

*You're Doing What?*

**Enhancing Mental Health Services at 130 Community Schools  
in 6 Months**

*Ready, Set, Go!*

**September 29, 2016**

**21st Annual School Mental Health Conference**

**Scott Bloom, LCSW-R**

**Director of School Mental Health Services**

**Marcie Bouchard, MS, ED**

**Assistant Director of School Mental Health Services**



Health

Department of  
Education

# Presenter's Disclosures

September 29, 2016  
21st Annual School Mental Health  
Conference

**There are no financial interests to disclose**



# Agenda

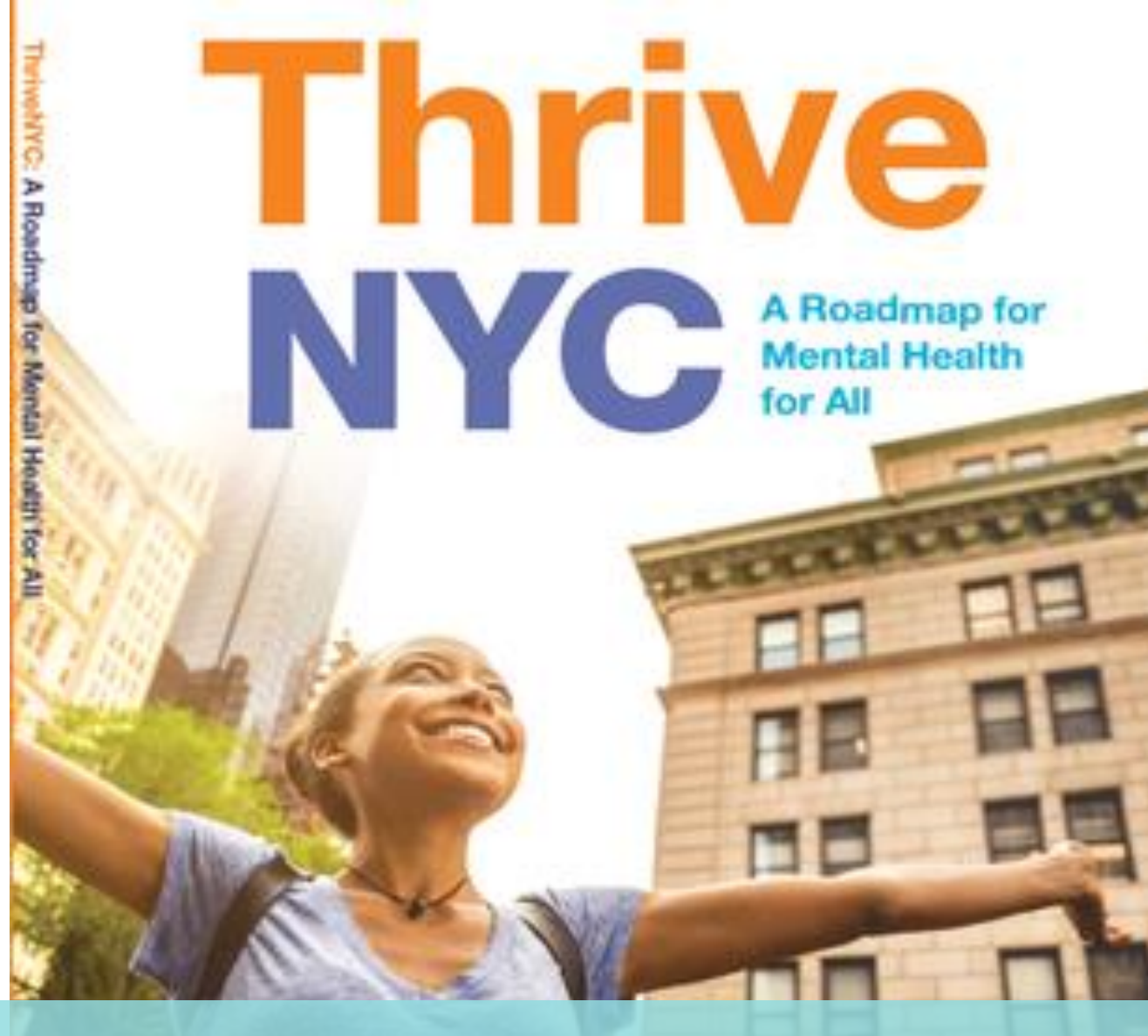
1. Welcome & Introductions
2. Thrive NYC
3. Community School Initiative
4. Mental Health in Community Schools
  1. Structure
  2. Protocol
  3. Process
5. Lessons Learned
6. Questions



ThriveNYC: A Roadmap for Mental Health for All

# Thrive NYC

A Roadmap for  
Mental Health  
for All



MENTAL HEALTH ROADMAP

#THRIVENYC



**Thrive NYC** is a major commitment to mental health, one that is tackling a problem that directly affects 20% of New Yorkers—in addition to all of the people in their lives— requires a population-wide response.

**Thrive NYC** will advance these principles in part through 54 targeted initiatives— representing an investment of \$850 million over four years—that together comprise an entirely new and more holistic approach to mental health in New York City, and set a foundation for taking on this public health challenge in the years ahead.

