



E6: Partnering with States to Improve Youth Mental Health: Lessons Learned from a Six-Month Learning Collaborative

July 2, 2024: 9:00am-10:15am



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Today's Speakers



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School-Based Health Alliance

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School-Based Health Alliance

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Minnesota School-Based Health Alliance

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Maryland Department of Health



Learning Objective

The participant will be able to learn at least three strategies to support youth mental health in SBHCs at the state and/or local level.

The participant will complete a SWOT analysis to determine how to best support youth mental health in their current role/setting.



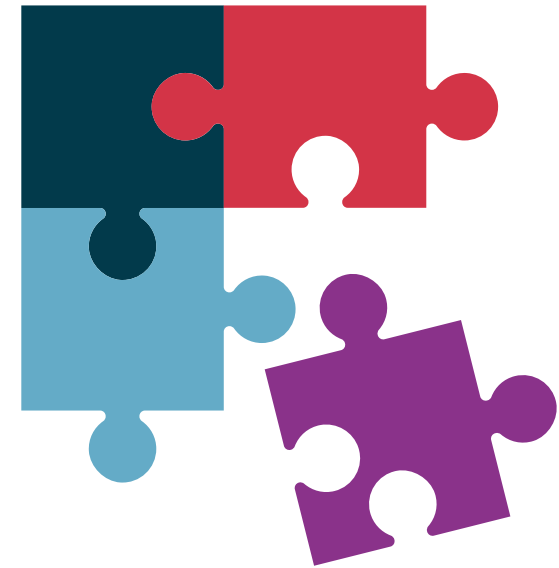
Agenda

- Welcome and Introduction
- Today's Speakers
- Partnership with the National Council for Mental Wellbeing
- Learning Collaborative Highlights
- Minnesota School-Based Health Alliance
- Maryland Department of Health
- Discussion Questions
- Wrap-up



Partnership between the School-Based Health Alliance (SBHA) & the National Council for Mental Wellbeing (NCMW)

- Partnership with the NCMW Center of Excellence for Integrated Health Solutions since 2020
- Continuation of efforts to support states in building capacity for mental health services at state and local levels
- **Together we work to:**
 - Ensure equitable access to high-quality mental health services
 - Promote mental well-being as a core component of comprehensive health care
 - Address the complexities of integrated care within various health, behavioral health, and community settings



Partnering with States to Improve Youth Mental Health LC

Overview

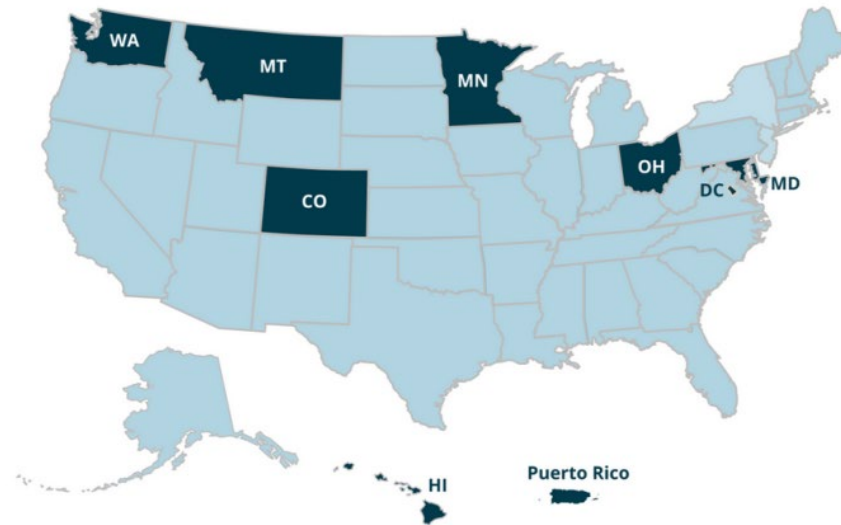
- **6-Month Learning Collaborative with 9 States**
- **Main Objectives for States:**
 - Identify current resources and infrastructure
 - Describe barriers and challenges
 - Establish connections with state leaders
- **Session Structure:**
 - One 60-minute Welcome Session and five 90-minute Content Sessions
 - 5 key topic areas
 - Content introduction -> didactic presentation -> breakout rooms -> group share-out



Partnering with States to Improve Youth Mental Health LC

Participating States & Territories

State Participants



Partnering with States to Improve Youth Mental Health LC

Key Learnings

- **Holistic Integration is Integral:**
 - Enhance mental health services with trauma-formed care
 - Foster partnerships across agencies and organizations
- **Community Involvement is Crucial:**
 - Reduce stigma with education and awareness campaigns
 - Tailor programs to meet local community needs



