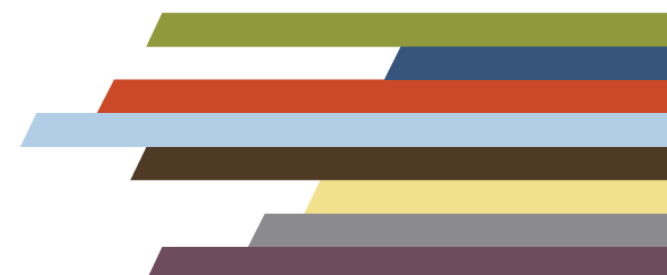
- Tier 1 (mental health promotion) services
- Tier 2 (early intervention) services
- Tier 3 (treatment) services

### Maximized reimbursement for eligible services

To what extent did your district/school **use multiple and diverse funding and resources to support a full continuum** of school mental health services and supports?

## Best Practices

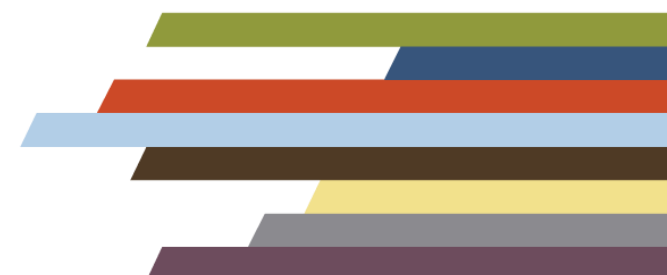
- Use diverse funding – different levels, types, and systems.
- Ensure funding and resources align to support the full continuum of care.
- Establish and use the process to:
  - Develop, evaluate, and update financing plan.
  - Regularly monitor new funding opportunities and policies.



# Explore Diverse Funding Opportunities

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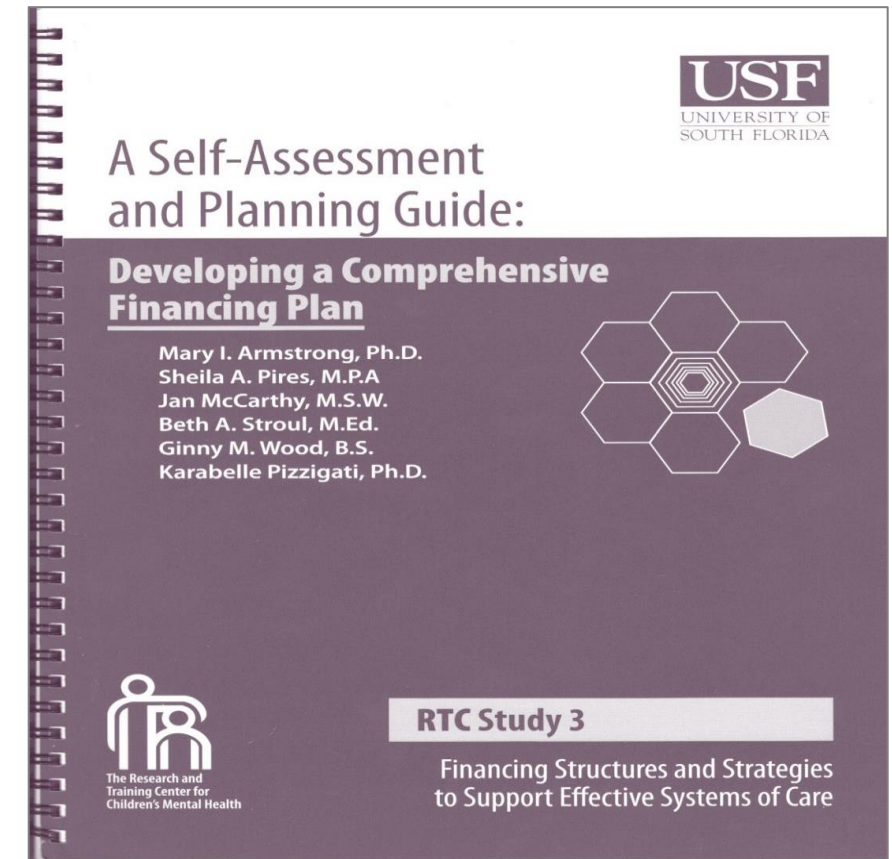
- School
- Local/district/county
- Tribal
- Territory
- State
- Federal
- Private foundations, donors



