

Element Detail 4b FULL COMMISSION

SB 1265 Expanded Task: As the Commission on Innovation and Excellence in Education continues its work on a final report, the Commission should continue to evaluate the need for additional student behavioral health and other wraparound services. The Commission also should consider and include recommendations in the final report regarding the need for additional behavioral health and wraparound services in local school systems and whether and how funding should be provided to local school systems to support and expand access to these services.

Element: Screen, identify, and treat the behavioral health needs of students in a coordinated and trauma informed manner.

Design Assumptions:

1. Dedicated staff at MSDE responsible for close collaboration with other youth-serving agencies to establish shared goals, processes to collect and share data and to identify ways to leverage and blend funding to support school behavioral health in schools. Dedicated staff at MSDE to coordinate with school behavioral health coordinator and staff in LEAs
2. Each LEA shall have at least one licensed behavioral health coordinator dedicated to support school behavioral health with a Master's Degree and behavioral health training and experience in schools (mental health coordinator in each LEA required under SB 1265 of the 2018 Session)
3. Staff in all schools will be trained to recognize student behavioral health issues, as well as students experiencing trauma or violence outside of school and how to refer students to behavioral health services
4. Schools to develop and implement systematic screening to identify students with behavioral health needs using an evidence-based measurement approach
5. School-Based Health Centers (SBHC) should be established or enhanced in schools with high poverty rates.
6. Scaling of school behavioral health service availability to ensure that all students have some exposure and access to behavioral health programming and services and to ensure that schools without an SBHC will organize response plans to connect all students to community-partnered school based or community behavioral health and other services, as needed
7. Schools will be required to develop partnerships with available community resources and experts in order to develop an active and comprehensive referral

network for community-partnered school based or community behavioral health services

8. School staff will also be trained in protocols for how to support any student needing these services while he/she is enrolled in school

Implementation Considerations:

1. Complexity of funding streams that currently exist through federal grants, state grants, local dollars, nonprofit grants and support, commercial insurance reimbursement and Medicaid reimbursement
2. Current funding streams viewed as inadequate
3. Current lack of capacity and access in many communities to behavioral health services and behavioral health providers
4. Need to identify adequate staffing ratios to support student behavioral health including staffing of psychologists, social workers, professional counselors, occupational therapists (IDEA and other educational funds can help support these staff members)
5. Services needed include activities that cannot be billed to commercial insurance or Medicaid including, prevention, training, case management, behavioral health promotion, teacher consultation and team meetings
6. Needs assessment for SBHCs is needed to determine the need to expand capacity through existing SBHCs and new SBHCs and the amount of funding needed to expand based on the assessment
7. Parent/guardian engagement necessary to reduce stigma, permit access for students to services, enhance parenting skills and improve social, emotional and educational outcomes for students