Partnering with States to Improve Youth Mental Health LC

Key Learnings Continued

- **Sustained Communication and Collaboration is Key:**
 - Maintain regular updates through shared platforms
 - Hold ongoing events to strengthen partnerships
- **Leveraging Existing Resources Enhances Impact:**
 - Utilize state and national initiatives as foundational points
 - Integrate current projects into collaborative efforts



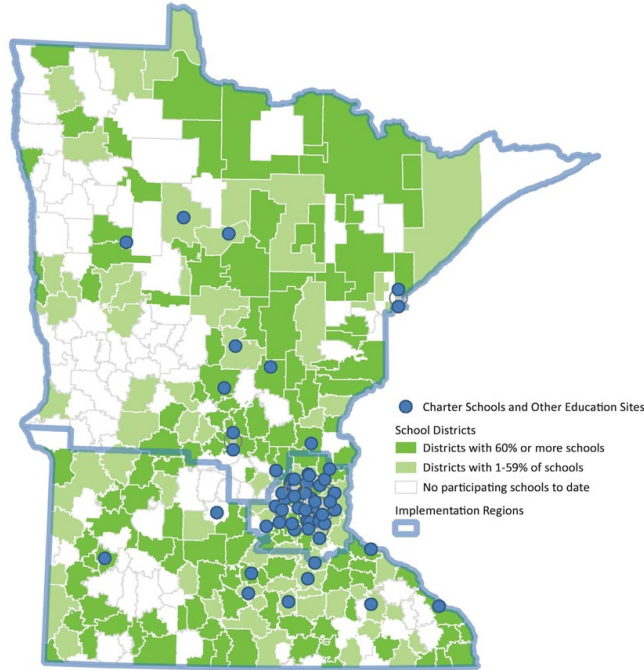


Minnesota School-Based Health Alliance



MN SBHA

Mental Health Overview



PBIS in MN Schools, 2024

The MN Student Survey demonstrates:

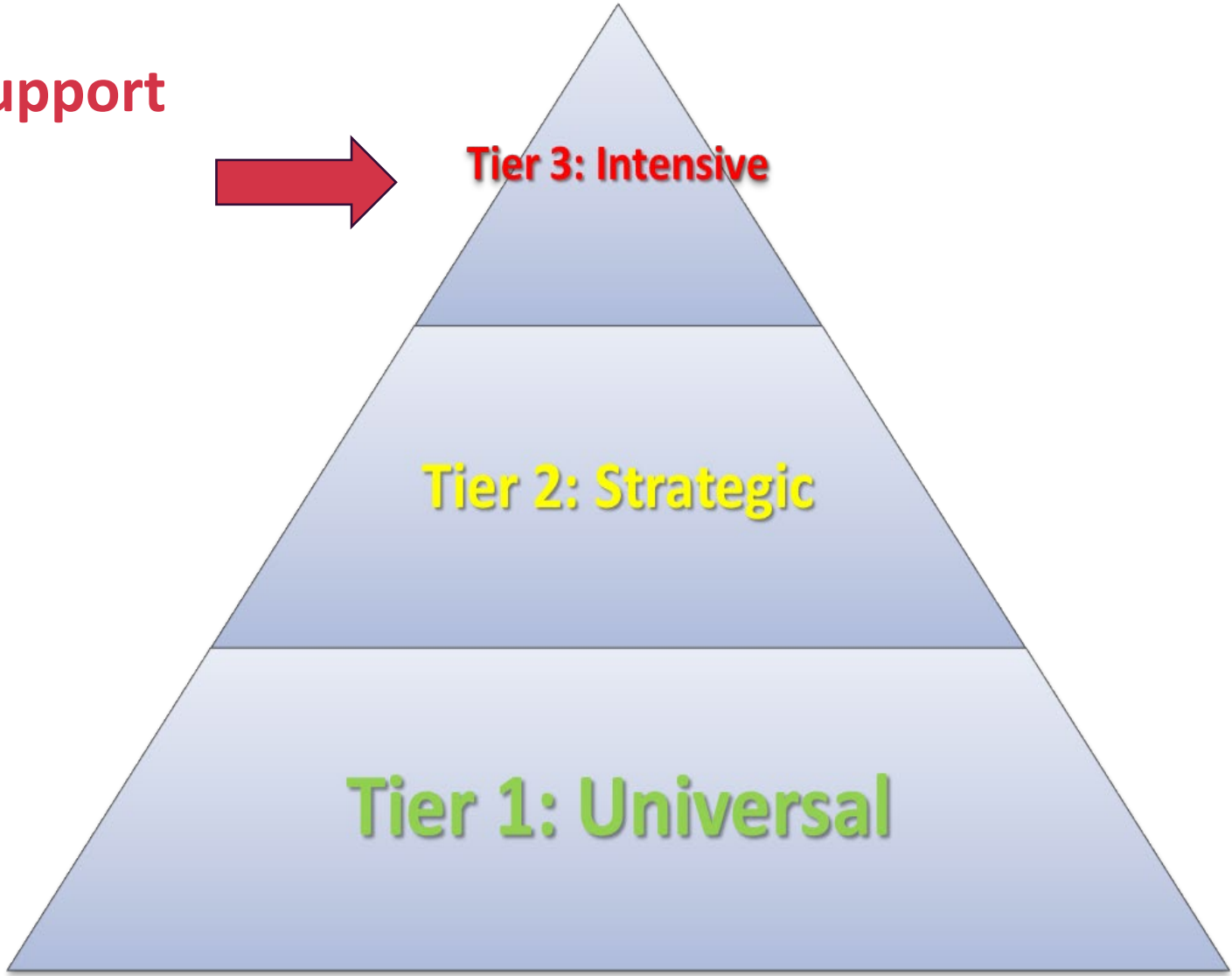
- 18% of students surveyed in 2016 and **33%** in 2022 reported long-term mental health problems
- Positive factors for mental well-being are decreasing, with significant disparities across gender, race and childhood trauma