# Self-Assessment/Planning Guide

## Core areas to assist sites in developing financing plans:

1. Identification of **current spending and utilization patterns** across agencies
2. **Realignment** of funding streams and structures
3. Financing of **appropriate services and supports**
4. Financing to support **family and youth partnerships**
5. Financing to improve **cultural/linguistic competence and reduce disproportionality** in care
6. Financing to improve the **workforce and provider network** for behavioral health services for children and families
7. Financing for **accountability**



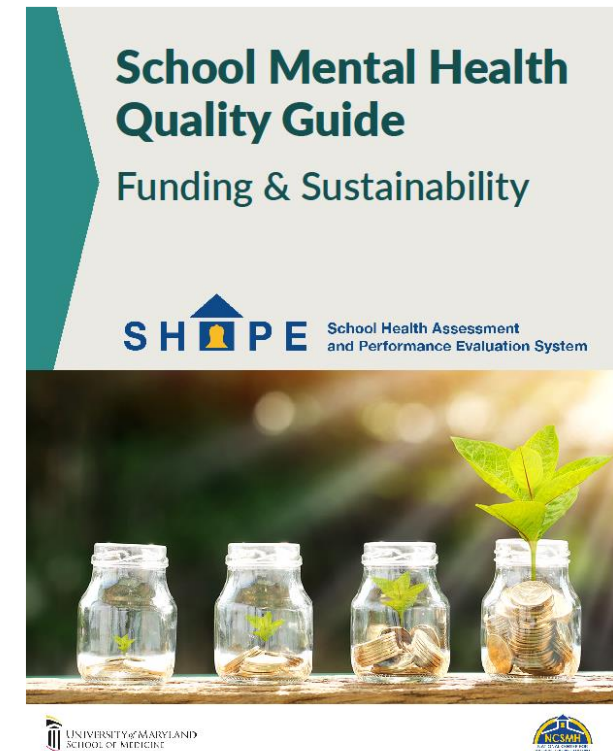


# School Mental Health Quality Guide: Funding and Sustainability

Provides guidance to advance school mental health quality and sustainability

Includes:

- Background
- Best practices
- Action steps
- Examples from the field
- Resources



NCSMH, 2020



## District Example

An urban district in Maryland has successfully built a blended funding model that pools and leverages funding from multiple sources to support community-partnered school mental health providers in most schools.

- ~55% funding from fee-for-services (Medicaid, private insurance) reimbursement

- ~35% funding from city taxes, school district funds, and specific line items in the municipal budget

- ~10% funding from foundations and other grants



# State Example

## Pennsylvania

- Medicaid (including Behavioral Health Managed Care Organizations), CHIP, or private insurance for behavioral health treatment services
- Mental health and drug and alcohol allocations to counties to provide liaison services to Student Assistance Program (SAP) teams in all 500 school districts
- Education system for the training of SAP or Positive Behavior Support (PA PBS) team members or Youth Mental Health First Aid training
- Drug and alcohol funding to counties to provide evidence-based prevention services to schools

## Reflection:

In your district, which funding sources are **currently being accessed** to support school mental health, and which **remain to be explored**?

### Federal Funding Sources

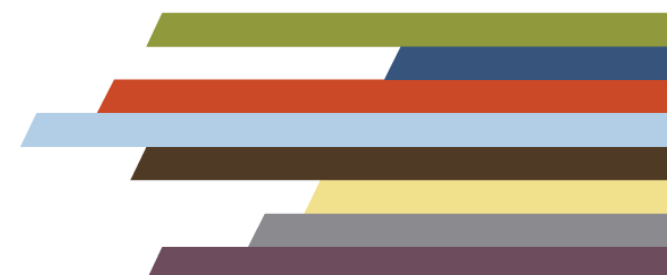
- Public insurance
- Entitlements
- Formula/block grants
- Categorical funding
- Discretionary grants
- Demonstration grants
- Research

### Non-Federal Public Funds

- State
- Tribal
- Territory
- County
- Local

### Private Funds


- Private insurance
- Fees
- Civic, charity, philanthropic
- Business investments



# Accessing Medicaid Funds for School-Based Mental Health Services

This Issue Brief provides strategies to access and utilize Medicaid funds for school mental health.

