



MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration



# The Mental Health Technology Transfer Center Network: Strategies for Building Comprehensive School Mental Health Services

Heather J. Gotham, PhD, MHTTC Director

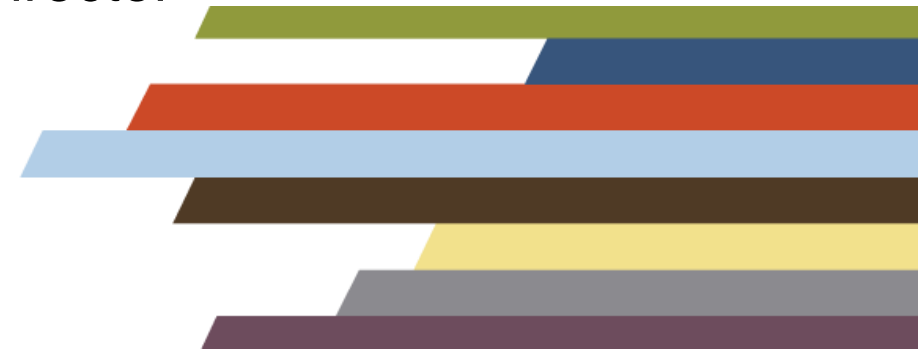
Jessica Gonzalez, MSW, MHTTC SMH Lead

Nancy Lever, PhD, NCSMH Co-Director

Sharon Hoover, PhD, NCSMH Co-Director

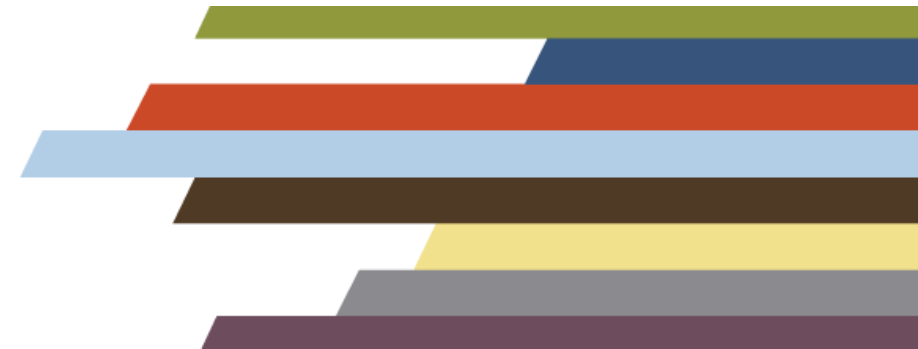
**SAMHSA**

Substance Abuse and Mental Health  
Services Administration



# Agenda

- MHTTC Network and NCSMH Introduction
- Overview of National School Mental Health Curriculum
- Plans for Year 2 of the MHTTC School Mental Health Initiative
- Q & A



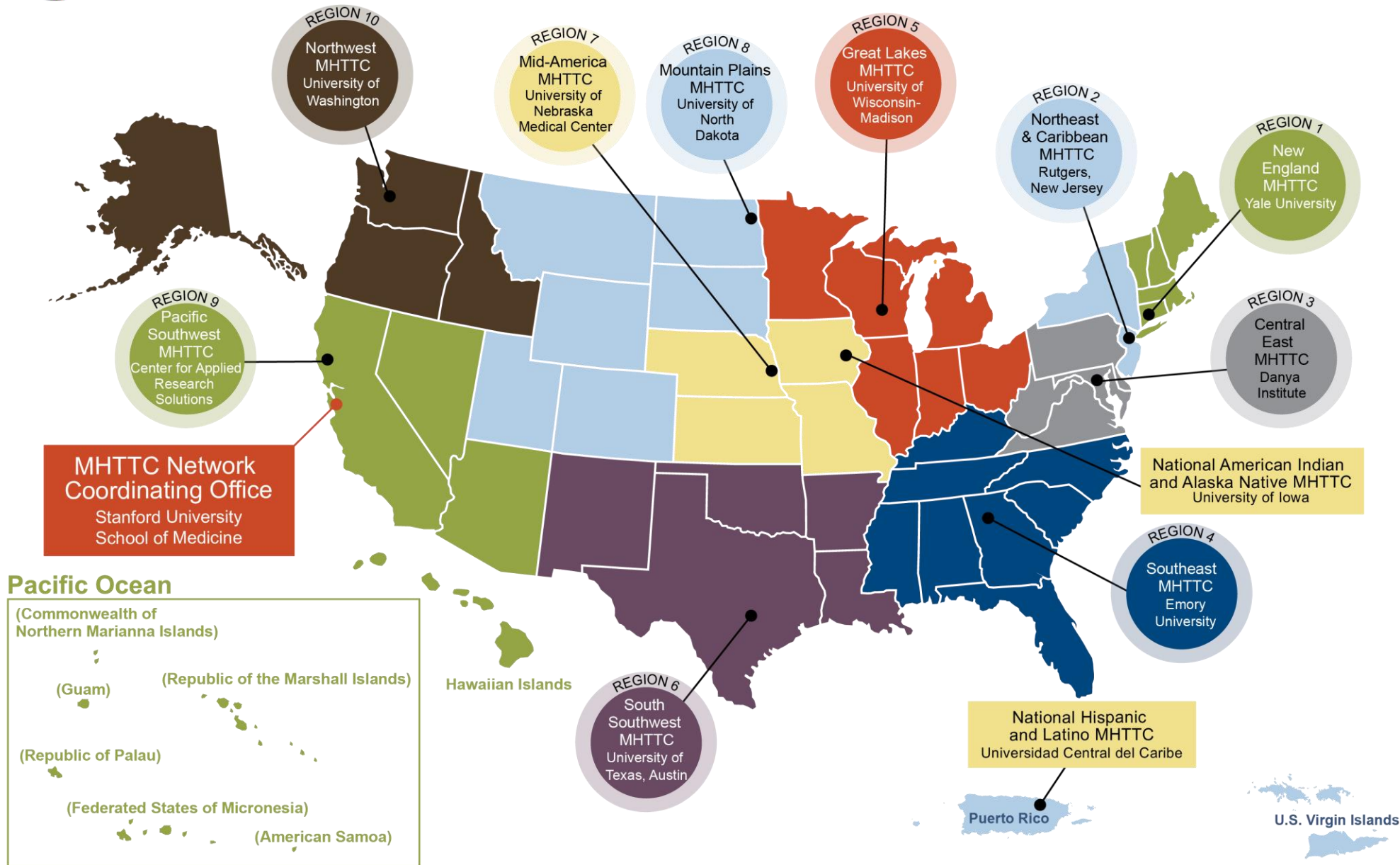


# MHTTC

## Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

# MHTTC Network



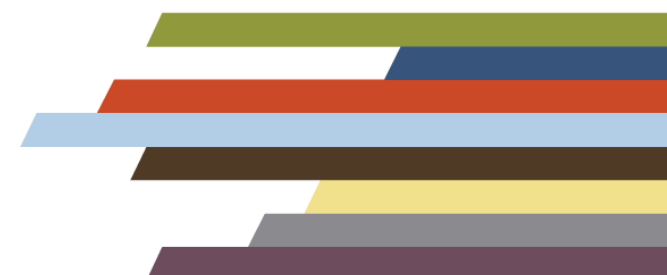
# MHTTC Network Goals

- ***Technology Transfer:*** Accelerate the adoption and implementation of mental health related evidence-based practices spanning prevention, treatment and recovery.
  - Provide free local and regional training and technical assistance
  - Develop and disseminate resources
  - Heighten the awareness, knowledge, and skills of the mental health workforce
- Funding for this 5-year project began on August 15, 2018.
- [www.mhttcnetwork.org](http://www.mhttcnetwork.org)



MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



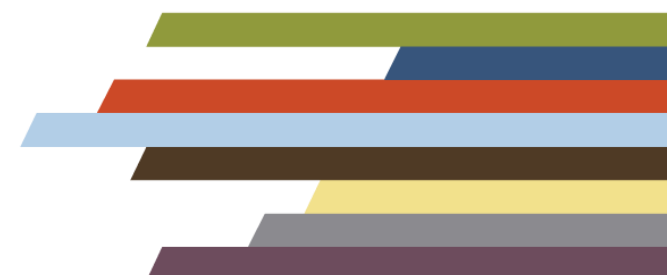
# How We Provide Training and TA

- The TTCs develop yearly workplans through needs assessments, advisory boards, and input from key stakeholders including state MH commissioners and SAMHSA Regional Administrators
- Centers consider:
  - Spread of services across the region/population
  - Intensity of services: universal, targeted, and intensive
  - Flexibility to respond to emerging needs
- Implementation science informs our strategies
  - Consider the context - what is really needed to move an evidence-based practice forward?
    - Organizational development, systems work, policy, training, technical assistance
  - Use implementation strategies specific to the need
  - Maximize impact on service delivery systems



MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



# MHTTC Network's Areas of Focus

Centers have multiple areas of expertise; the area of focus is a specific topic for which Centers serve as consultants to the Network, develop national products, host topic area on website.


| MHTTC Center                                   | Area of Focus  |
|--|--|
| National American Indian & Alaska Native MHTTC | Culturally informed, EBPs in treatment and assessment of mental health disorders in Native populations                                 |
| National Hispanic & Latino MHTTC               | Mental health promotion, prevention, intervention, and recovery support services for Hispanic and Latino populations                   |
| New England MHTTC                              | Recovery-oriented practices, including recovery support services   |
| Northeast & Caribbean MHTTC                    | EBPs for serious mental illness (SMI): supported employment, illness management & recovery, supported housing, and supported education |
| Central East MHTTC                             | Suicide prevention in the context of race, ethnicity, age and sexual orientation   |
| Southeast MHTTC                                | Population-based approaches to managing SMI  |
| Great Lakes MHTTC                              | Process improvement for mental health care delivery systems  |
| South Southwest MHTTC                          | Early childhood mental health  |
| Mid-America MHTTC                              | Integration of primary and mental health care  |
| Mountain Plains MHTTC                          | Rural mental health  |
| Pacific Southwest MHTTC                        | Youth and young adults of transitional age with or at risk for SMI   |
| Northwest MHTTC                                | EBPs for psychosis including CBT for psychosis and assertive community treatment (ACT)   |

# MHTTC Events & Products

Website has searchable calendar and products database

NORTHEAST & CARIBBEAN MHTTC NAVIGATION [Go to Center](#)

[Back to Product & Resources listing](#)



**Webinar: Part 2 Older Adults and Serious Mental Illnesses**  
Publication Date: March 28, 2019  
Developed By: **Northeast & Caribbean MHTTC**  
Keywords: Evidence Based Practices | Mental Health | Older Adults | Serious Mental Illness (SMI) treatment

SOUTH SOUTHWEST MHTTC NAVIGATION

[Back to event listing](#)

## The Incredible Years® Basics and Home Visiting Parent Education Training Programs

8:00am - April 22, 2019

Hosted By: **South Southwest MHTTC**

Commons Conference Center  
10100 Burnet Road  
Bld 137, Balcones Room  
Austin, TX 78758  
United States



Northwest (HHS Region 10)  
**MHTTC** Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

August 7, 2019

**Research Brief: The importance of human relationships, ethics and recovery-orientated values in the delivery of CBT for people with psychosis**  
*Alison Brabban, Rory Byrne, Eleanor Longden & Anthony P. Morrison (2016)<sup>1</sup>*




## Mental Health is Public Health

8:00am - May 7, 2019

Hosted By: **Central East MHTTC**

MidAtlantic AIDS Education and Training Center  
100 Cranberry Woods Drive  
Cranberry Township, PA 16066  
United States



## Suicide Risk Assessment Training

9:30am - May 31, 2019 | Timezone: US/Eastern

Hosted By: **Southeast MHTTC**

Pacific Southwest (HHS Region 9)  
**MHTTC** Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



## Crisis Intervention Team Leadership Course

1:00pm - March 17, 2019


Hosted By: **Mid-America MHTTC**

## School and Work Coaching for Youth at Clinical High Risk for Psychosis



## FACTSHEET

THE WHY, WHAT, AND HOW:  
ADDRESSING THE SOCIAL DETERMINANTS OF MENTAL HEALTH IN THE PACIFIC SOUTHWEST REGION  
BY TAMU NOLFO, PHD



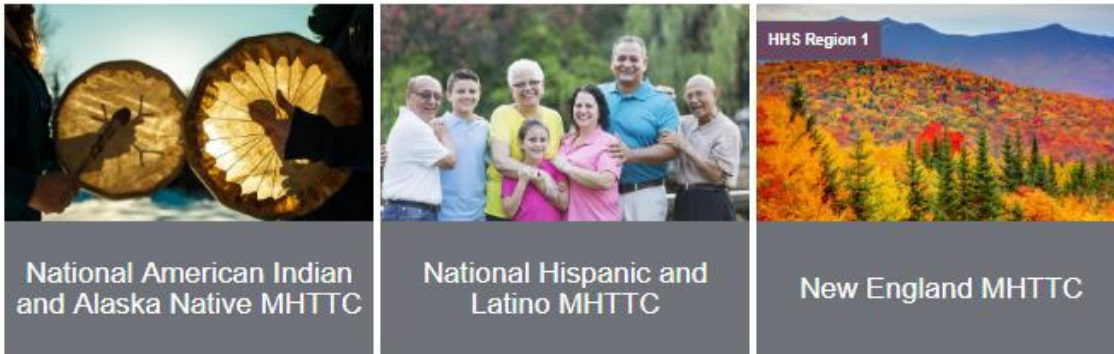
# Connect with the MHTTCs



## Find Your Center

To jump to a specific center, click the center's name. To save a center as your default center, select the center by clicking the photo, then click the Save button at the bottom of the page

### Centers Across The Network



University of Iowa College of Public Health  
145 N Riverside Dr  
Iowa City, IA 52246  
United States  
319-335-5564  
native@mhttcnetwork.org

Universidad Central del Caribe  
Laurel, Av. Sta. Juanita  
Bayamon, PR 00960  
United States  
787-785-5220  
hispaniclatino@mhttcnetwork.org

PRCH  
319 Peck Street  
New Haven, CT 06513  
United States  
617.467.6014  
newengland@mhttcnetwork.org  
States Served  
CT, ME, MA, NH, RI, VT

Visit the MHTTC website:

[www.mhttcnetwork.org](http://www.mhttcnetwork.org)

**Click on “Your MHTTC”**

- Regional Centers
- National American Indian & Alaska Native Center
- National Hispanic & Latino Center



# School Mental Health Initiative

- Two-year supplement
- 300 trainings and events in Year 1
- About 10,500 participants reached

## When There is One School Counselor: Strategies to Reach All Students Nevertheless

10:00pm - June 18, 2019

Hosted By: **Pacific Southwest MHTTC**

## Engaging and Honoring Families as Partners in Supporting Student Mental Health

1:00pm - September 24, 2019 | Timezone: US/Central

Hosted By: **Mid-America MHTTC**

Holiday Inn Des Moines Airport Conference Center

## Suicide Prevention Forum for Families and School Students

6:30pm - April 2, 2019

Hosted By: **Central East MHTTC**

Severna Park High School



MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

### After a School Tragedy...Readiness, Response, Recovery, & Resources

Acts of violence, suicide, and other tragedies affect many school communities. In 2018, there were 82 school shootings, the highest number since 1970 (CHDS, 2019). Death by suicide is currently the 2<sup>nd</sup> leading cause of death among teenagers, next to [car] accidents (CDC, 2018). In 2017, 2 out of every 100 teenagers made suicide attempts serious enough to require medical treatment; 7 out of 100 attempted suicide (CDC, 2019).