School-level care models include:

- **PBIS** occurs in 57% of school districts, 40% of schools, engaging 47% of students
- **School-linked mental health services** are available in 78/87 of counties, 83% of school districts, and 43% of schools
- **School-based health centers** established in 9/87 Counties, 2% of school districts, and 85% provide BH

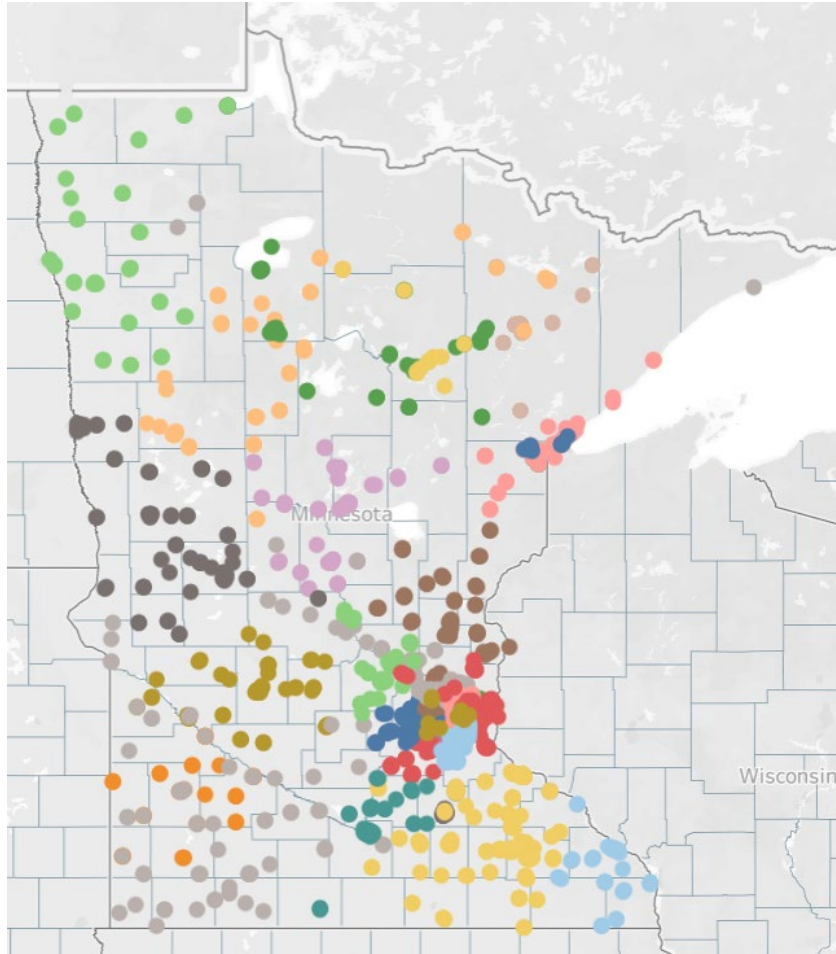
MN SBHA

Multi-Tiered Systems of Support

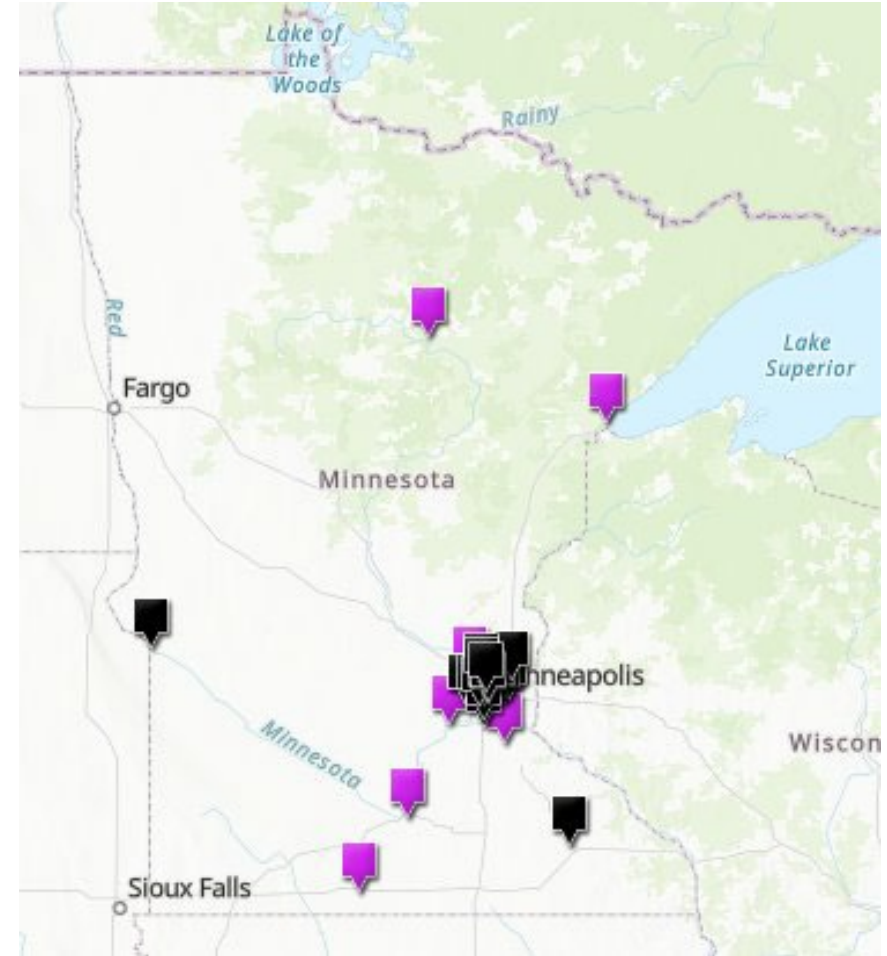


SBHCs and School-Linked Behavioral Health in Minnesota

School-Linked Behavioral Health, 2023



School-Based Health Centers, 2023



Minnesota SBHA

Collaboration & Implementation

- Department of Health, State Program Office
- Department of Education, Office of Suicide Prevention
- Department of Human Services, Mental Health Division
- FQHC School-Based Health Centers
- Local Public Health / County SHIP
- Midwest Center for School Mental Health
- MN School-Based Health Alliance
- Etc...

What's going on in schools?

- World's Best Work Force (WBWF)
- Every Student Succeeds Act (ESSA)
- Olmsted Plan
- Alternative Delivery of Specialized Instructional Services (ADSIS)
- School Linked Mental Health Grants (SLMH)
- Statewide Assessments
- Positive Behavioral Interventions and Supports (PBIS)
- Multi-Tiered Systems of Supports (MTSS)
- Minnesota Student Survey (MSS)
- Adverse Childhood Experiences (ACE) & Trauma Informed Practices
- ETC.....



Minnesota SBHA

Barriers

Conflicting priorities vs unified strategy

Limited, braided funding

Smaller network of FQHCs

Local control state

Rapidly expanding Tier 3

Mental health workforce shortage

Minnesota SBHA

Strengths

Alliance and State Program Office

State funding for school-linked and school-based healthcare

Cooperating agencies

19 CCBHCs with wide geographic distribution

School-health positions in some local public health offices



Minnesota SBHA: Future Strategies: What's Next



Collaboration will continue



SBHCs will be integrated into state strategies and evaluation



Collaborators will promote SBHC Model



We are investigating how CCBHCs as sponsoring healthcare organizations



Maryland Department of Health



Maryland DOH

Joining the Learning Collaborative



New team /program as of July 2022

Opportunity to identify key players impacting the implementation and delivery of services