**Issue**BRIEF

**NITT-TA**  
NOW IS THE TIME  
TECHNICAL ASSISTANCE CENTER

## Accessing Medicaid Funds for School-Based Mental Health Services


Over the past several decades, our national public education system has seen a shift in responsibility for meeting student needs. Beyond education, schools are providing an increasing scope of mental and behavioral health services. While less than 20% of school-aged youth needing mental health services actually receive them, the majority of those that do receive mental health services receive them through the schools.<sup>1</sup> About a third of school districts are providing mental health services on campus, and a quarter are working with community-based mental health providers to serve students in need.<sup>2</sup> Delivering these mental health services to thousands of students each year has put districts in precarious financial positions.<sup>3</sup> Shrinking school budgets continue to be a major concern in public school districts in the United States.<sup>4</sup> However, growing recognition at the national level of the need for prevention efforts, accessible health insurance, and comprehensive health services for young people has resulted in new opportunities for schools to fund these services.

There are Medicaid reimbursement programs in most states that allow schools to recoup the cost of administering health services for students enrolled in Medicaid. In January 2016, in recognition of the key role that schools play in the overall health and wellness of children, the U.S. Department of Health and Human Services and the U.S. Department of Education jointly released a letter and *Healthy Students, Promising Futures* toolkit to urge schools and health care providers to collaborate. Their guidance specifically identifies the implementation of Medicaid-reimbursable health services in schools as a high-impact opportunity, a recommendation that is aligned with other national strategic plans and priorities.<sup>5</sup>

The number of people enrolled in Medicaid has increased substantially in the last few years. The Patient Protection and Affordable Care Act (2010) has resulted in Medicaid expansion in 28 states and Washington, DC, with over 12.3 million more people enrolling in Medicaid and CHIP (Children's Health Insurance Program).<sup>6</sup> These changes have the potential to result in a larger Medicaid funding stream to schools, the delivery of more comprehensive behavioral health services, and the integration of schools into innovative community-based health systems.<sup>7</sup>

Unfortunately, Medicaid reimbursement programs in school districts remain widely underutilized.<sup>8</sup> The goal of this Issue Brief is to provide schools, districts, and education agencies with strategies to access and utilize these funds to support mental health services in schools.

**This Issue Brief is to provide schools, districts, and education agencies with strategies to access and utilize these funds to support mental health services in schools.**



Now Is The Time Technical Assistance Center - Issue Brief

1





# Mapping Funding and Resources



# 5-Step Process for Strategic School Mental Health Financing and Sustainability

1. Clarify what you will need, by when.
2. Map current funding and resources.
3. Determine gaps in needs versus existing resources.
4. Select financing strategies and funding sources.
5. Make and execute a financing action plan.



# Financing for What? Worksheet

| Strategies and activities, services and supports that we want to develop and sustain | Over what time period will we develop, implement and sustain? | At what scale and pace will we build and sustain them? |        |        |
|--|---|--|--------|--------|
|  |   | Year 1   | Year 2 | Year 3 |
| Infrastructure Investments   |   |  |        |        |
| Services and Supports  |   |  |        |        |
| Workforce Development  |   |  |        |        |
| Consultation/TA  |   |  |        |        |
| MIS  |   |  |        |        |
| CQI Processes  |   |  |        |        |
| Etc., Etc...   |   |  |        |        |

# Funding Resource Mapping Worksheet

| Strategies/<br>Activities           | Source of<br>Funds | Amount | Restriction on<br>Uses of<br>Funds, if any | Expected<br>Timeframe<br>Funding is<br>Available |
|-------------------------------------|--------------------|--------|--|--|
| Infrastructure<br>Investments       |                    |        |  |  |
|                                     |                    |        |  |  |
| Services and<br>Supports            |                    |        |  |  |
|                                     |                    |        |  |  |
|                                     |                    |        |  |  |
| Training, TA,<br>Consultation       |                    |        |  |  |
|                                     |                    |        |  |  |
| Management<br>and<br>Administration |                    |        |  |  |
|                                     |                    |        |  |  |
|                                     |                    |        |  |  |