These tragedies have a wide-ranging impact on the school community that extends far beyond the events of the day. Secondary trauma and complicated grief affect students, families, and school staff in ways that may appear immediately following a school tragedy or weeks, months, or years later. Stoneman Douglas High School in Parkland, Florida is facing another wave of painful challenges after death by suicide of two student survivors of the March 14<sup>th</sup>, 2018, school shooting that resulted in 17 student and teacher deaths.

This resource is designed to help schools better support students and families in the aftermath of violence and trauma. We provide strategies to assist schools with readiness, response, and recovery to help a school community support resilience in the event of a tragedy. We offer places to turn for more resources. We discuss terminology and concepts related to suicide and grief. Finally, we highlight the importance of providing culturally responsive services, with example cultural considerations for schools to help Hispanic/Latino students struggling with grief and trauma.



Pacific Southwest (HHS Region 9)

MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



### Creating Trauma-Informed Policies: A Practice Guide for School and Mental Health Leadership

By Leora Wolf-Prusan, EdD

# Collaboration

The National School Mental Health Curriculum was co-developed by the Mental Health Technology Transfer Center (MHTTC) Network and the National Center for School Mental Health (NCSMH) at the University of Maryland School of Medicine.



# National Center for School Mental Health (NCSMH)

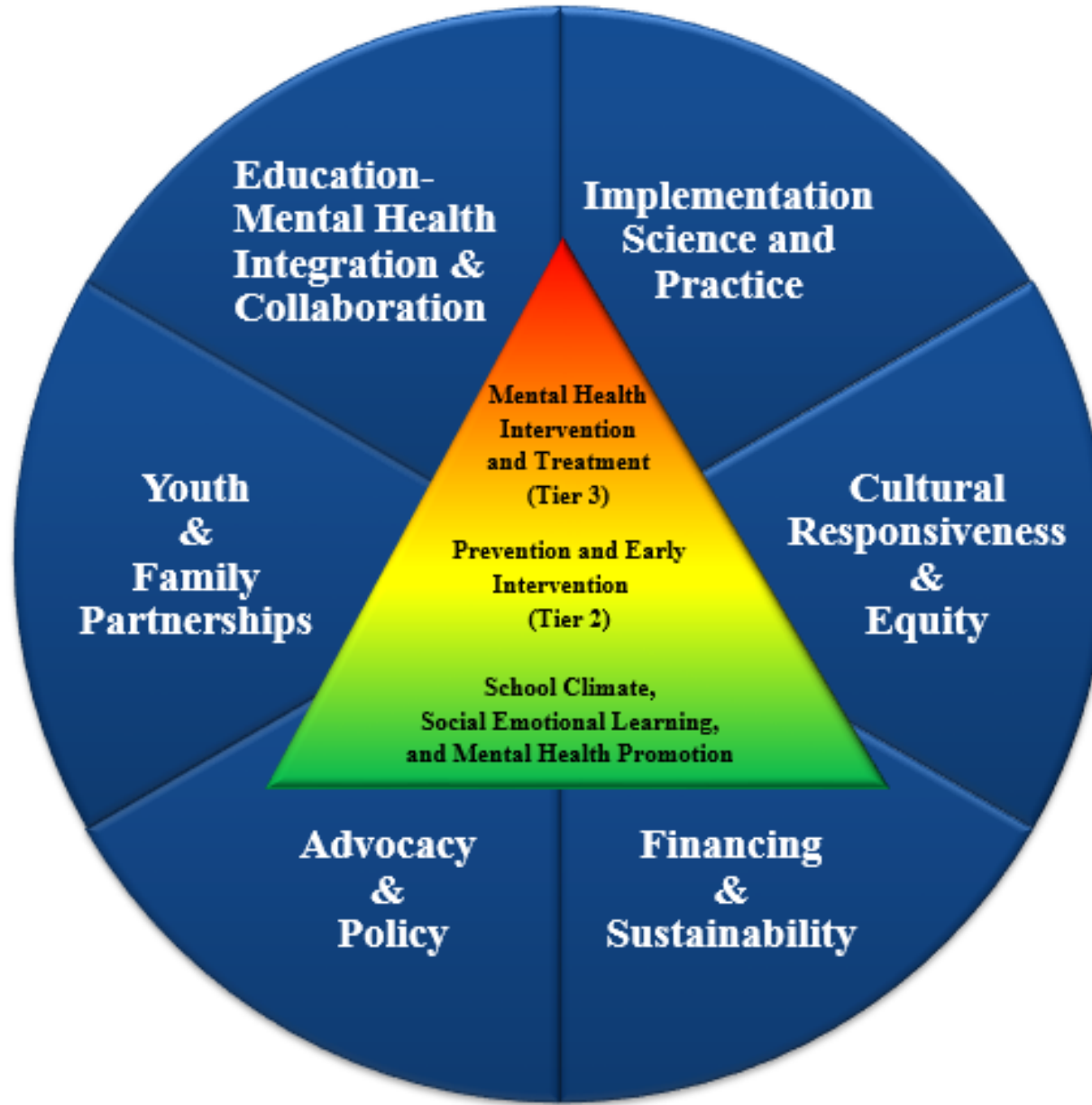
- Established in 1995 with funding from the US Department of Health and Human Services (HHS), Health Resources and Services Administration
- The **NCSMH mission** is to strengthen policies and programs in school mental health to improve learning and promote success for America's youth.



UNIVERSITY *of* MARYLAND  
SCHOOL OF MEDICINE



Visit the NCSMH website at  
[www.schoolmentalhealth.org](http://www.schoolmentalhealth.org)





# NCSMH Annual Conference on Advancing School Mental Health

- 1996 Baltimore, MD
- 1997 New Orleans, LA
- 1998 Virginia Beach, VA
- 1999 Denver, CO
- 2000 Atlanta, GA
- 2002 Philadelphia, PA
- 2003 Portland, OR
- 2004 Dallas, TX
- 2005 Cleveland, OH
- 2006 Baltimore, MD
- 2007 Orlando, FL
- 2008 Phoenix, AZ
- 2010 Albuquerque, NM
- 2011 Charleston, SC
- 2012 Salt Lake City, UT
- 2013 Arlington, VA
- 2014 Pittsburgh, PA
- 2015 New Orleans, LA
- 2016 San Diego, CA
- 2017 Washington, DC
- 2018 Las Vegas, NV
- ***2019 Austin, TX (Nov 7-9)***
- ***2020 Baltimore, MD (Oct 29-31)***

# Curriculum Development

---

The National School Mental Health Curriculum was co-developed by the Mental Health Technology Transfer Center (MHTTC) **Network** and the National Center for School Mental Health (NCSMH) at the University of Maryland School of Medicine.

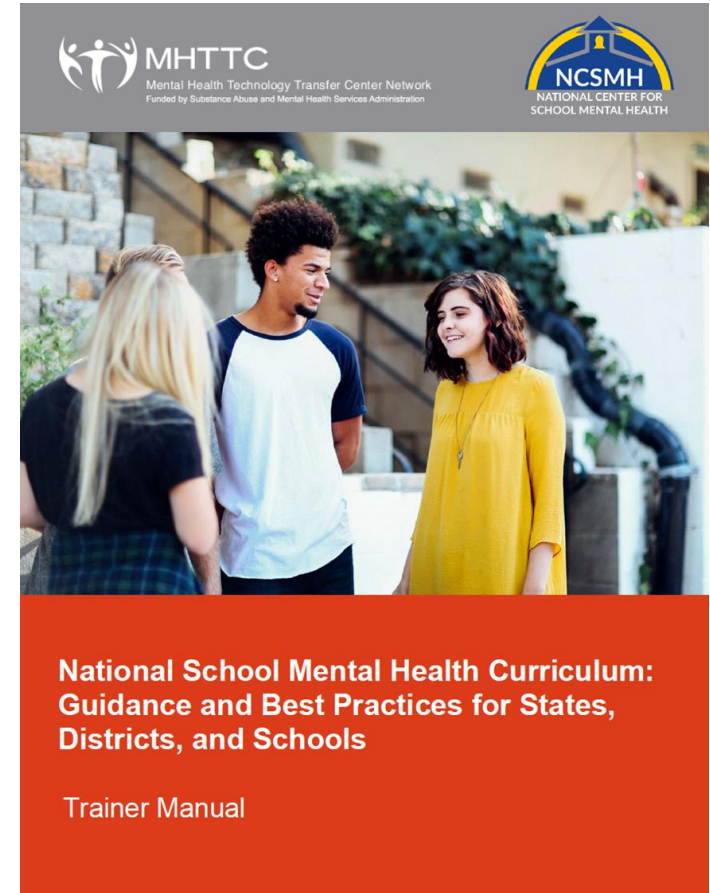


UNIVERSITY of MARYLAND  
SCHOOL OF MEDICINE



# Curriculum Overview

- Mod 1 Foundations of Comprehensive School Mental Health
- Mod 2 Teaming
- Mod 3 Needs Assessment & Resource Mapping
- Mod 4 Screening
- Mod 5 Mental Health Promotion for All (Tier 1)
- Mod 6 Early Intervention and Treatment (Tiers 2/3)
- Mod 7 Funding and Sustainability
- Mod 8 Impact