Explore other state delivery models

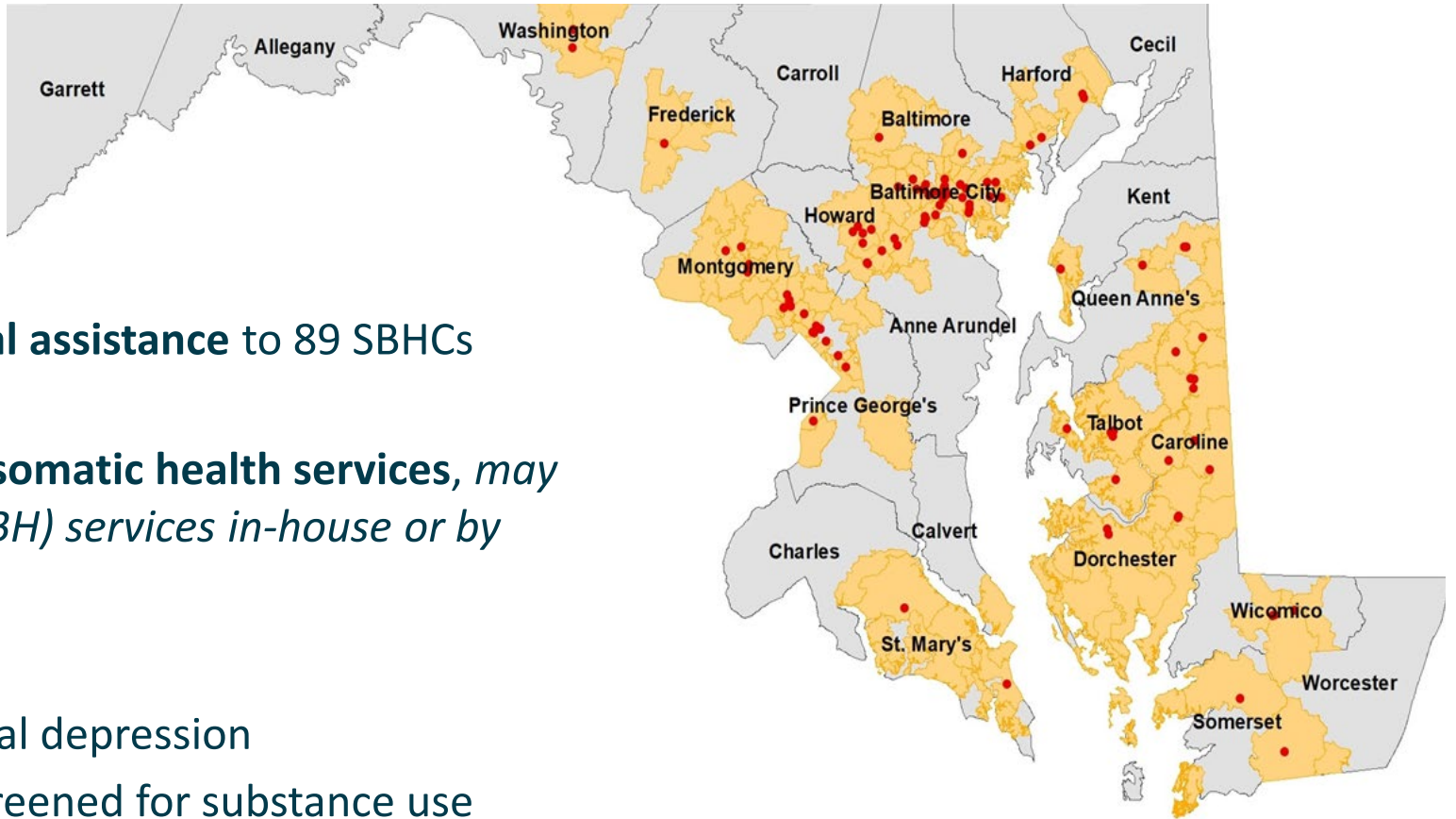
Consider additional data metrics

Ideas for innovation



Maryland DOH

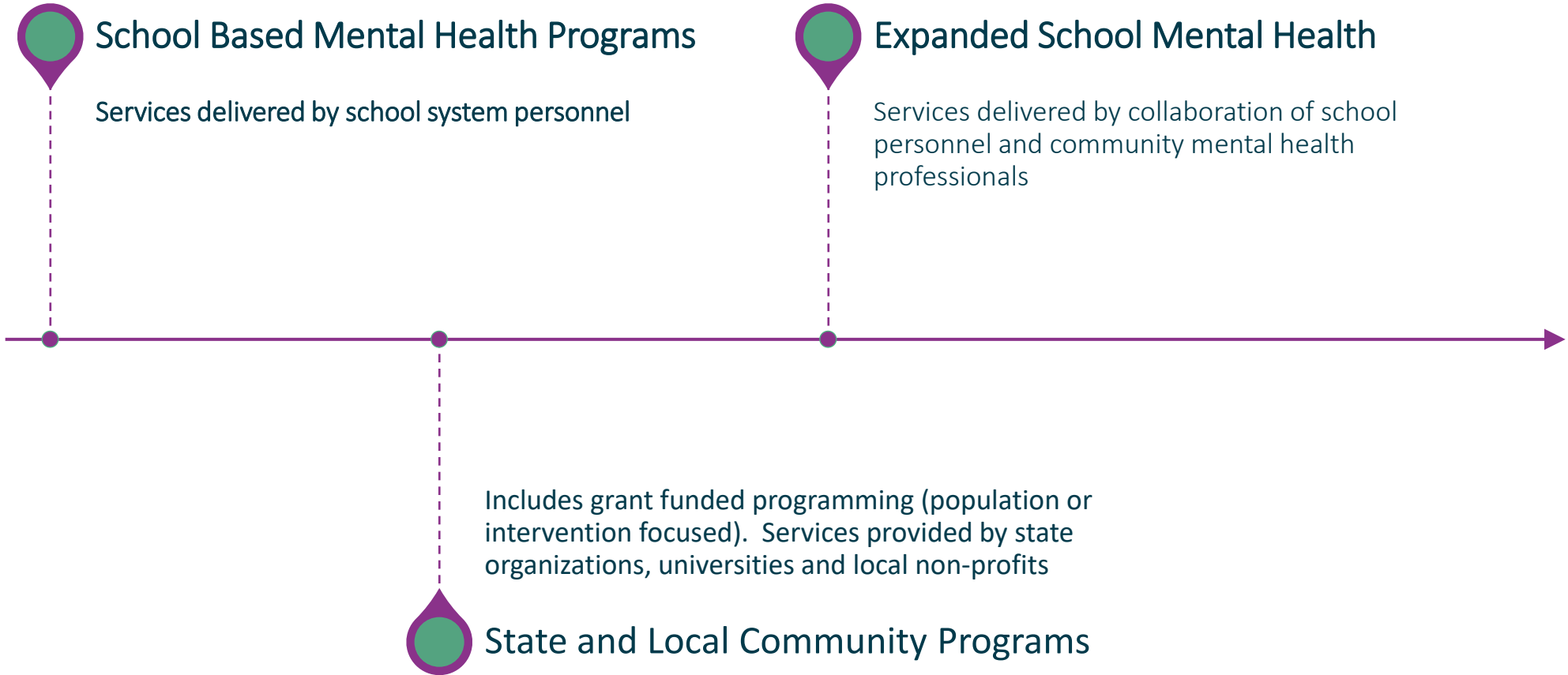
SBHC Program Overview



- Program provides grants and technical assistance to 89 SBHCs across 16 jurisdictions
- Maryland SBHCs required to provide somatic health services, *may optionally provide behavioral health (BH) services in-house or by referral*
- 2022-2023 program data showed:
 - Half of all sites screened for clinical depression
 - About 2/3 of all sites routinely screened for substance use
 - 10/24 jurisdictions provided in-house BH services – 15,745 visits provided
 - 1,304 visits were for substance misuse or abuse

Maryland DOH

Mental Health Overview



Maryland DOH

Mental Health Overview



Increased annual education funding by \$3.8 billion over next 10 years

Added \$6.5 million to support Maryland SBHCs

Strengthened coordinated supports and interventions for pre-K-12

Established the Consortium for Coordinated Supports responsible for administering grants toward expansion of behavioral health in schools.

Maryland DOH

Mental Health Overview



Consortium for Coordinated Supports

- Uses hub/spoke model
- (2024) provided \$111 million to state and local partners to implement BH services across all 24 jurisdictions
- Centralized approach to collecting BH metrics



In/After School Expansion of Services & Programs

- Individual / Group Therapy, Diagnosis and Treatment, Crisis Intervention, Wrap Around Care Coordination
- Suicide Prevention, Strengthening Families Program
- School wide trainings for staff (Trauma informed care, SEL education)
- Mental Health Consultation Services for School Staff and Families, Parent coaching