# Funding Gap Analysis Worksheet

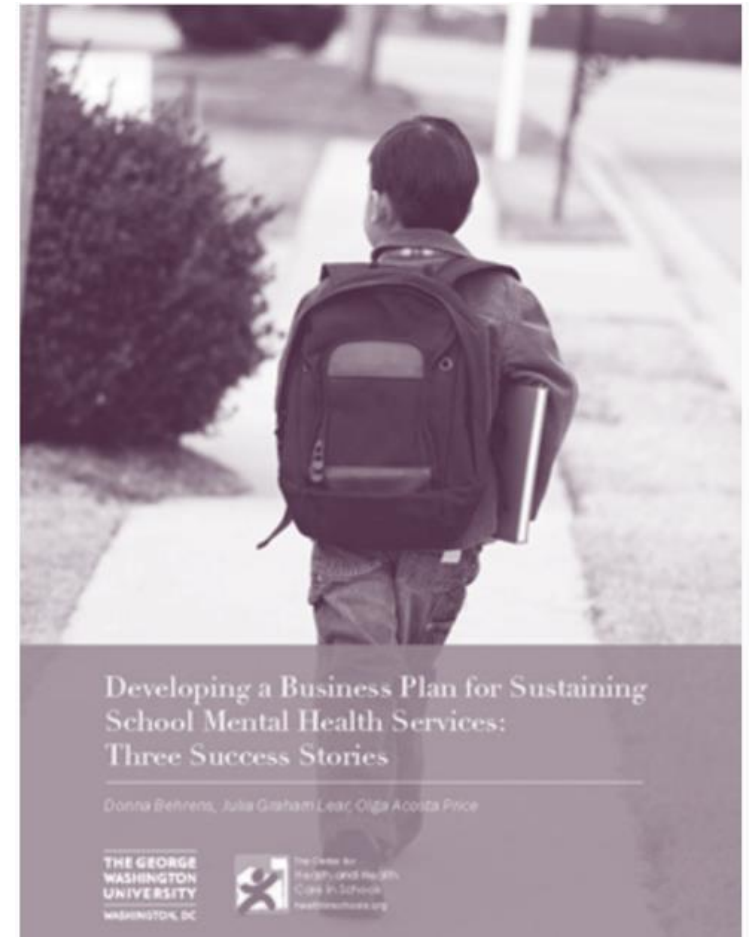
| Strategies/<br>Activities      | Year 1         |                        |     | Year 2         |                        |     | Year 3         |                        |     |
|--------------------------------|----------------|------------------------|-----|----------------|------------------------|-----|----------------|------------------------|-----|
|                                | Total<br>Costs | Available<br>Resources | Gap | Total<br>Costs | Available<br>Resources | Gap | Total<br>Costs | Available<br>Resources | Gap |
| Infrastructure Investments     |                |                        |     |                |                        |     |                |                        |     |
| Services and Supports          |                |                        |     |                |                        |     |                |                        |     |
| Evaluation/<br>Data Collection |                |                        |     |                |                        |     |                |                        |     |
| Management & Administration    |                |                        |     |                |                        |     |                |                        |     |



# Developing a Business Plan for Sustaining School Mental Health Services

This document describes how 3 communities and their lead mental health agencies have worked with schools and other local and state agencies to develop sustainable programs.

(Behrens, Lear, & Price, 2012)



To what extent did  
your district/school  
**leverage funding  
and resources to  
attract potential  
contributors?**

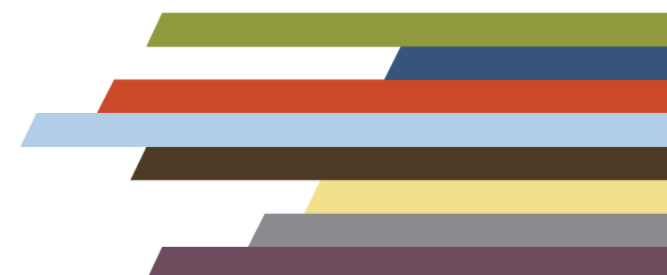
## Best Practices

- Establish and use an agreement that specifies funding and resources.
- Regularly seek partners with funding or nonfinancial resources to contribute.
- Establish and foster relationships with diverse agencies and organizations.