# NYC Community School Overview

- In 2014, the City announced two initiatives to transform a total of 128 public schools into Community Schools
- 45 of the 128 schools are supported through an attendance improvement and **drop out prevention (AIDP) grant**, and have to date, selected a Lead CBO Partner and implemented some programming
- 94 are supported through NYCDOE's School **Renewal Program**, which targets historically low performing schools
  - Note: 11 of the 94 are supported by AIDP and the Renewal Program
- ***This RFP solicits a CBO Lead “backbone” organization to partner with one or more of the remaining 83 Renewal Schools***

# Community Schools: Centers of Opportunity

- **Represent a strategy to organize resources and share leadership so that academics, social services and supports are integrated into the fabric of schools to help them better serve the needs of families.**
- **Align resources with vision and purpose resulting in improved student learning, stronger families and healthier communities.**

# Core Outcomes & Results

## Student-Level

- Increased Attendance & Student Engagement
- Connectedness to adults
- Development of Social and Emotional skills
- Improved academic performance



## School-Level

- Improved school culture
- Families are more actively engaged in children's education
- Seamless service delivery with partner organizations

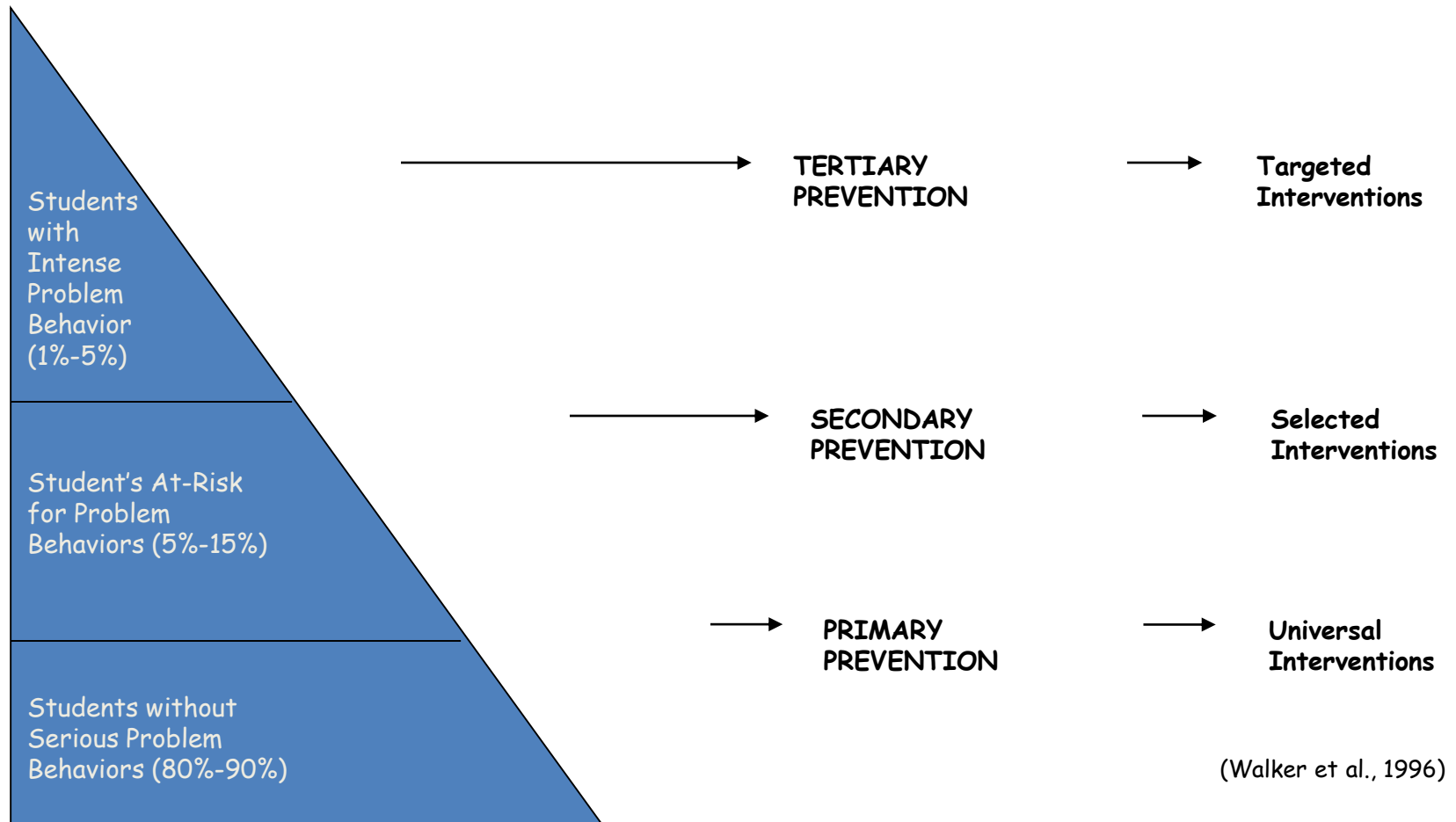




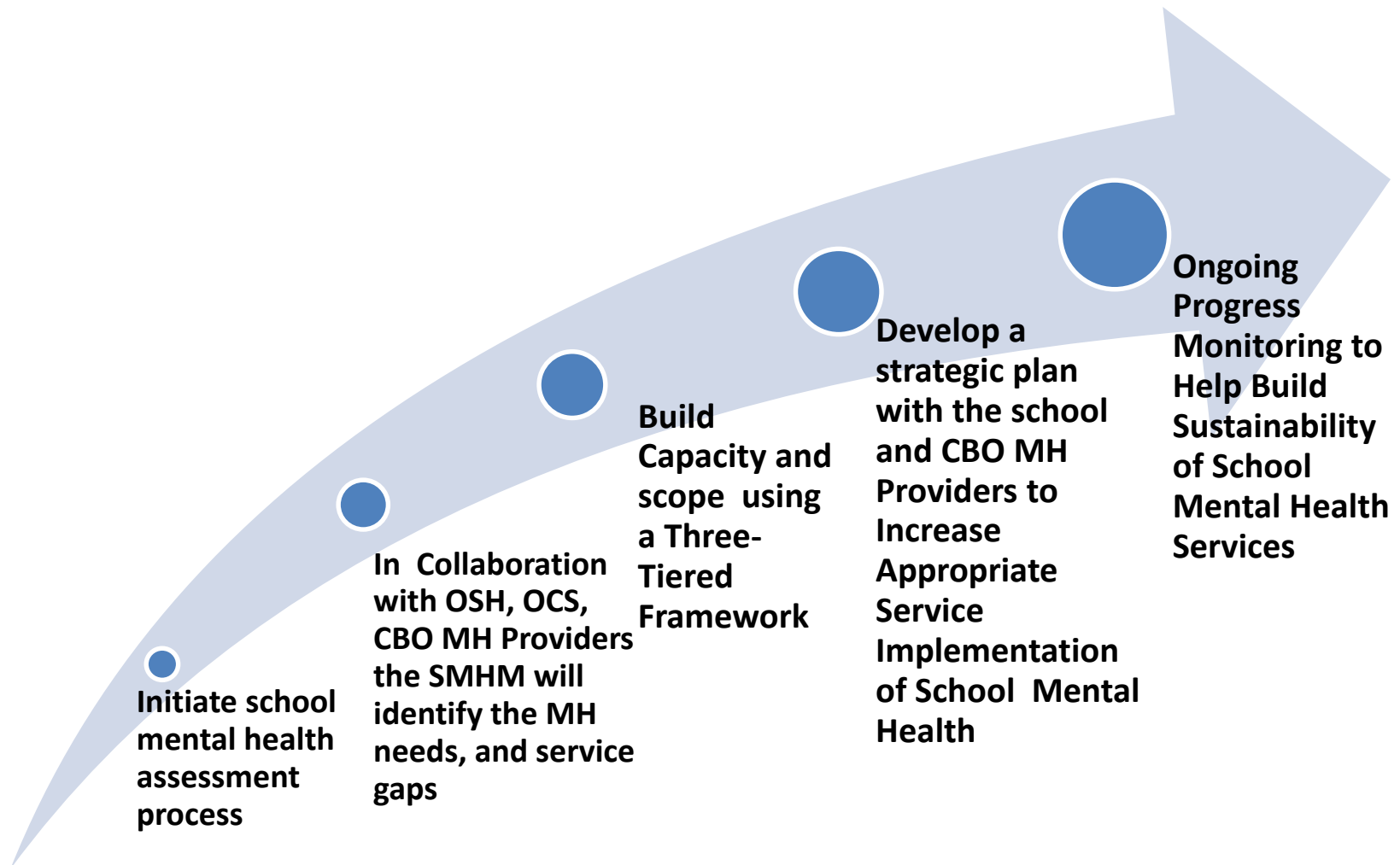
# CORE PROGRAMS AND SERVICES



# Theoretical Perspective



# Framework to Assess and Monitor Community Schools Mental Health Services



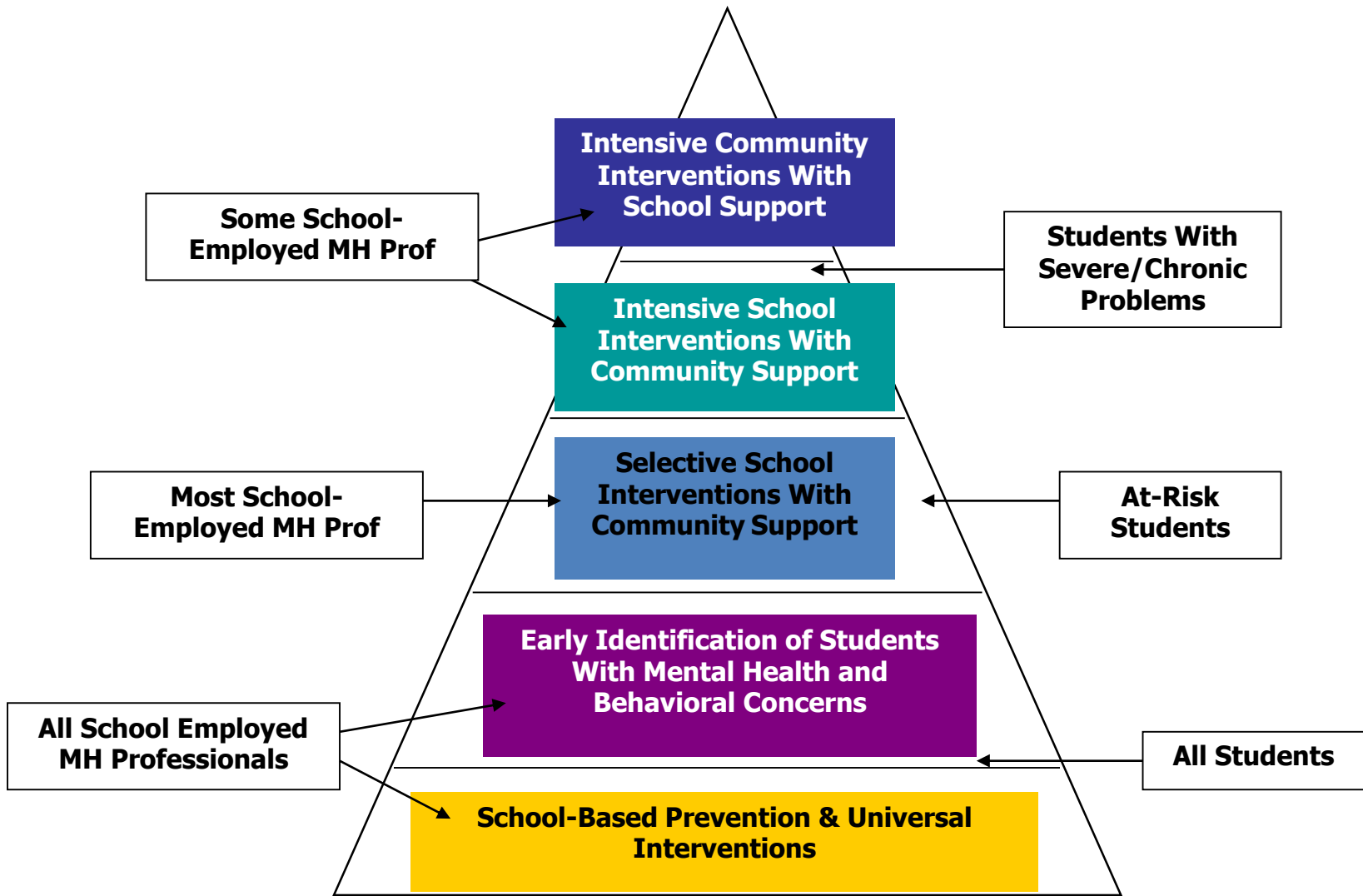
# Mental Health Programming

**Mental health programming is aligned to Community School's program expectations set forth by Dept. of Education and Dept. of Health & Mental Hygiene**

- Assist schools and Lead CBOs in assessing the need for mental health services and related interventions using a tiered approach: Universal, Selective, Indicated.