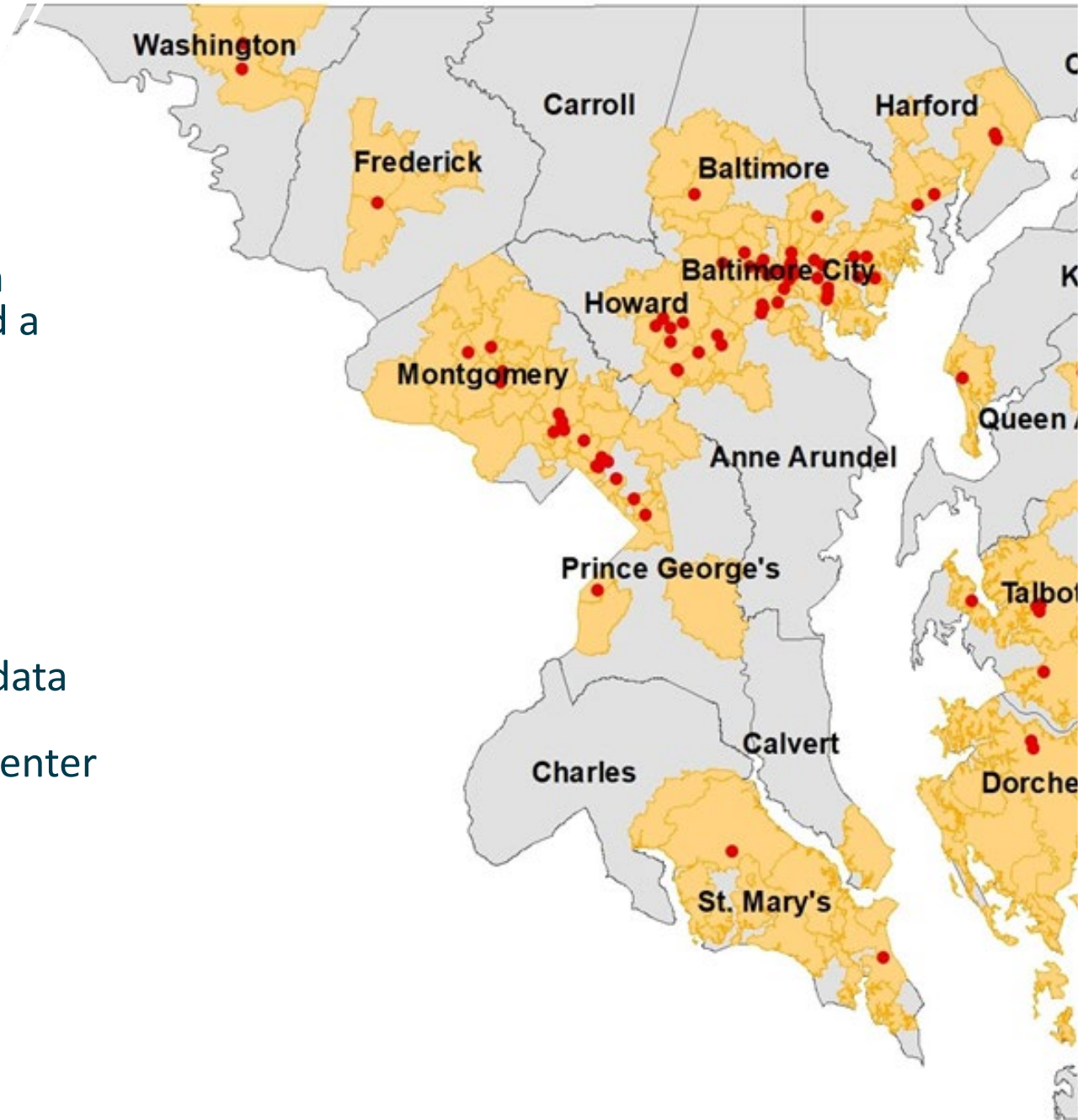
Maryland SBHCs

- 42 (out of 89) SBHCs are recipients of Consortium funding!
- Potential opportunity for remaining SBHCs to link in with schools where services will be provided