## Leveraging Funding Resources

- Conduct a comprehensive scan of existing funding opportunities.
- Establish partnerships with community mental health programs and other agencies and organizations to expand available services, resources, and infrastructure.
- Develop an MOU that documents agreed-upon services.
- Think beyond dollars and consider exchanging services, training, or resources.



## Reflection:

What ideas does your district have to expand potential funding partners?

## Considerations

- Identify 3 potential allies in your state or community who are likely to share some of the same aims as your CSMHS initiative.
- Think of at least 2 potential “investors” in the expansion and sustainability of your initiative who have not been engaged before.

### Funding and Resources for a Multitiered System of Support

**To what extent did your district/school have funding and resources to support:**

- Tier 1 (mental health promotion) services?
- Tier 2 (early intervention) services?
- Tier 3 (treatment) services?

**To what extent did your school maximize reimbursement opportunities for eligible services?**

## Reflection:

Is your state optimizing Medicaid and private insurance to support school mental health?

## Questions to Consider

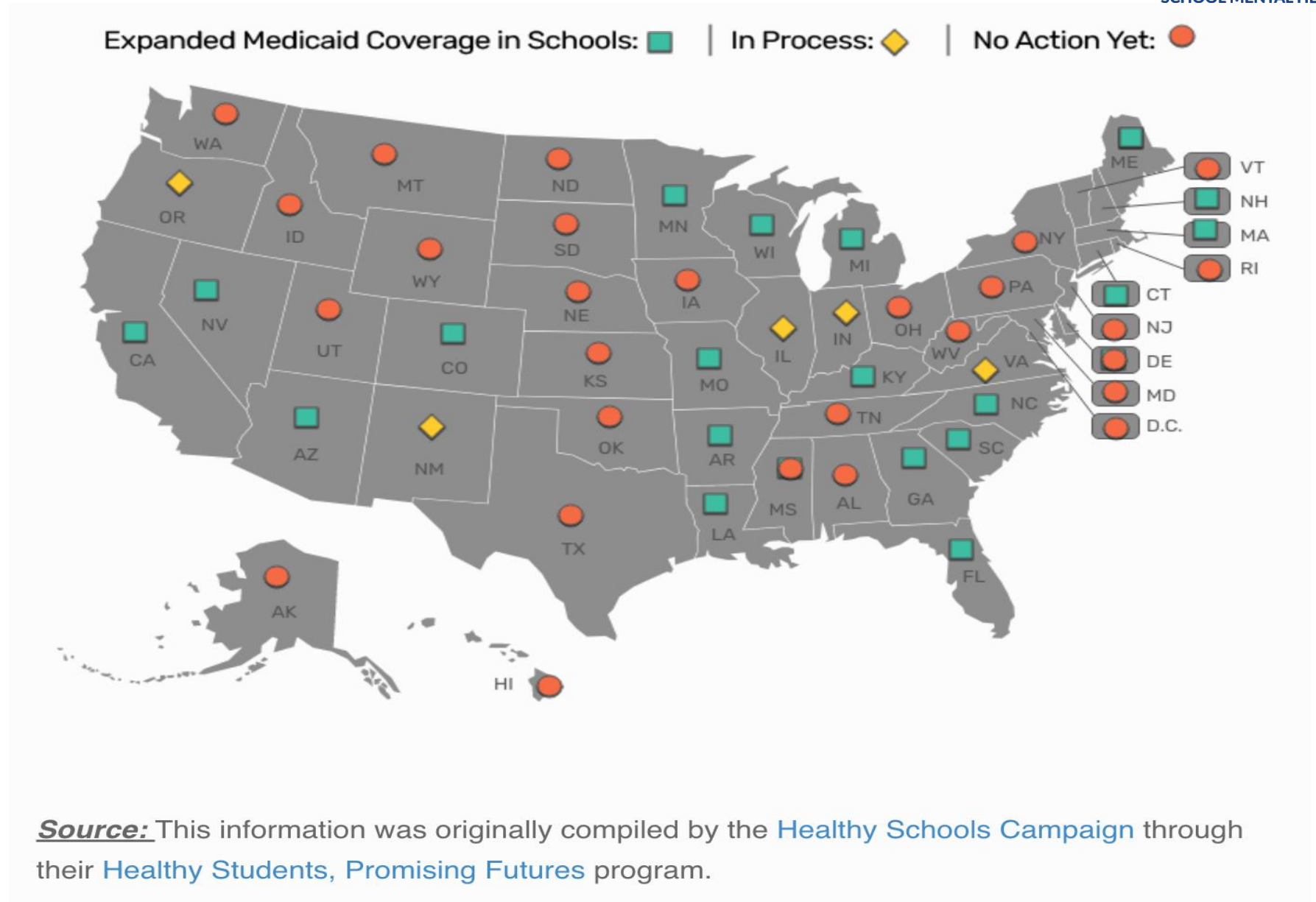
- Who can bill for school-based services in your state?
- What services are billable?
- Are there services that are billable and are not being billed?
- Are there services that your state would like to consider adding to billable services?
- What other obstacles to reimbursement exist?