- There is a wide range of services – not a *cookie cutter approach* – not every school is getting every service.
- Work with schools, Lead CBOs, and providers to obtain licensing approval when creating a School-based Mental Health Clinic (SBMH). OMH.
- Assist CBOs in sub-contracting with qualified mental health providers.
- Provide on-going technical assistance to schools and Lead CBOs on development and use of mental health needs, program development and priorities.
- Oversee the quality of the clinical programs and develop and use standards, EBT, and program improvement tools to measure program quality and effectiveness, and to tailor interventions when indicated. Work closely with DOHMH MHy.

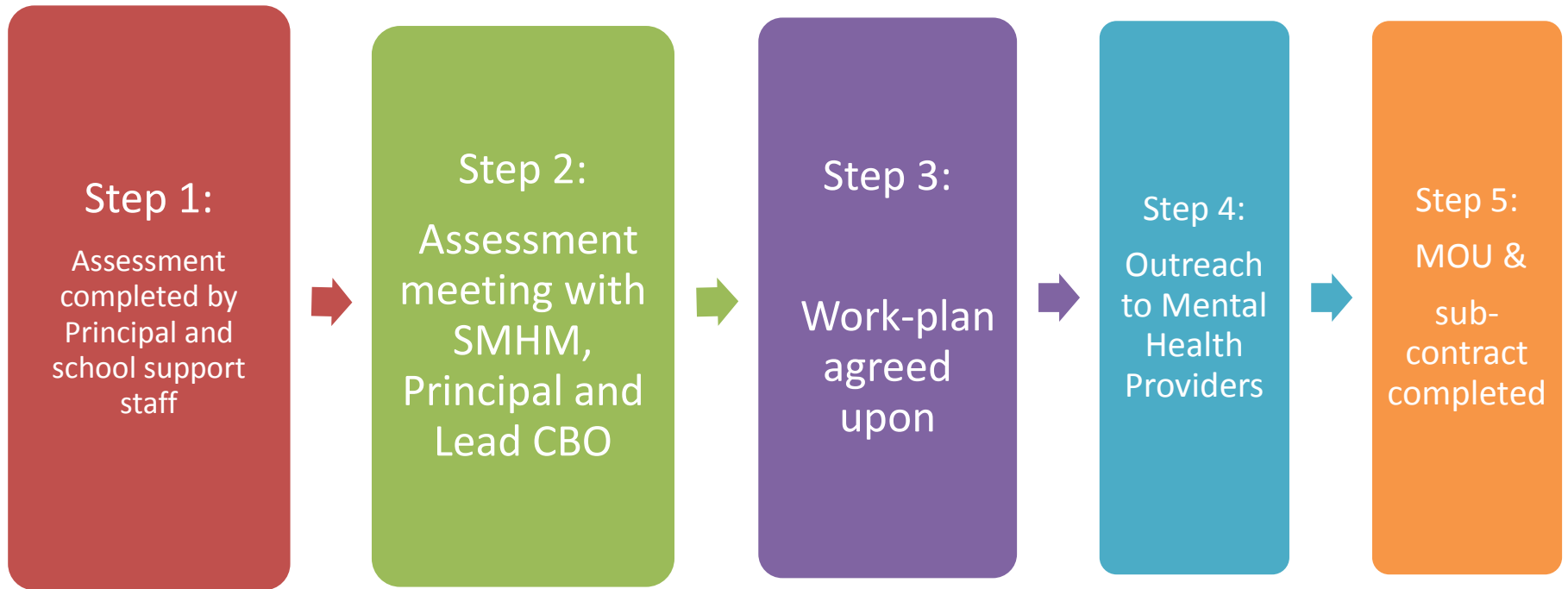
## What is the framework for a continuum of “School Mental Health” Services?