Maryland DOH

Strengths

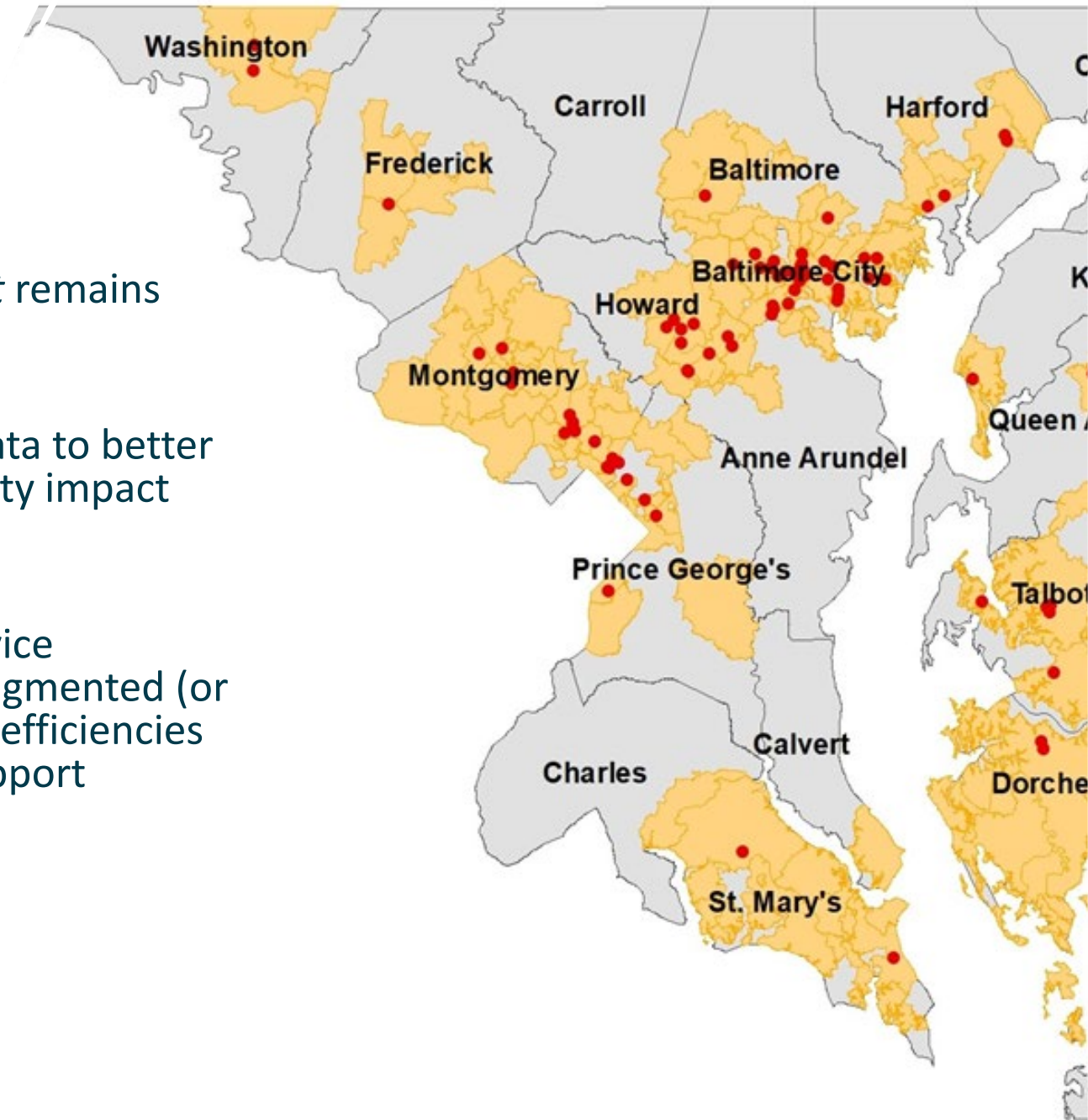
- State commitment to meeting the behavioral health needs of Maryland's youth with protected funding and a plan in place
- Strength in number of organizations/agencies that provide BH services and grants/technical assistance to schools and Marylanders across all counties
- Consortium to also serve as a hub for standardized data collection on metrics and outcomes. Will additionally provide training to all grantees through the National Center for School Mental Health



Maryland DOH

Barriers

- Collection of behavioral health data bolstered *but* remains somewhat fragmented
- On-going efforts needed to collate all pieces of data to better share the larger narrative of school and community impact
- No single organization or entity in charge of all organizations/agencies contributing to BH service provisions. Can lead to duplication of services, fragmented (or no) communication between agencies, funding inefficiencies or inequalities and overall lack of coordinated support for students



Maryland Future Strategies: What's Next



Increase SBHC program linkages with key drivers of behavioral health services



Through new partnerships, develop shared data agreements



Bolster commitment to trauma informed SBHC environments/ services through continuous training







Partner with students and families to develop next 5-year plan for supporting student's behavioral health needs

Discussion Questions



SWOT Discussion & Activity

	What strengths does your organization or state have that support mental health initiatives in school-based health centers? (e.g., What is going well? What helps organization or state be successful?)	S
	What weaknesses does your organization or state have that inhibit supporting mental health initiatives in school-based health centers? (e.g., What is lacking? What makes it difficult to be successful?)	W
	What opportunities (current or upcoming) does your organization or state have that support mental health initiatives in school-based health centers? (e.g., What infrastructure exists (or will exist) that could make things more possible?)	O
	What threats (or “showstoppers”) could prevent your organization or state from successfully supporting mental health initiatives in SBHCs? (e.g., What would make it impossible? What would completely stop your process?)	T

SWOT Debrief



Strengths: What **strengths** does your organization or state have that supports mental health initiatives in school-based health centers? (e.g., What is going well? What helps your state be successful?)



Weaknesses: What **weaknesses** does your organization or state have that inhibit supporting mental health initiatives in school-based health centers? (e.g., What is lacking? What makes it difficult to be successful?)



Opportunities: What **opportunities** (current or upcoming) does your organization or state have that support mental health initiatives in school-based health centers? (e.g., What infrastructure exists (or will exist) that could make things more possible?)



Threats: What **threats** (or “showstoppers”) could prevent your organization state from successfully supporting mental health initiatives in SBHCs? (e.g., What would make it impossible? What would completely stop your process?)

Wrap-Up and Q&A





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