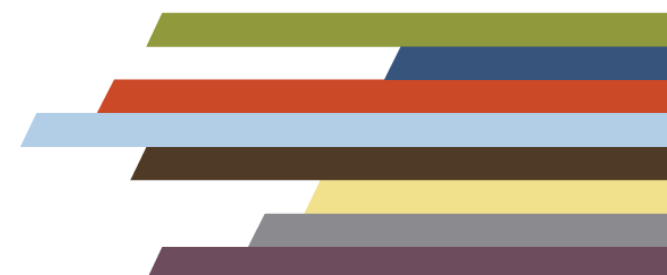
# **What is Comprehensive School Mental Health?**



# Comprehensive School Mental Health Systems

---

- Provide a **full array of supports and services** that promote positive school climate, social emotional learning, mental health and well-being, while reducing the prevalence and severity of mental illness
- **Built on a strong foundation of district and school professionals**, including administrators and educators, specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses, other school health professionals) in **strategic partnership with students, families and community health and mental health partners**
- Assess and address the **social and environmental factors** that impact health and mental health



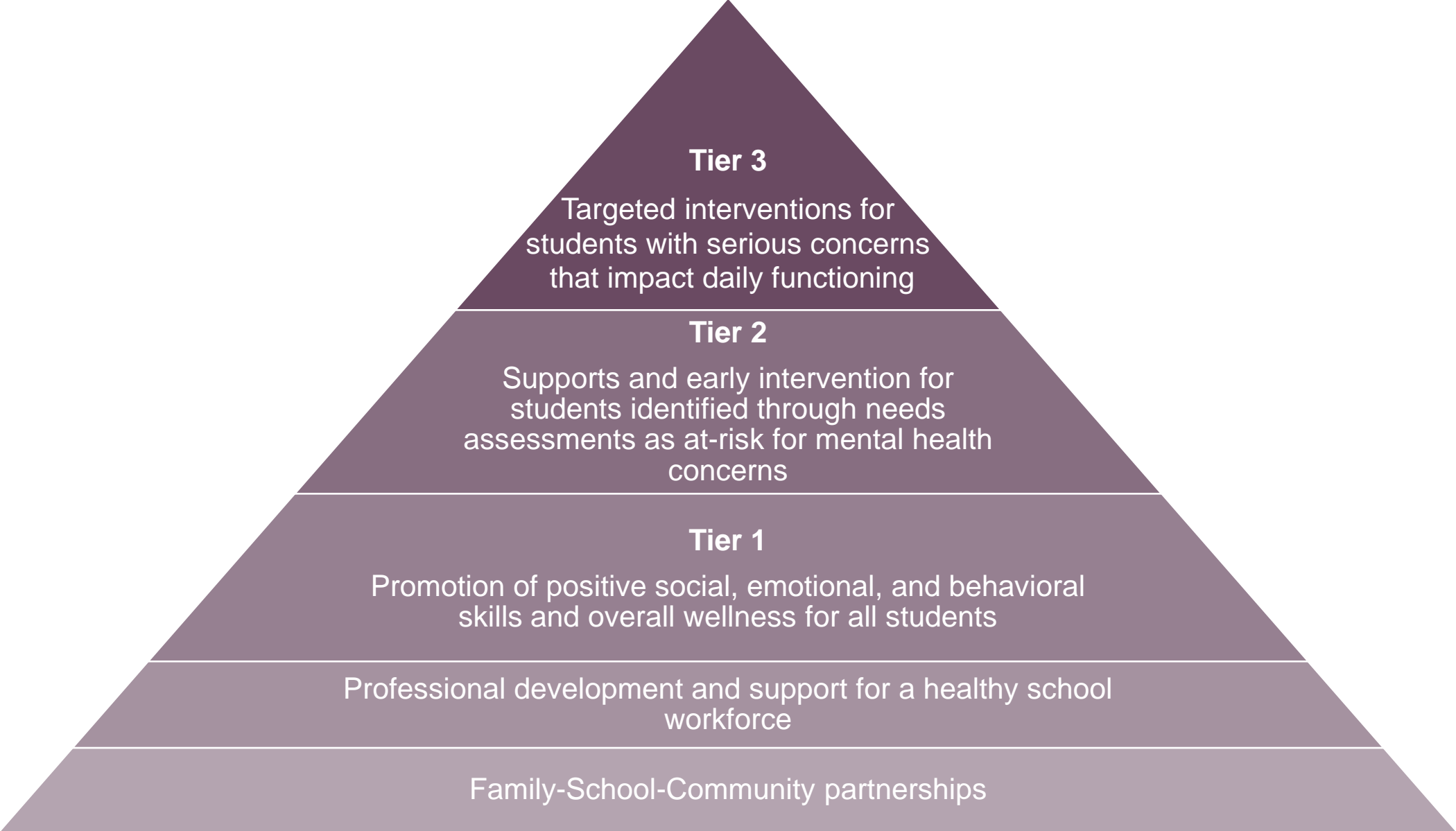
# Core Features

---



- Educators and Student Instructional Support Personnel
  - Adequate staffing and support
  - Trained to address student mental health in schools
- Collaboration and Teaming
  - Youth and Families
  - Community Health/Mental Health and Other Partners
- Multi-Tiered System of Supports
  - Mental health promotion support (Tier 1)
  - Early intervention and treatment services and supports (Tiers 2-3)
- Evidence-Informed Services and Supports
- Cultural Responsiveness and Equity
- Data-Driven Decision Making

# Multi-Tiered System of Supports (MTSS)



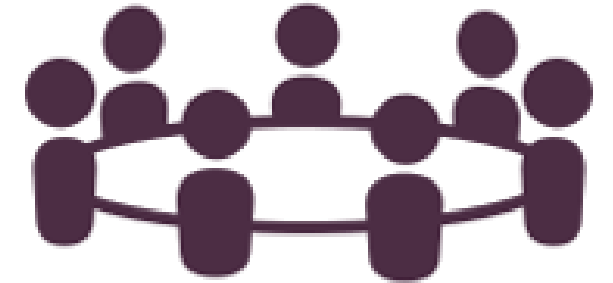
# Target Audience

---

**District teams** that can influence, develop and oversee school mental health systems at the school district and building levels.

District teams may include:

- School District Leaders (e.g., superintendent, school board)
- School Administrators (e.g., Principal, Assistant Principal)
- District Mental Health Director or Student Services Supervisor (e.g., Director of Student Services, District Supervisor School Psychologists/Social Workers/Counselors)
- Community Behavioral Health Agency Supervisor/Director (e.g., clinical director of an agency that provides school-based services in the district)
- Youth/Family Advocate or Consumer





## **Training Goals and Objectives**

# Module 1: Foundations of Comprehensive School Mental Health

## Training Goals and Objectives

Help participants understand the definition, core features, and value of comprehensive school mental health systems.