# SHAPE School Mental Health Policy Map

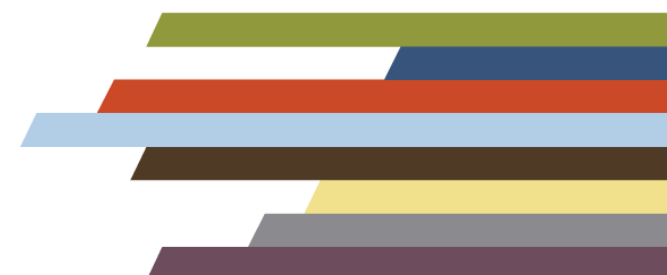
## Expanded Medicaid Coverage





## 5 Medicaid Dimensions to Support School Mental Health

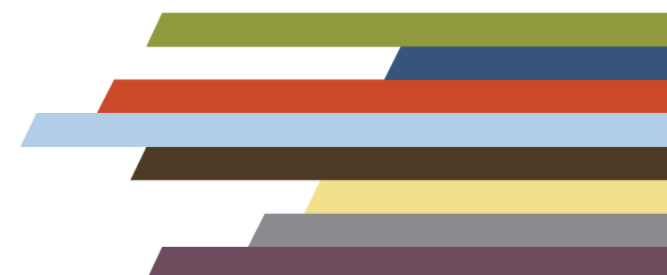
- Maximize enrollment of eligible children.
- Expand services and supports.
- Expand provider types.
- Use cross-system strategies to optimize funding.
  - Braided funding, case rate approaches
- Improve reimbursement methods.
  - Fee for service, prepaid capitation, case rate





## Medicaid Strategies at the Local Level

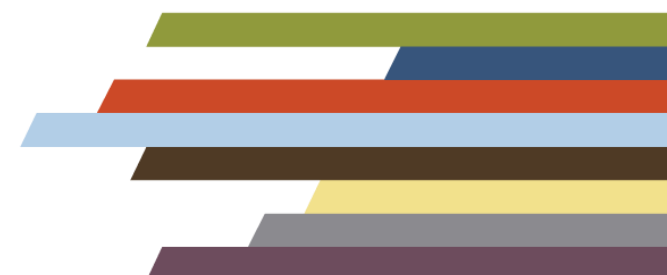
- Access Early and Periodic Screening, Diagnostic and Treatment (EPSDT) for universal screening/early identification of mental health risk
- Take steps for your school/district to become a **direct Medicaid provider**
- Make a plan to identify and **regularly monitor**:
  - State **Medicaid plan and waivers**
  - What **other states** are requesting/receiving CMS approval for
  - **Federal guidance** about Medicaid coverage
  - **Public education/policy** and related resources





## State Example

**Nevada** – Governor’s Social Workers in Schools state-funded block grant provides a full-time social worker to address behavioral health issues based on school climate survey data. The 2015 Legislature passed SB 515, Section 23, which funded social workers and other licensed mental health workers.









