

Jeana Bracey, PhD

Child Health and Development Institute

**Rebekah Behan** 

Child Health and Development Institute



### **OVERVIEW**

As schools emerge from the COVID-19 pandemic, educators are looking for creative and lasting solutions to address the growing mental health needs of students.

Unfortunately, many schools lack the necessary infrastructure and support for addressing mental health and providing or connecting students with appropriate services. Connecticut shows promise in helping schools build the capacity to respond to the rising demands.

For example, Connecticut has established policy and system priorities that support infrastructure for school mental health services to benefit students' academic, social, emotional, and behavioral outcomes.<sup>1</sup> Several organizations, such as CHDI, work with school districts to help implement these goals and support student mental health initiatives. CHDI helps support state agencies and policymakers to advance a number of statewide initiatives by bridging policy into practice with technical assistance and support offered at no cost to districts. Yet opportunities to address significant gaps in the system remain. Specifically, the State lacks a strategic

plan to support comprehensive school mental health implementation and does not have a statewide data system or coordinating entity to guide and monitor systems change.

The SHAPE System provides a structure for assessing **Comprehensive School Mental Health quality and** sustainability at the state, district, and school levels.

SHAPE is a public-access, web-based platform hosted by the National Center for School Mental Health (NCSMH) at the University of Maryland that offers a workspace with targeted resources to support school mental health quality improvement.<sup>2</sup> It is a valuable tool that schools, districts, and states can use to assess, plan, and monitor interventions and policies that are critical for a high-quality and sustainable school mental health system. Findings from The SHAPE System can guide state leaders and stakeholders to help advance the quality of school mental health systems.

This Policy Brief provides strategies for aligning statewide policies using The SHAPE System to improve the assessment and monitoring of school mental health infrastructure and outcomes for districts and schools.

### THE SHAPE SYSTEM PROVIDES THREE TOOLS TO ASSESS POLICY AT THE STATE AND DISTRICT/SCHOOL LEVELS:



### State **Mental Health Policy Map**

- Links to key state-level policies and practices across 15 domains related to school mental health
- Map allows decision makers, state and local leaders, and stakeholders to understand the school mental health landscape in Connecticut



### **State School Mental Health Profile**

- Provide **state** leaders the opportunity to view the landscape of school mental health
- Information may be used to guide state and district technical assistance and quality improvement support efforts



### **School Mental Health Quality Assessment**

- Assesses comprehensiveness of school mental health system at a district- or school-level
- Identifies priority areas for improvement and strategic planning



### POLICY AND INFRASTRUCTURE ARE KEY TO COORDINATING SYSTEMS STRENGTHS

A Comprehensive School Mental Health (CSMH) systems approach is critical for helping schools and districts meet students' needs across the multi-tiered system of services and supports (MTSS) by addressing policy, implementation of evidence-based practices, equitable access to services, and data and quality improvement strategies to result in positive outcomes for students. MTSS is a framework that provides a continuum of promotion/prevention, early intervention, and treatment services to identify and address the academic and behavioral health needs of the whole school population, with targeted supports for those with identified and intensive needs.

Connecticut recently ranked eighth in a national report card assessing state policies that support school mental health,<sup>3</sup> demonstrating strengths in several areas related to mental health education, healthy school climate, and school-family-community partnership. For example, one noted strength is state legislation from 2021 that requires K-12 instruction in mental health, including suicide prevention. In addition, the State has enacted several policies that support and promote anti-bullying, inclusive learning environments, alternatives to exclusionary discipline, and that require local boards of education to allow students up to two mental health days per year as excused absences. The report also highlighted many areas of opportunity, including needed expansions to the school mental health workforce, enhanced teacher and staff training in behavioral health, improved data on student well-being to inform service needs, and expanded funding to sustain effective practices.

PA 22-47 is another example of a positive step toward improved school mental health policy. Passed in 2022, the legislation addresses children's behavioral health and demonstrates a commitment to improving access, quality, and outcomes for Connecticut's children by strengthening school mental health supports. School mental health is also a component of Connecticut's Children's Behavioral Health Plan, enacted in 2014. which continues to inform systems transformation. The Trauma-Informed School Mental Health Task Force, a statewide workgroup including stakeholder representation from state agencies, behavioral health providers, and families, guides and supports systems efforts and promotes the ongoing use of SHAPE at the state-level to advance CSMH policy.