By the end of this module, participants will be able to:

1. Define comprehensive school mental health systems.
2. Describe the 6 core features of comprehensive school mental health systems.
3. Describe 3 reasons why comprehensive school mental health is important.

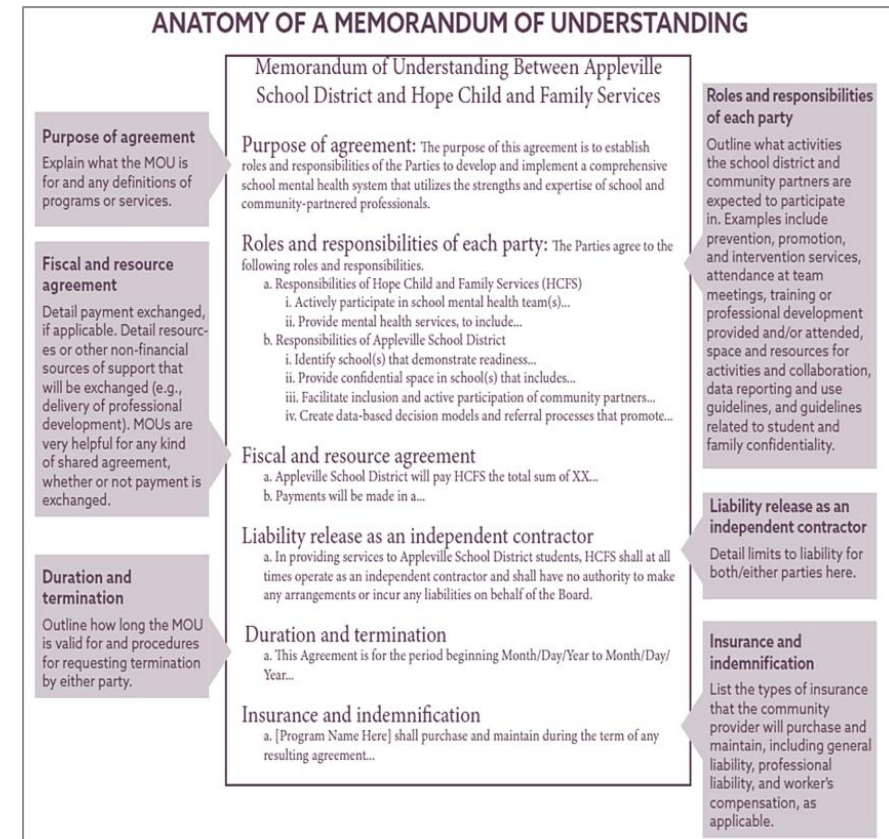
# Design and Time

## Design and Time – Module 1

| Section  | Description  | Components  | Time       |
|--|--|---|------------|
| Introduction   | Curriculum overview and target audience  | <ul style="list-style-type: none"> <li>Curriculum Development and Overview</li> <li>Target Audience</li> </ul>  | 5 minutes  |
| Alignment with School Mental Health Quality Assessment | Explain quality indicators and best practice guidelines that will be included in all modules   | <ul style="list-style-type: none"> <li>Alignment with the National SMH-QA</li> <li>Overview of Quality Domains</li> <li>Present The SHAPE System</li> </ul> | 10 minutes |
| Comprehensive School Mental Health Systems             | <p>Review each component of CSMHS and data demonstrating CSMHS value</p> <p>Share examples from the field</p> <p>Reflection on which core features are present and needing development in participants' schools/district</p> | <ul style="list-style-type: none"> <li>Definition</li> <li>Core Features</li> <li>Value</li> <li>District and State Examples</li> </ul>                     | 30 minutes |
| Strategic planning                                     | District strategic planning for comprehensive school mental health   | <ul style="list-style-type: none"> <li>State specific goal for CSMHS</li> <li>Three action steps to advance goal</li> </ul>                                 | 15 minutes |

## MOU Components

- Purpose of agreement
- Entities involved
- Roles and responsibilities of each party
- Fiscal and resource agreement
- Liability release as an independent contractor
- Duration and termination clause
- Insurance and indemnification



NCSMH, 2019

# Suicide Prevention in Schools

- Background and prevalence
- Suicide risk factors
- Role of school in suicide prevention and postvention
- Resources

## Issue BRIEF



### Suicide Prevention In Schools

By Maureen Underwood, LCSW, CGP

Any school that has been touched by a student suicide is aware of the tragic reality of the national statistics surrounding suicide. Suicide has become the second leading cause of death for youth aged 10 to 24. In 2014, the Centers for Disease Control and Prevention (CDC) reported that the suicide rate of middle school students had doubled since 2007, surpassing the rate of those aged 10 to 14 who died in car crashes.<sup>1</sup>

The pervasiveness of suicidality in youth is captured more directly every other year by the CDC in its Youth Risk Behavior Survey (YRBS). This survey provides data representative of 9th through 12th grade students in public and private schools throughout the country. It monitors health-risk behaviors that contribute to the leading causes of death, and it provides some insight through anonymous reports by students of risky behaviors.

Consider, for example, the 2017 YRBS data on four survey questions that deal specifically with suicide risk<sup>2</sup>:

| QUESTION   | PERCENTAGE YES |
|--|----------------|
| 1. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? | 29.9%          |
| 2. During the past 12 months, did you ever seriously consider attempting suicide?  | 17.7%          |
| 3. During the past 12 months, did you make a plan about how you would attempt suicide?   | 14.6%          |
| 4. During the past 12 months, did you attempt suicide one or more times?   | 8.6%           |

These troubling statistics tell us that at any point in an academic year, a significant percentage of students sitting in classrooms across the country are having thoughts of suicide. What we do not necessarily know is who these children are, when they first have



passive thoughts of death, or what the prevalence of suicidal thoughts are in younger populations. We also need additional research on the predictors of first attempts that may lead to suicide death, as well as a better understanding of why suicide risk escalates so dramatically during the transition from childhood to adolescence (REF: Glenn & Nock). These questions highlight the need for a better understanding of the behavioral health challenges that can lead to thoughts of suicide and their interactive effect on worsening academic performance.

Although there are many unanswered questions about suicide risk in youth, recent data does suggest an association between suicidality and academic outcomes. Data from the 2015 YRBS shows that students with higher academic grades are less likely to consider or attempt suicide compared to students with lower grades. For example, 23% of high school students with mostly A's indicated that they had experienced a sustained period of sadness (over two weeks) that had caused them to change their usual activities; in comparison, 47% of students with mostly D/F's responded that they had experienced such a period of sadness. Only 14% of students with mostly A's seriously considered attempting suicide (question 3)

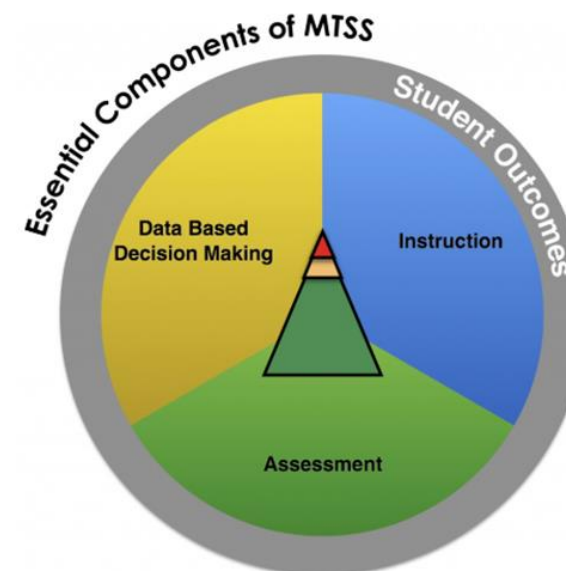


# District Example

## Boston Public Schools Comprehensive Behavioral Health Model



<https://cbhmboston.com/>



Every child deserves a safe and supportive school...

CBHM promotes positive school climate and social and academic success for all students. It is a comprehensive model that integrates tiered supports and services within a school according to student needs, and recognizes family and community partnerships as an integral part of a school's success.