# Break





# Funding and Sustainability Innovation in the South Southwest





# Using Recovery Funds to Support SMH

- ESSER Fund 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)





# ESSER Funds Overview

|   | CARES Act<br>(March 2020) | COVID Response<br>& Relief Act<br>(December 2020) | American Rescue<br>Plan Act<br>(March 2021) |
|---|---------------------------|---|---|
| Education Total                                     | \$30.7 billion            | \$82 billion                                      | \$168 billion                               |
| K-12  | \$13.2 billion            | \$54 billion                                      | \$126 billion                               |
| Higher Education                                    | \$14 billion              | \$22 billion                                      | \$40 billion                                |
| Governor's<br>Emergency<br>Education Relief<br>Fund | \$3 billion               | \$4 billion                                       | \$2.7 billion                               |
| SEAs and LEAs<br>must <b>obligate<br/>funds by:</b> | September 30,<br>2022     | <b>September 30,<br/>2023</b>                     | <b>September 30,<br/>2024</b>               |



## ESSER Funding examples to support school-based Medicaid

- Dedicated staff to coordinate Medicaid programs at every level
- A robust, transparent policy ecosystem--including research, guidance documents, and policy manuals
- 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.



# Bipartisan Safer Communities Act (BSCA) Stronger Connections Grant Program

## Funding Allocation to State Educational Agencies

|                |               |
|----------------|---------------|
| Arizona        | \$20,826,927  |
| California     | \$119,828,943 |
| Delaware       | \$4,833,025   |
| Georgia        | \$33,444,267  |
| Illinois       | \$40,627,885  |
| Maryland       | \$16,990,815  |
| Massachusetts  | \$15,074,006  |
| Minnesota      | \$10,481,264  |
| New Hampshire  | \$4,833,025   |
| New Jersey     | \$20,905,551  |
| New York       | \$72,522,705  |
| North Carolina | \$29,367,638  |
| North Dakota   | \$4,833,025   |
| Pennsylvania   | \$41,754,741  |



Funds are available  
for obligation by  
SEAs and LEAs  
through  
September 30,  
2026.

[BSCA Stronger Connections FAQ](#)



# BIPARTISAN SAFER COMMUNITIES ACT

## INCREASED FUNDING FOR SCHOOLS

*Invests in programs to expand mental health and supportive services in schools, including: early identification and intervention programs, school-based mental health and wrap-around services, improvements to school-wide learning conditions, and school safety.*

- **School Based Mental Health Services and Staff:** Provides \$500 million through the School Based Mental Health Services Grant Program to increase the number of qualified mental health service providers that provide school based mental health services to students in school districts with demonstrated need.
- **Training and Pipeline Development for School Based Mental Health Staff:** Provides \$500 million in funding to the School Based Mental Health Service Professionals Demonstration Grant. This money will help train and diversify the pipeline of school counselors, school social workers, and school psychologists.
- **Improving Conditions for Student Learning:** Provides \$1 billion in funding through Title IV-A to support a variety of activities to improve conditions for student learning, including developing positive school climates through evidence-based practices.
- **Out of School Programs:** Provides \$50 million in funding to the 21st Century Community Learning Centers program, which funds extracurricular, after school and summer programs, with a focus of new funding to target programs for older youth.
- **School Safety:** Provides \$300 million in funding through the STOP School Violence Act to institute safety measures in and around schools, support school violence prevention efforts and provide training to school personnel and students. Codifies the SchoolSafety.gov clearinghouse, which provides evidence-based resources to improve school safety. Prohibits use of funds under the Elementary and Secondary Education Act to train or equip any person with dangerous weapons in schools.

# Funding SMH (BSCA)



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REPORT

OCT 26, 2022

## How To Make Schools Safer Without Additional Physical Security Measures

The newly enacted Bipartisan Safer Communities Act can help schools and districts create safer learning environments without resorting to implementing measures that harden schools.

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# White House Toolkit: Federal Resources to Support Community Schools (2023)

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# Federal and State School Mental Health Funding, Resources, Upcoming Opportunities

HHS and SAMHSA School-Based Mental Health Grant Funding Opportunities

<https://www.samhsa.gov/newsroom/press-announcements/20220901/hhs-announces-awarding-youth-mental-health-grants>

SAMHSA Grant Announcement National Child Traumatic Stress Initiative

<https://www.samhsa.gov/grants/grant-announcements/sm-23-010>

July Sec of Ed letter re funding SMH, using Medicaid etc

<https://www2.ed.gov/policy/gen/guid/secletter/220729.html>

MSDE [Coordinated Community Supports in Maryland Slides](#) (September 2022)