### SCHOOL MENTAL HEALTH SUPPORTS IN CONNECTICUT

Several organizations assist state agencies in implementing policy and systems-level guidance through technical assistance, training, and data support to schools and districts across multiple initiatives for:

- District-Level Assessment, Planning, and Implementation
- Staff Training in Mental Health and Crisis Supports
- Social-Emotional Learning (SEL) and Mental Health Promotion/ Prevention Programs
- School Climate and Safety Interventions
- School-Based Diversion and Restorative Practices
- Screening for Mental Health, Trauma, Substance Use, and Suicidality
- Behavioral Health Treatment
- Connection to Mobile Crisis and Community-Based Care
- Student Peer Support Programs
- Staff Wellness
- Family Engagement

Despite these strengths at the state-level, districts and schools struggle to identify standards and indicators to assess mental health and well-being and have difficulty implementing coordinated and equitable school mental health services and supports at the local level.

State agencies involved in implementing legislation to support school mental health need to invest in the infrastructure required to support system-level improvements, such as data systems, financing supports, and a statewide coordinating center to effectively implement, monitor, and sustain these enhancements.

Having these supports in place will significantly increase the chances of achieving widespread, consistent, and high-quality implementation of interventions across schools and districts, which will achieve positive student outcomes.

## CONNECTICUT'S SHAPE PROFILE OFFERS OPPORTUNITIES FOR IMPROVEMENT

The data collected through SHAPE, including the School Mental Health State Policy Map and the State School Mental Health Profile, help districts and states identify strengths, gaps, and areas for improvement across several domains, including policies, partnerships, practices, and implementation supports. The 2022 Connecticut State Profile assessment highlighted that the State lacks policies in the following areas: Multi-Tiered Systems of Supports (MTSS), staff wellness, substance use education for caregivers/families, and data collection/sharing. In addition, the tool provided several follow-up questions to guide the ongoing development of state-level policies to support CSMH, including:

- 1. What funding sources are available and allocated?
- 2. Who is overseeing the programming and monitoring outcomes?
- 3. Which schools are utilizing a complete service array?
- 4. Where is the accountability (documentation), and what interventions/activities are being done?

While these results and follow-up questions can be helpful to continue guiding the development of statewide policy and systems, a process for collecting this data annually, tracking progress, and engaging stakeholders in the process currently needs to be created. For example, the <a href="State's Accountability Index">State's Accountability Index</a> does not currently include any indicators specific to mental health, which would help to gauge schools' progress toward meeting students' needs.

Another key component to advancing statewide systems to support children's behavioral health is the use of data to drive decision-making, improve quality, and assess outcomes. Connecticut benefits from federal and state funding to support the implementation of school mental health programs and services; however, limited information is available to assess and monitor the effectiveness of these efforts or the impact on student and staff outcomes. Connecticut needs a coordinated and comprehensive data system to establish and monitor behavioral health indicators, which will allow the State to measure progress and outcomes more effectively at all levels, including districts, schools, staff, and students. Improved information sharing across systems partners,



schools, and provider agencies, and a common data collection framework and reporting dashboard, are needed to monitor and improve implementation quality and ensure enhanced and equitable outcomes over time.

# CONNECTICUT SCHOOLS USE THE SHAPE SYSTEM TO COORDINATE THEIR APPROACH TO STUDENT MENTAL HEALTH

In addition to providing a needs assessment structure and targeted resources, The SHAPE System also houses the National School Mental Health Census to count and track state-by-state adherence to CSMH policies and practices, and the School Mental Health Quality Assessment (SMH-QA), the primary tool used at the district and individual school level.

## To date, fifty-three school districts and 129 individual schools in Connecticut have used SHAPE...

CHDI, with funding support from the Connecticut Department of Children and Families (DCF), the Connecticut State Department of Education (CSDE), and in partnership with the NCSMH, provides free technical assistance and support to any school or district utilizing SHAPE to help them access and complete the tool and to use the results for strategic planning and ongoing monitoring of system quality.

- 1 Teaming
- Needs Assessment and Resource Mapping
- **3** Mental Health Promotion (Tier 1)
- **Early Intervention and Treatment Services & Supports** (Tiers 2 & 3)
- **5** Screening
- (6) Funding and Sustainability
- 7 Impact

These measures are designed for team completion at the school- or district-level to document the school mental health system components, assess the comprehensiveness of a school mental health system, prioritize quality improvement efforts, and assess improvement over time.

### Utilizing The SHAPE System to better meet students' needs:

### **Connecticut's New London Public Schools district**

The most useful part of SHAPE is the opportunity to analyze the strengths and weaknesses of the mental health services/team in each building. It allows teams to connect on what has worked and where they want to grow together.