- **Universal prevention services** provided to all students that seek to promote positive mental health and educational success
- **Selective prevention and intervention services** that seek to improve social-emotional skills and behaviors linked to positive mental health and educational success
- **Intensive intervention services** that seek to help students effectively cope with social-emotional and behavioral issues that impact positive mental health and educational success



**The Continuum of School Mental Health Services**

# Process for Creating Mental Health Services



# KEY POINTS

- Assessment must be done for ***every school*** – triggers mental health process
- ***Not a cookie cutter approach!***
- Not to pay for what is already being done.
- Mental health funds were allocated per campus - MH funds would be used to cover all co-located schools.
- Considerations of Funding Allocation:
  - Geography – provider selection
  - Entire school will share in services
  - enrollment size of entire school,
  - allocated funding
  - existing mental health program
  - Assessment





## NYC Community School Mental Health: Work Plan and Division of Tasks

For each assigned Community School, fill in agreed upon mental health services and subsequent timelines for each intervention

School Year: \_\_\_\_\_

<b>SCHOOL NAME &amp; DBN:</b>					
School Contact(s):					
School Mental Health Initiative :	RENEWAL	AIDP	AIDP/RENEWAL	HIGH SUSPENSION	OTHER
Student Enrollment: School -	Campus -				
Total Funding for School Mental Health Services: Co-located Schools (Indicate if they are AIDP/Renewal/HSS): Lead CBO (if AIDP/Renewal):					

Targeted Interventions	Responsible Staff	Start Date	End Date	Implementation Plan	EBP (Y/N)
Selective Interventions	Responsible Staff	Start Date	End Date	Implementation Plan	EBP (Y/N)
Universal Interventions	Responsible Staff	Start Date	End Date	Implementation Plan	EBP (Y/N)

Last Modified Date: \_\_\_\_\_



OFFICE OF  
SCHOOL HEALTH

**Community School Memorandum of Understanding  
School Mental Health Partnership between**

Mental Health Agency/Provider \_\_\_\_\_ Lead CBO \_\_\_\_\_  
And  
\_\_\_\_\_ NYC School Name \_\_\_\_\_

This document constitutes an agreement between \_\_\_\_\_ Mental Health Agency/Provider \_\_\_\_\_  
Lead CBO \_\_\_\_\_ and \_\_\_\_\_ NYC School Name \_\_\_\_\_ to collaborate on the implementation of  
mental health services under the Community School Initiative within the School Based Mental  
Health program in the Office of School Health, New York City Department of Education (DOE).

**I. DEFINITIONS:**

**School-Based Mental Health Program within the Community School initiative:** is a project developed by the New York City Department of Education in conjunction with the Office of School Health to improve and expand mental health services for children (ages 0-18) and their families. The components of the Community School Mental Health Program includes the following types of services: (1) universal interventions for the school community to raise students, staff or families' mental health awareness, encourage help-seeking for mental health concerns and promote positive behaviors (such as a social-emotional learning curriculum or school-wide anti stigma campaign); (2) selective interventions that aim to detect mental health needs and intervene early with students who are at risk of mental health problems (such as broad-based screening to identify children in need of further assessment or trainings for teachers to identify and respond to students in psychological distress); (3) targeted mental health services and interventions that are provided to students with specific mental health difficulties/conditions to lessen the impact of the condition and improve functioning (including mental health treatment using evidence-based models). **Mental Health Agency:** community-based organization or hospital that is licensed by OMH to provide mental health services to children and families and designated by OMH as a School-Based Mental Health Program provider agency. **Mental Health Provider:** community-based organization that provides both selective and universal mental health services to children and families as per their mission statement and organizational vision. If different, clarify here:

**On-site:** refers to the premises of the NYC DOE School(s).

**II. PARTIES**

The names and addresses of the schools and organizations that are parties to this agreement are:

*School: (DBN, Name and Address)*

*Mental Health Provider: (Name and Address)*

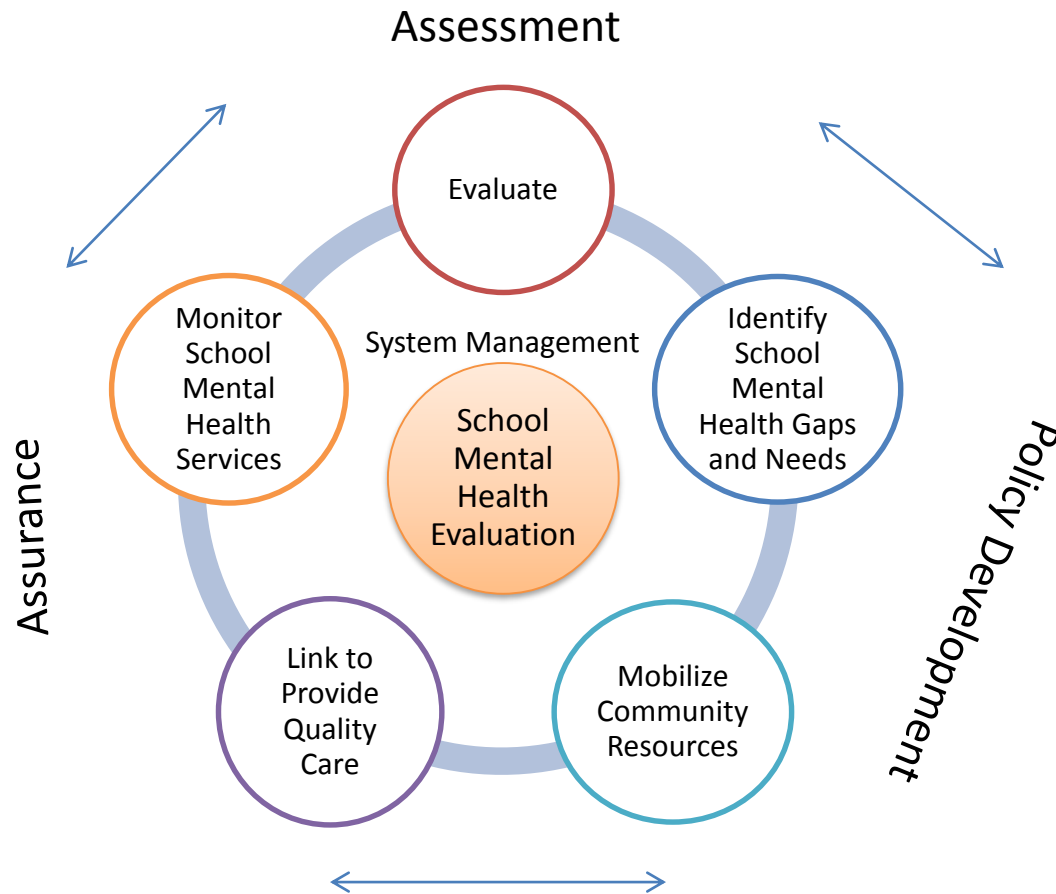
# Current Status: Work Flow

- 130 Assessments Completed
- 130 site visits Completed
- 130 Work Plans completed
- Working closely with Office of Community Schools
- 54 schools out of 130 are earmarked for a new SBMH Clinics
  - As of 9/1/16 all approved

# Current Status: Staffing

- 1 Supervisor
- 3 Managers for the Renewal Schools
- 2 Managers for AIDP
- 1 Project Administrator
- 1 Evaluation Specialist

# Tracking Mental Health Services in Community Schools Using a Three-Tiered Model



Office of School Health (OSH)

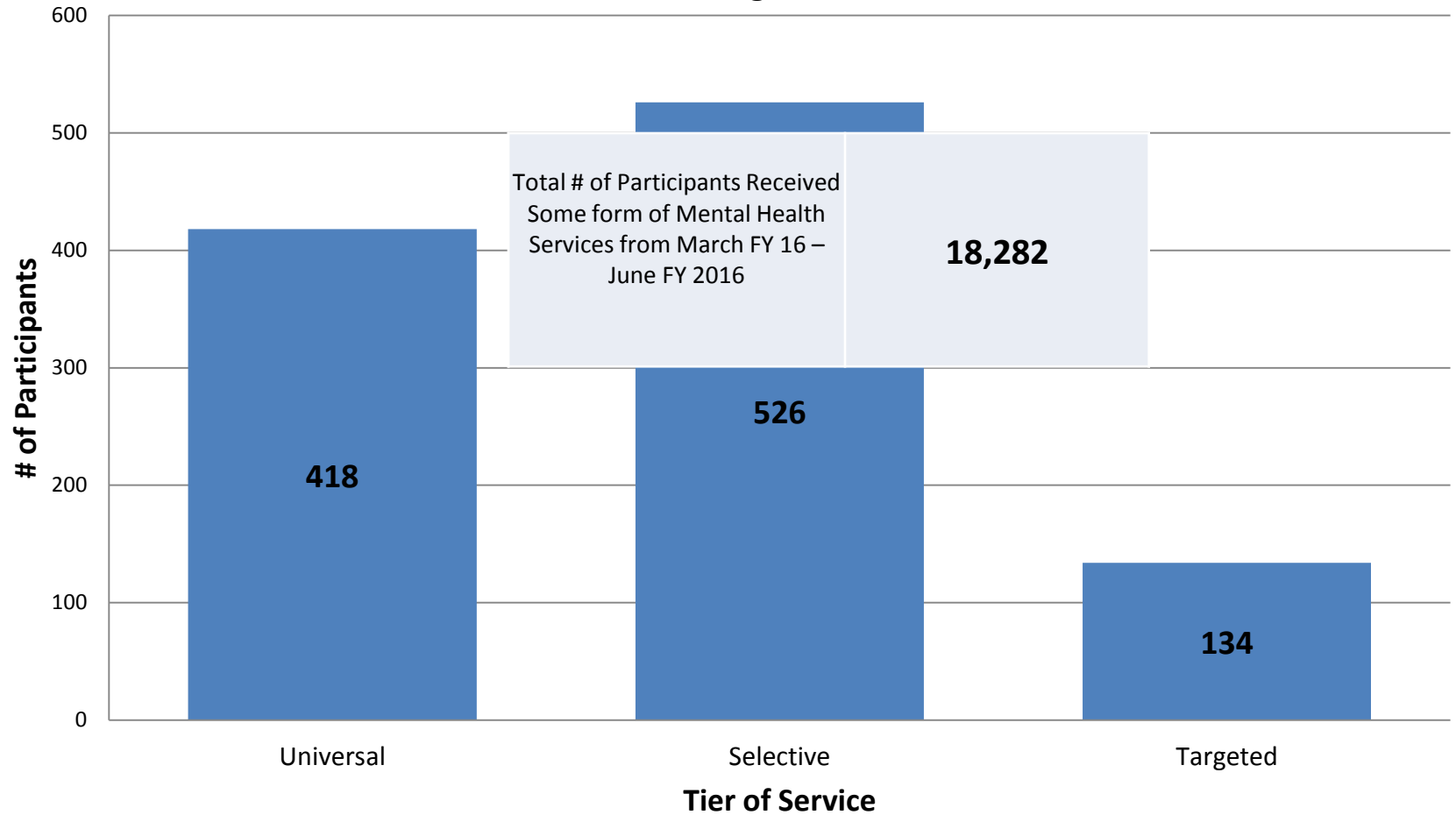
# Why Monitor our Work

- Provides key information to guide next steps
- Drives decision-making at all levels and enhances accountability
- Engages participants in performance improvement
- Provides evidence-based data for key stakeholders
- Monthly Provider Data Reports

