



School-Based Behavioral Health: Conditions for Success in School Sites

- Adequate staffing and support**
 - There is an existing Site-Based Behavioral Health (i.e., MTSS, SBIT, etc.) team or willingness and resources to implement a Site-Based Behavioral Health team.
 - The team meets regularly to review referrals and data. (i.e., Weekly)
 - There is a dedicated, physically appropriate space for delivering confidential services and support.
- Training to address student mental health in schools**
 - Mental health literacy training is included in staff professional development
 - Mental health promotion support to increase student mental health literacy (Tier 1)
 - Mental health providers are provided additional training or are allowed to obtain additional training to improve their capacity to provide mental health services.
- Ensure Sustainability**
 - There are opportunities for blended funding and resources to support all three MTSS tiers of intervention for all students.
 - Funding resources are matched to identified needs, and dollars are designated based on a review of demographics and gaps in the service array. (Tip: consider needs assessment, workforce, and intervention array).
- Collaboration and teaming**
 - The site administrator (principal) has committed to participate and has designated time to support the plan as the lead administrative contact or appoints another committed administrator (i.e., a Vice-principal with decision-making authority) as the lead.
 - School sites have regularly scheduled integration meetings with other health-related resources such as community mental health providers or are willing to work to develop such partnerships.
 - The site-based team works with teachers, families, and the community to support student concerns.
- Community health/mental health and other partners**
 - Partner providers have a regular and frequent presence at the site.
 - At schools where an outside clinician is providing clinical services, an MOU is in place that outlines how that provider will develop plans of care with the MTSS or other team.
 - The school-based behavioral health system has a clear referral pathway that effectively links schools and health care providers. Two-way communication is continued after referral when possible.
- Data-driven decision-making**

- A baseline needs assessment has been done, and action steps to resolve gaps are underway.
- Periodic, scheduled universal screenings are in place to identify possible student mental health concerns.
- Targeted and Individual screeners and assessments are provided to students identified with the universal screenings.
- Behavior, attendance, and grades are reviewed and considered part of the data-driven decision-making process.
- Progress monitoring is regularly occurring with the discussion of the data.
- Multi-tiered system of supports**
 - A referral process is developed using the MTSS framework, data-informed decisions, and CASEL SEL Competencies.
 - Evidence-based services and supports are identified to provide early intervention and treatment at Tiers 2-3.
- Cultural responsiveness and equity**
 - Programs and services are culturally informed based on the population and needs of the families and youth.
 - Barriers to family engagement have been identified, and a plan to help overcome them has been developed.
- Youth and Families**
 - There is a stated plan for how the school-based behavioral health team will connect with youth and family voices.
 - Regular communication with families includes educational resources regarding consent and their role in successful behavioral health programs and services.
 - Consent to bill
 - Consent to treat
 - Consent to share information with referral sources
 - Set office hours to allow parents to learn more about School-Based Behavioral Health
 - Communicate the availability of School-Based Behavioral Health services to families and youth.
 - Regularly update families and youth on how their questions, thoughts, opinions, and concerns are being addressed.