We are so glad you are here!



# State Example

## Wisconsin's School Mental Health Initiative

- 3 supporting grants:
  - Safe Schools Healthy Students
  - Project AWARE
  - School Climate Transformation
- State School Mental Health Framework

[www.schoolmentalhealthwisconsin.org/](http://www.schoolmentalhealthwisconsin.org/)

Each module aligns with the **national performance domains and indicators** of comprehensive school mental health system quality.

**National School Mental Health Quality Assessment (SMH-QA; NCSMH, 2019)**

## Best Practices

- Quality indicators have best practice guidelines
- Used to self-assess indicator implementation and guide strategic quality improvement planning

# Overview of School Mental Health Quality Domains and Indicators

## Quality Domains

- Teaming
- Needs Assessment and Resource Mapping
- Mental Health Promotion for All (Tier 1)
- Early Intervention and Treatment Services and Supports (Tiers 2/3)
- Screening
- Impact
- Funding and Sustainability

### School Mental Health National Quality Assessment Overview of Domains and Indicators



#### Teaming

- Multidisciplinary teams
- Youth and family partnership
- Community partnerships
- Addresses all tiers
- Avoid duplication and promote efficiency
- Best practices for meeting structure/process
- Delineated roles/responsibilities
- Effective referral processes to school and community services
- Data-based decisions to determine student interventions
- Data sharing



#### Needs Assessment/ Resource Mapping

- Assess student mental health needs
- Assess student mental health strengths
- Use needs assessment results to select, plan and implement services and supports
- Conduct resource mapping to identify existing services and supports
- Use resource map to select, plan and implement services and supports
- Align existing services and supports



#### Mental Health Promotion Services & Supports

TIER 1

- Tier 1 Services and Supports:
  - School Climate
  - Teacher and School Staff Well-Being
  - Positive Behaviors and Relationships
  - Positive Discipline Practices
  - Mental Health Literacy
  - Social Emotional Learning
- Determine whether services and supports are evidence-informed
- Ensure fit with strengths, needs, cultural, and linguistic considerations
- Ensure adequate resources for implementation
- Provide interactive training and ongoing supports
- Monitor fidelity

#### Early Intervention and Treatment Services & Supports

TIERS 2&3

- Provide access to needed services and supports
- Determine whether services are evidence-informed
- Ensure all services and supports are evidence-informed
- Ensure fit with strengths, needs, cultural, and linguistic considerations
- Ensure adequate resources for implementation
- Provide interactive training and ongoing supports
- Monitor fidelity
- Ensure intervention goals are SMART
- Monitor student progress across tiers
- Implement a systematic protocol for emotional and behavioral crisis response

#### Screening

- Use best practices for mental health screening planning and implementation
- Indicate the number of students:
  - Enrolled in school
  - Formally screened in the absence of known risk factors
  - Identified as being at risk or already experiencing a mental health problem
  - Referred to a mental health service following identification
- Of students screened, how many screened for [specific mental health areas]



#### Funding and Sustainability

- Use multiple and diverse funding and resources to support full continuum of school mental health
- Leverage funding and resources to attract potential contributors
- Have strategies in place to retain staff
- Maximize expertise and resources of partners to support ongoing professional development
- Have funding and resources to support:
  - Tier 1 (mental health promotion) services
  - Tier 2 (early intervention) services
  - Tier 3 (treatment) services
- Maximize reimbursement for eligible services



#### Impact

- # of students who:
  - Were eligible to receive Tier 2 or Tier 3 school mental health services
  - Received at least one Tier 2 or Tier 3 service
  - Demonstrated documented improvement in educational functioning
  - Demonstrated documented improvement in social, emotional and behavioral functioning

- Use best practices to:
  - Document impact on educational outcomes
  - Document impact of social, emotional, and behavioral outcomes
  - Disaggregate student mental health service and support data to examine student-level outcomes based on sub-population characteristics
  - Document and broadly report the impact of your comprehensive school mental health system



For a full copy of the school mental health national quality assessment, visit [www.theSHAPESystem.com](http://www.theSHAPESystem.com)

- Tier 1 Services and Supports:
  - School Climate
  - Teacher and School Staff Well-being
  - Positive Behaviors and Relationships
  - Positive Discipline Practices
  - Mental Health Literacy
  - Social Emotional Learning
- Determine whether services and supports are evidence-informed
- Ensure *all* services and supports are evidence-informed
- Ensure fit with strengths, needs, cultural, and linguistic considerations
- Ensure adequate resources for implementation
- Provide interactive training and ongoing supports
- Monitor fidelity

**SHOPE** School Health Assessment and Performance Evaluation System

What is **SHAPE?**

Your **FREE** assessment tool designed to improve school mental health system quality and trauma responsiveness at the school, district, and state levels.

Learn More

**Take a Tour**

From our program quality and trauma responsiveness assessments and feedback reports to our extensive library of free and low-cost screening and assessment measures, SHAPE delivers the tools you need to improve your school or district's mental health programs and increase your grant funding opportunities. Take the tour to learn more.

I want to sign up for:

Myself My School My District My State

SHAPE helps districts and schools improve their school mental health systems! **HOW?**

SHAPE users map their school mental health services and supports. Assess system quality using national performance standards. Receive custom reports and strategic planning guidance and resources. Utilize additional SHAPE features including the Screening and Assessment Library and Trauma-Responsive Schools Assessment and Resources. Use state and district dashboards to collaborate with schools in your region.

**SHAPE Features**

School & District Profiles, Quality Assessment & Resources, District & State Dashboards, Screening & Assessment Library, Trauma-Responsive Schools Assessment & Resources.

**School Mental Health Matters**

Youth are **8x more likely** to complete mental health treatments in schools than in other community settings.

3/4 of youth who receive mental health services access them in schools.

Positive school climate integrated with social emotional learning **improves school safety** and decreases bullying.

Students who participate in social emotional learning programs improve academic performance by **11 percentile points**.

**Put your star on the map**

92 schools have earned Gold Star Status

112 school districts have earned Gold Star Status

28 states have schools or districts with Gold Star Status

Learn More

# School Health Assessment and Performance Evaluation (SHAPE) System

Take a tour – <https://tour.theshapesystem.com/>

SHAPE helps districts and schools improve their school mental health systems! **HOW?**



(NCSMH, 2019)

# Assessments & Reports

With a SHAPE account, you can assess, track, and advance your school or district's quality improvement goals and assess trauma responsiveness across multiple areas. You'll get free, customized reports to drive your action planning, share your performance with key stakeholders, and help you monitor your progress over time.

The screenshot shows the SHAPE website interface. At the top, the logo 'SHAPE' is followed by 'School Health Assessment and Performance Evaluation System'. Navigation links include 'About Us', 'Contact Us', 'Take a Tour', and 'Sign Up'. A 'Log in' button is in the top right. A modal window titled 'Teaming - Complete' is open, displaying a report. The report header includes the SHAPE logo and 'Quality Domain | Teaming'. Below this is a gauge showing an 'OVERALL COMPOSITE SCORE: 5'. A bar chart shows scores for five categories: 'Have multidisciplinary team' (5), 'Promote efficiency' (4), 'Use meeting best practices' (6), 'Promote data sharing' (5), and 'Connect to community resources' (5). The 'About Teaming' section defines a school mental health team and lists five criteria for a self-assessment score.