This creation of a common goal has helped build team cohesiveness and collaboration. We've utilized the information to drive mental health development in each building. In many cases, the goals have made lasting change.

### **CARRIE RIVERA**

LEAD SHAPE CHAMPION & ADMINISTRATOR
NEW LONDON PUBLIC SCHOOLS

New London is one of five districts in Connecticut that has achieved Gold Star status among each of their schools, representing the highest level of completion of all SHAPE domains.

## COORDINATION IS NEEDED TO LINK STATE POLICIES TO DISTRICT AND SCHOOL PRACTICES

To maximize the advantages of SHAPE, districts would benefit from the support of an external entity that can coordinate the work of assessing systems-level strengths and needs, as many schools continue to struggle to address the rising mental health needs of students. A coordinating center could be very effective in linking state policies to district and school practices and ensure that schools and districts can effectively move from focusing on individual student-level crises to systematically building capacity and implementing a robust MTSS approach. A statewide coordinating center would work collaboratively with partners across the education and behavioral health systems to administer

The SHAPE System, translate findings into full MTSS implementation, advance best- and evidence-based practices, and monitor data systems on implementation fidelity and student outcomes. The coordinating center would provide technical assistance and support for Medicaid billing and calculate performance-based incentives for schools meeting the established quality and outcome benchmarks. All of this school- and district-level information and data, in turn, could be reviewed at the state policy level to further inform system design and new investments. This feedback loop connecting school/district level implementation with statewide policy and system development is critical to a successful statewide school mental health approach.

### RECOMMENDATIONS

The following recommendations describe state-level policy and systems strategies to advance Comprehensive School Mental Health and improve outcomes for students.

- 1. Align efforts to support comprehensive statewide school mental health through policy enhancements and accountability.
  - State profile report recommendations suggest that Connecticut consider developing policies in areas identified as not currently in place or unknown, including a structure for coordination at the state-level, data-sharing, and integrated funding.
  - · The State Board of Education and legislators should work together to develop and enact standards for mental health and well-being and equity indicators to assess student-level outcomes that can, in turn, be monitored through a statewide data dashboard.
  - Monitor goals and action steps for accountability annually using the SHAPE State Strategic Planning Guide and The SHAPE System district- and school-level assessments. These activities should be embedded into the responsibilities of the Coordinating Center to maintain consistency, monitor reassessment, and document outcomes for all districts.

- 2. Support and sustain CSMH implementation through expanded and flexible funding and data monitoring.
  - · Performance-based incentives and flexible funding to support innovations should be allocated to districts making improvements to meet established standards and benchmarks for student mental health and to improve equity.
  - Medicaid reimbursement and special education funding should be leveraged to support enhancements to behavioral health infrastructure and service delivery in the school setting. For example, partnering with community-based provider agencies to provide reimbursable services can offset school personnel shortages and improve access to evidence-based practices.
  - Expand resources to support SHAPE utilization and reassessment, especially at the individual school-level.



- 3. Establish a Statewide Coordinating Center for School Mental Health in collaboration with the State Department of Education and the Department of Children and Families.
  - · The Coordinating Center would provide systemslevel infrastructure support, technical assistance, and quality improvement for the implementation of policies and practices to support students' social, emotional, and behavioral health needs at no cost to districts.
  - The Coordinating Center would link partners at the state and local levels, facilitate data feedback loops, collect and integrate SHAPE data into actionable implementation steps, and report out on progress.
- 4. Develop and implement a statewide data dashboard to support the State and districts in monitoring the implementation of CSMH and the impact of these services and supports on staff and students' well-being and academic achievement.
  - · Without good data about school mental health approaches and student outcomes, it is difficult to know where the gaps are, what is working, what is needed, and how to use limited funds most efficiently.
  - · The data dashboard could be developed and disseminated through the Statewide Coordinating Center for School Mental Health to drive systems improvements and sustainability, to include indicators to assess needs and resources, equity and disparities, availability of tiered services, screening practices and results, referral and linkage to services, fidelity to MTSS for both academic and behavioral interventions, and student outcomes.



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### **ABOUT CHDI**

The Child Health and Development Institute provides a bridge to better behavioral health and well-being for children, youth, and families. We collaborate with policymakers, providers, schools, and partners to advance system, practice, and policy solutions that result in equitable and optimal outcomes in Connecticut and beyond.