Maryland Consortium of Consolidated Community Supports

- [Meetings, Minutes, and Other Information](#)
- [Medicaid and School Mental Health Presentation Slides](#) (December 2022)

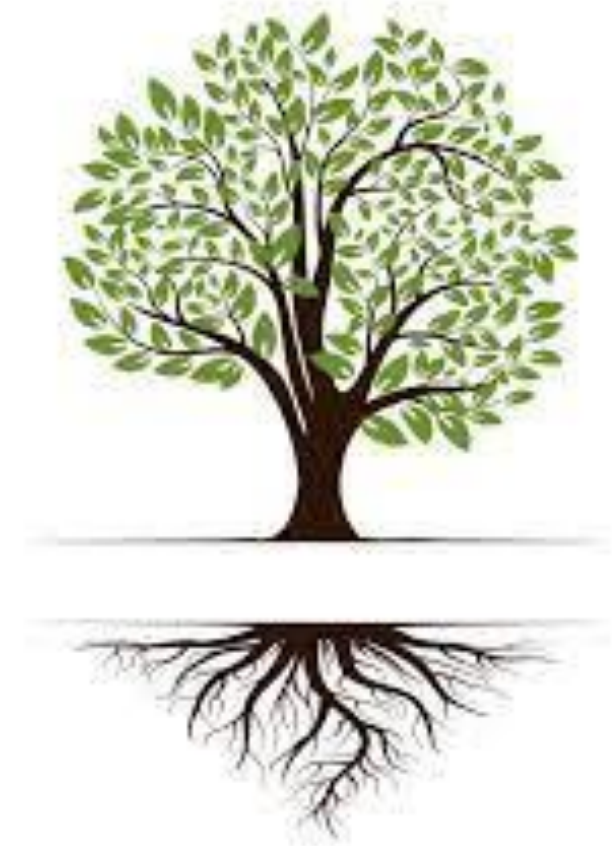






# SEA Funding Examples

- Data Systems
- Policy Considerations
- Academic Standards for SEL and MH
- MTSS Framework
- Cross-Sector Partnerships
- Professional Development
- Strengthen and Expand School-Based Medicaid
- Support LEA implementation
- Meaningful Engagement







# Funding Example- Data Systems

- Build structures to integrate mental health or school climate data into state reporting/accountability systems, (e.g., school performance frameworks or school improvement plans, ESSA-required state or school report cards





# Funding Example-Clinical Care

- Invest in statewide technology platforms that support student mental health and facilitate data collection on school mental health (e.g. telehealth, screening and assessment platforms).





# Funding Example- Training/PD

- Develop and implement statewide training programs for school staff, school health providers and other key stakeholders on key school mental health topics.





# LEA Funding Examples

- Building Capacity and Infrastructure to Implement the MTSS Framework
- Tier 1- Wellness Staff and Teams, Data Systems, Professional Development, Evidence-based Programming and Supports, Policy Considerations
- Tier 2/3- Evidence-based Programing, Mental Health Services





# Funding and Sustainability Innovation



- State team represented today
- Unique activities for school mental health sustainability
- Inspirational activities for school mental health sustainability
- Opportunities for school mental health sustainability
- Staffing at the following levels:
  - District Level
  - Regional Level
  - State Level



# Questions?







Break





# Breakout Instructions

You will be meeting with members from different State and districts

1. What are critical school mental health supports and services that you would like to sustain that need additional funding?
2. What are some avenues of funding you have explored/could explore further?
3. What barriers exist to supporting funding and sustainability in my district?



**Please select one person in your group to share out after the breakout**



# Share Out





# Strategic Planning

- Review the Sustainability Action Planning Worksheet





# Share Out

- Jam Board
- What are your next action steps to advance SMH sustainability in your state?





# Questions/Reflections





A hand-drawn graphic with the words "THANK YOU" in a colorful, stylized font. The word "THANK" is in uppercase letters with various colors (black, pink, orange, yellow, grey). The word "YOU" is in lowercase letters, with "y" in yellow, "o" in red with a white starburst, and "u" in teal. The background is a light pink square.

THANK  
YOU

- Please reach out if you have questions!
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