**SHAPE** Quality Domain | Teaming  
The School Health Assessment and Performance Evaluation System

OVERALL COMPOSITE SCORE: 5

| Category                       | Score |
|--------------------------------|-------|
| Have multidisciplinary team    | 5     |
| Promote efficiency             | 4     |
| Use meeting best practices     | 6     |
| Promote data sharing           | 5     |
| Connect to community resources | 5     |

**About Teaming**

A school mental health team is a group of school and community stakeholders that meet regularly and use data-based decision-making to support student mental health, including addressing individual student problems, improving school climate, and promoting well-being. Schools, districts, and community partners, including families, must be committed to building a multi-tiered systemic approach that addresses the academic, social, emotional, and behavioral needs of all students. Your CSMHS team's self-assessment score comprises your ratings on:

- 1) having a multidisciplinary school mental health team;
- 2) having streamlined teams that avoid duplication and promote efficiency;
- 3) having a productive meeting structure;
- 4) having a system in place to promote data sharing among team members; and
- 5) having well-established working relationships with community mental health

National Center for School Mental Health  
737 West Lombard Street, 4th Floor  
Baltimore, MD 21201

P: (410) 706-0980  
F: (410) 706-0984  
E: csmh@som.umaryland.edu

About Us Take a Tour Sign Up

Privacy Policy | Terms of Use | ©2019 University of Maryland. All rights reserved.

# Targeted Resources & Guides

Our comprehensive resource library includes public access resources hand selected by a team of school mental health experts. Sort resources by topic to hone in on specific team goals or generate ideas for action steps related to your own improvement goals.

The collage features several key documents:

- PromotePrevent 3 Bold Steps: A Framework for Effectively Implementing Evidence-Based Programs and Practices (EBPs)** - An introduction to a framework for EBPs, including an overview, key findings, and a three-stage implementation process.
- SHOPE Quality Guide: Needs Assessment/Resource Mapping** - A guide developed by the Center for School Mental Health for the SHAPE System, providing guidance on needs assessment and resource mapping.
- Blueprint for Authentic Engagement** - A document with a graphic showing a group of people in a meeting, with a circular diagram below it.



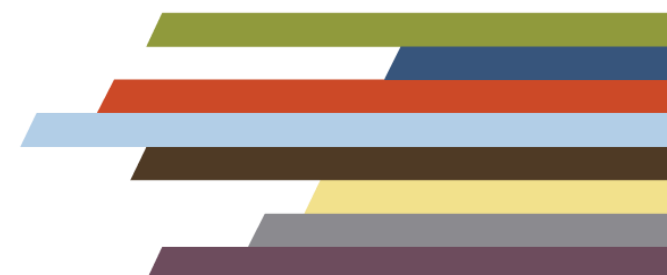


## Discussion

How does this content fit with your district's understanding and implementation of mental health early intervention and treatment services and supports?

## Strategic Planning

- State a specific goal for your district within this domain
- List 3 potential action steps to move this goal forward





# MHTTC National School Mental Health Learning Collaborative

---



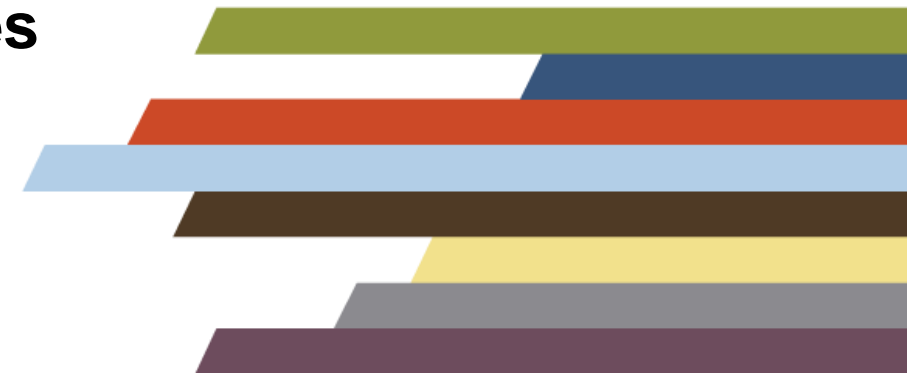
MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



## National School Mental Health Learning Collaborative Objectives:

1. Build capacity of MHTTC Center leaders and state teams to **increase collaboration and strategic planning** among state and district education and behavioral health leaders to advance Comprehensive School Mental Health Systems (CSMHSs).
2. Equip MHTTC Center leaders and state teams to **train states and districts in the foundational principles and strategies of CSMHSs** based on a national curriculum aligned with national performance standards.





MHTTC

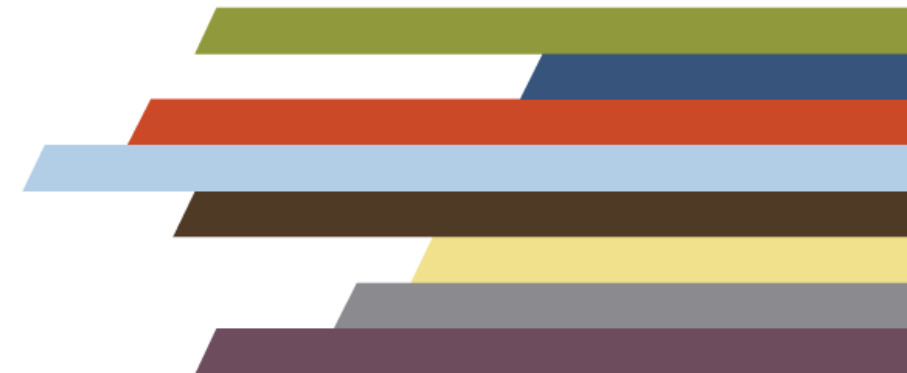
Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



## National School Mental Health Learning Collaborative Objectives (cont'd):

3. Equip MHTTC Center leaders and state teams with **tools and strategies to engage states and districts** in ongoing CSMHS quality improvement.

4. Promote **cross-regional and cross-state networking and shared learning** about best practices, successes and challenges of CSMHS implementation, including policy strategies to advance CSMHS





MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

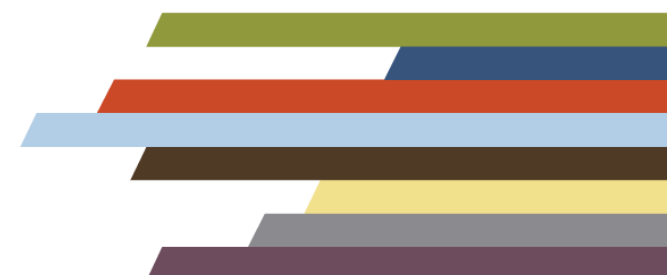


# National School Mental Health Learning Collaborative Overview

|                    |  |                          |
|--------------------|--|--------------------------|
| In-Person Meeting  | Overview                                 | March 14-15, 2019        |
| Virtual Learning 1 | Teaming/Alignment                        | Thursday, April 4, 2019  |
| Virtual Learning 2 | Mental Health Promotion (Tier 1)         | Thursday, May 2, 2019    |
| Virtual Learning 3 | Early Intervention/Treatment (Tiers 2/3) | Thursday, June 6, 2019   |
| Virtual Learning 4 | Screening                                | Thursday, July 11, 2019  |
| Virtual Learning 5 | Funding/Sustainability                   | Thursday, August 1, 2019 |

# Results of Learning Collaborative

- 160 participants, including MHTTC Center staff and state and district mental health and education leaders representing 36 states.
- 82% of participants reported feeling confident in their state or region's strategic planning to advance comprehensive school mental health systems after the Learning Session
- 97% of participants found the information shared at the Learning Session useful, indicating the following areas as most useful:
  - Strategic planning
  - Sharing and networking with participants from other states and regions
  - Obtaining school mental health resources

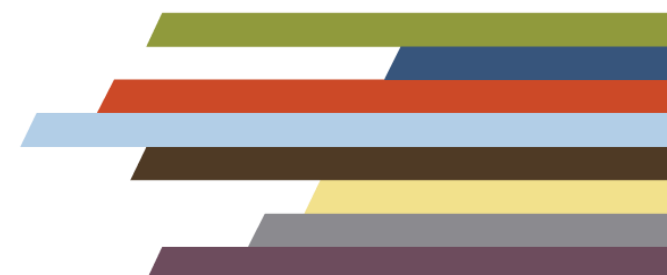


# Results of Learning Collaborative

“As a result of the learning session, we have conducted a state-wide meeting with 57 different agencies that provide school mental health services to introduce materials from the learning session.”