# Total # of Services Overseen by School Mental Health Manager (SMHM)

SMHM	Services Overseen by SMHM
<i>A</i>	213
<i>B</i>	115
<i>C</i>	352
<i>D</i>	300
<i>E</i>	97
<b><i>Total</i></b>	<b>1,078</b>

## # of Mental Health Services Using a Three Tiered Model





## MAPPING OF MENTAL HEALTH SERVICES

Provider and Service	Schedule and Staff	Service Description	Implementation <small>(Identifying, Referring, Connecting)</small>	Desired Outcome
Targeted Services: Article 31 Clinic  Point Person: Email: Contact #:  Supervisor:	<u>Days:</u> <u>Times:</u> <u>Room:</u>			
Selective Services  Point Person: Email: Contact #:  Supervisor:	<u>Days:</u> <u>Times:</u> <u>Room:</u>			
Selective Services  Point Person: Email: Contact #:  Supervisor:	<u>Days:</u> <u>Times:</u> <u>Room:</u>			

## MAPPING OF MENTAL HEALTH SERVICES FOR 12X692: MAVAD

Provider and Service	Schedule and Staff	Service Description	Implementation [Identifying, Referring, Connecting]	Desired Outcome
<p>Urban Health Plan: Universal Services <b>Screener Consents</b></p> <p>Point Person: Dimitra Munoz <a href="mailto:Dimitra.munoz@urbanhealthplan.org">Dimitra.munoz@urbanhealthplan.org</a> Contact #: 347-453-7356</p> <p>Supervisor: Wanda Marquez <a href="mailto:Wanda.marquez@urbanhealthplan.org">Wanda.marquez@urbanhealthplan.org</a> Contact #: 917-375-4081</p>	<p><u>Days:</u> Monday, Tuesday, Thursday</p> <p><u>Time:</u> 8:00am to 3:30pm</p> <p><u>Staff:</u> 1. Dimitra Munoz, LCSW-R</p>	<p>-Initial Assessment/Psychosocial identify need of students and Treatment Plan</p> <p>-PHQ Patient Health Questionnaire (Depression Screening Tool -One a Year)</p> <p>-Pediatric Systems Checklist 17 Screening (Identify Mental Disorders and more.)</p>	<p>Students who are identified as at-risk will be discussed at the mental health wellness council meetings and they will be referred through consent referrals by Guidance Counselor/School SW, Lead CBO, Interdisciplinary Team, Teachers, and Administration.</p>	<p>Goal: Reduction of mental health symptoms and addressing the psychosocial issues of the student, families, and provide linkage services.</p>
<p>Astor: Universal Service <b>CIRBES</b> (6 Presentations)</p> <p>Supervisor: Dr. Todd Karlin <a href="mailto:tkarlin@astorservices.org">tkarlin@astorservices.org</a> Contact #: 845-538-3639</p>	<p><u>Time:</u> Morning or Evening</p> <p><u>Staff:</u> 1. Nurse Practitioners 2. Clinicians [Sarah Wise and Michelle Santana]</p>	<p>Focus on training educators and staff on topics such as: behavior management, de-escalation, working with difficult students, etc.</p>	<p>-Identify topics and find out what topics are needed through input with CBO, School Administration, School staff and teachers.</p> <p>-CBO/MH provider will have a calendar date chosen by February 1<sup>st</sup></p> <p>-Calendar of events will be created listing the Workshop Topics (March, April, May, June).</p>	<p>Goal: Increasing parent engagement, knowledge, and resources.</p> <p>-Astor has feedback forms that are utilized to assess parental satisfaction with trainings as well as track attendance.</p>
<p>Astor: Universal Service <b>MH First Aid</b> (8hr staff Training)</p> <p>Supervisor: Dr. Todd Karlin <a href="mailto:tkarlin@astorservices.org">tkarlin@astorservices.org</a> Contact #: 845-538-3639</p>	<p>-Certified Mental Health First Aid Instructor</p> <p>-Start in March</p>	<p>An course designed to help individuals identify and respond to signs of mental illness or substance use disorders</p>	<p>-Dates of staff development will be identified</p> <p>-School staff will be notified of the MH First Aid Training dates and updated on related events</p>	<p>Goal: Increase knowledge of staff in topics of mental illness identification and implementation.</p>

# UNIVERSAL TRAININGS FOR DOE ELEMENTARY, MIDDLE AND HIGH SCHOOL PERSONNEL

KOGNITO's <i>AT-RISK</i> SUITE <a href="https://nyc.kognito.com/">https://nyc.kognito.com/</a>	YOUTH MENTAL HEALTH FIRST AID <a href="http://www.mentalhealthfirstaid.org/cs/">http://www.mentalhealthfirstaid.org/cs/</a>	MAKING EDUCATORS PARTNERS <a href="http://www.sptsusa.org/educators/meptrailer/">http://www.sptsusa.org/educators/meptrailer/</a>
<p><b>What is it?</b> <i>At-Risk</i> is an evidence-based training offering three distinct modules for elementary, middle or high school personnel. The modules educate teachers on how to <b>a)</b> recognize early signs and symptoms of psychological distress in students including depression, anxiety, and suicidal thoughts and <b>b)</b> approach and connect students in need of resources within a school setting.</p> <p><b>What will this training prepare school personnel to do?</b> <i>Learn to identify, approach, and refer at-risk students • Broach the topic of psychological distress • Motivate students to seek help • Avoid common pitfalls such as attempting to diagnose</i></p> <p><b>What are the details?</b></p> <ul style="list-style-type: none"> <li>○ <b>Time commitment:</b> 1 hour</li> <li>○ <b>Mode:</b> Online; individual; avatar-based (participants practice simulated conversations with virtual humans); interactive</li> </ul> <p><b>Recommended audience:</b> Elementary, middle and high school personnel who</p> <ul style="list-style-type: none"> <li>○ Have limited availability</li> <li>○ Have some understanding of adolescent mental health &amp;/or -</li> <li>○ Want to learn or practice how to approach young people at higher risk</li> </ul>	<p><b>What is it?</b> YMHA is a public education program that introduces participants to common mental health challenges in youth and young adults ages 12-18, their unique risk factors and warning signs, builds understanding of the importance of early intervention, and teaches participants how to help a young person in crisis or experiencing mental health challenges.</p> <p><b>What will this training prepare school personnel to do?</b> <i>Understand the difference between typical and atypical behaviors • Understand a variety of mental health challenges in adolescents such as anxiety, depression, psychosis, eating disorders, AD/HD, and substance use disorders • Support youth developing signs and symptoms of a mental illness or emotional crises • How to apply a core five-step action plan</i></p> <p><b>What are the details?</b></p> <ul style="list-style-type: none"> <li>○ <b>Time commitment:</b> 9 hours (can be split into two 4.5-hour days)</li> <li>○ <b>Mode:</b> In-person training for groups of schools staff; interactive; participatory</li> </ul> <p><b>Recommended audience:</b> Middle and high school personnel working with students ages 12-18 who</p> <ul style="list-style-type: none"> <li>○ Interact regularly with students</li> <li>○ Want a more in-depth overview of mental health problems and typical versus atypical adolescent behavior.</li> <li>○ Could benefit from being certified as a Mental Health First Aider (certificate presented upon course completion)</li> </ul>	<p><b>What is it?</b> MEP is designed to meet the general youth suicide awareness needs of all faculty and staff in schools, and its content reflects current knowledge and evidence based practice in the field of youth suicide prevention from the perspective of school personnel.</p> <p><b>What will this training prepare school personnel to do?</b> <i>Increase awareness and understanding of youth suicide • Increase recognition of warning signs • Improve confidence to provide an effective initial response and appropriately refer</i></p> <p><b>What are the details?</b></p> <ul style="list-style-type: none"> <li>○ <b>Time commitment:</b> Customizable length from 45 minutes to 1.5 hours</li> <li>○ <b>Mode:</b> In-person training for groups of school staff</li> </ul> <p><b>Recommended audience:</b> Elementary, Middle and High School personnel who</p> <ul style="list-style-type: none"> <li>○ Want real-life scenarios for youth suicide prevention methods</li> <li>○ Want an overview of specific populations that have elevated risk (e.g. LGBTQ students, bullying/bullied students)</li> <li>○ Want a school gatekeeper training on Suicide Prevention in schools</li> </ul>

# CSD & SMHM Collaboration is



- Importance of Communication
  - Response to correspondence is always **Welcome**
  - Alert us for important **Meetings**
  - Notifications of **Changes**
  - *Don't Wait Until It's a* **CRISIS**
- Stay on top of MOU completion
- All MH funds should be approved by SMHM before submission
- SMHM are here to support *programs* – not contracts or sub-contracts

# Lessons Learned <sup>1</sup>

## Internal:

- *Consistency is key*
  - Establishing a common language among internal staff is imperative
  - Engaging all stakeholders before implementation helps the work run more efficiently
    - Providers
    - Lead CBOs
    - The DOE Office of Community Schools
    - Superintendents Offices and Borough Field Support Centers
    - The New York State Office of Mental Health
  - Orienting new stakeholders in the model helps alleviate confusion

# Lessons Learned <sub>2</sub>

## All Stakeholders:

- Definitions of Services: *appropriate services vs. inappropriate services*
- Data: *clinical vs. educational*
- Vast & Complex System: 130 schools in 5 boroughs
  - Some schools have 5+ MH providers
  - Some schools already had services and those programs varied in success

# Lessons Learned <sub>3</sub>

## Schools (*What's in it for them?*):

- Aligning with familiar faces- *who does the principal know and trust?*
- Time Management- *how do you make the most of the half hour meeting you get with a school?*
- Balance- Mental Health services are one part of the Community School model

# Lessons Learned <sup>4</sup>

## Mental Health Providers:

- Understanding of the Three-Tiered Model-greatly varies amongst providers
- Role Confusion
  - what can they disclose to schools?
  - supervision and reporting structure-who does the principal/lead CBO go to when there's a problem?



# School Challenges

- Mixed messages and confusion about how mental health funding is to be used
- Roles and Responsibility of SMHM
- Complexity of co-located schools
- Some RS on the same campus as AIDP schools
- New Principals assigned to schools
- Schools Closing or Condensed

# Questions?



**Scott Bloom, LCSW-R**  
**Director of School Mental Health Services**

**Marcie Bouchard, MS, ED**  
**Assistant Director of School Mental Health Services**

**[SBloom5@schools.nyc.gov](mailto:SBloom5@schools.nyc.gov)**  
**[MBouchard@health.nyc.gov](mailto:MBouchard@health.nyc.gov)**

**[HTTP://SCHOOLS.NYC.GOV/OFFICES/HEALTH](http://SCHOOLS.NYC.GOV/OFFICES/HEALTH)**



Health

Department of  
Education