“I've encouraged educators I'm working with to move through their school mental health plans in an effective way, using the national school mental health curriculum as a guide.”

“The learning session has given me additional tools to implement and improve data collection and usage, improve referral process, create mental health teams. Excited to continue the conversation.”





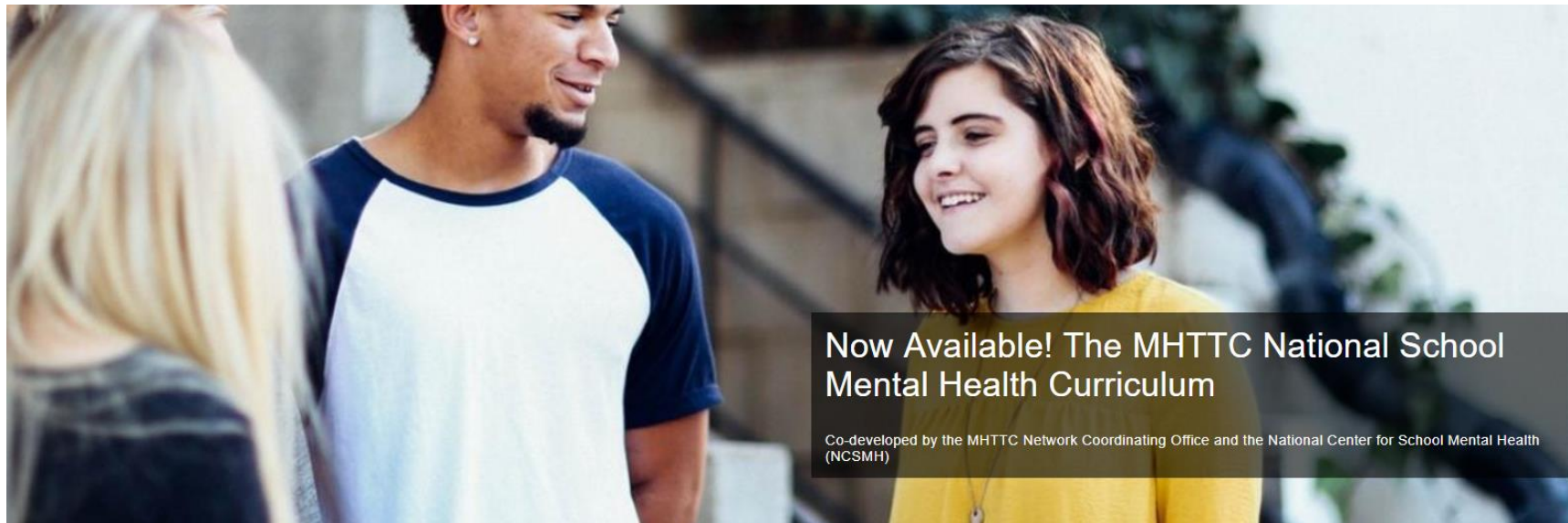
MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration



# The National School Mental Health Curriculum is LIVE on the MHTTC website!



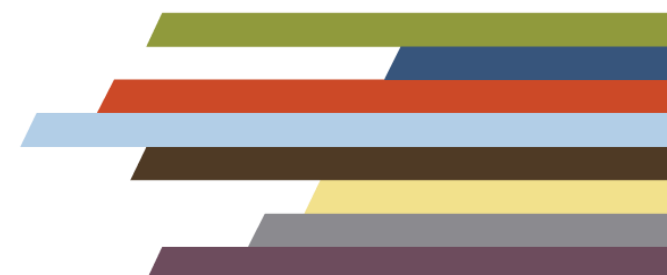
<https://mhttcnetwork.org/centers/mhttc-network-coordinating-office/national-school-mental-health-projects>

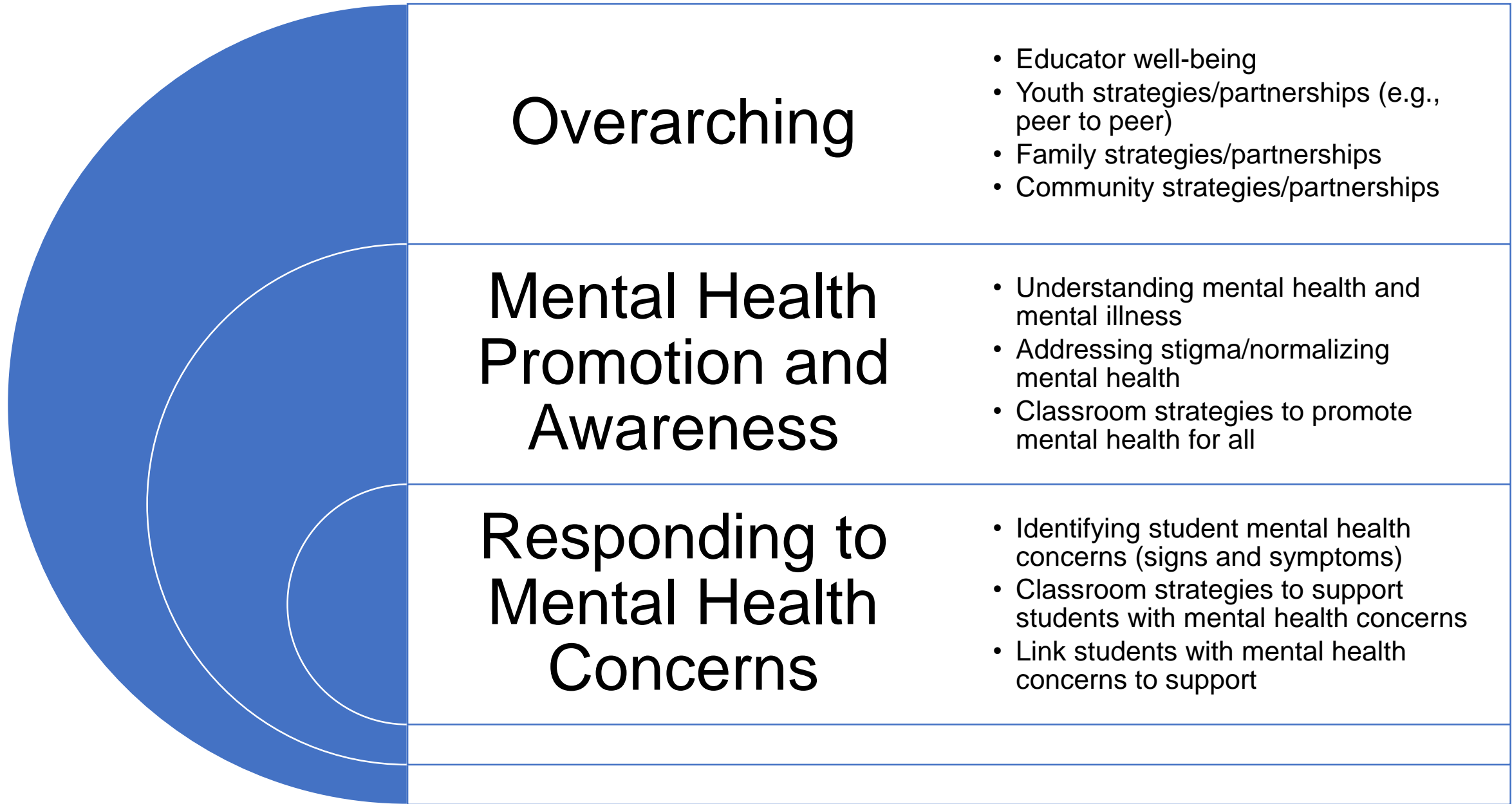


# Plans for Year 2

The MHTTC Network is collaborating with the NCSMH to develop a new training package for educators with a focus on mental health literacy that will be disseminated to school districts across the country.

- 2-3 hour free online course
- Brief, high-impact video examples
- Mobile friendly website with resources





INFUSED THROUGHOUT TRAINING: culture, MTSS, trauma-informed practices



MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



# Q & A

