

Testimony on Mental Health and Wellness Services and Programs in Schools

Office of Mental Health and Substance Abuse Services

**House Education Committee Informational Meeting
January 17-18, 2024**



pennsylvania
DEPARTMENT OF HUMAN SERVICES

The Office of Mental Health and Substance Abuse Services (OMHSAS) within the Department of Human Services (DHS) is appreciative of the opportunity to provide this written testimony to the House Education Committee to be considered along with the testimony it will receive in the hearing on January 17-18, 2024, on the subject of 'Mental Health in Schools.' Our testimony will outline our work and affirm our commitment to providing mental health and wellness services and programs within schools. We believe it is essential that OMHSAS, county mental health/intellectual disability (MH/ID) offices, behavioral health managed care organizations (BH-MCOs), primary contractors (PCs), and behavioral health providers partner with the Department of Education and individual school districts to ensure that we are effectively coordinating to meet mental health needs of all students in schools.

Pennsylvania has several mental health supports available to individual children through the Medical Assistance (MA) program. These supports were developed to meet children and their family's mental health needs in their homes, schools, and communities. Within the past ten years, school-based behavioral health (SBBH) programs such as Positive Behavioral Intervention and Supports (PBIS) and the Pennsylvania Network for Student Assistance Services were developed and implemented by the BH-MCOs in collaboration with school districts, county, and state partners. The SBBH programs have positive outcome data and have been well received by students, their families, and the schools -- as indicated by an increase in service requests.

Investing in established programs with demonstrated successes and the ability to be expanded, such as PBIS, is critical to supporting student mental health. The popularity of the SBBH programs, combined with staffing shortages across the human service field, often results in schools using student mental health grant funding to offer SBBH staff an opportunity to work directly for the school. Staff leaving the employ of a provider-run SBBH program to work directly for the school further exacerbates staffing challenges for SBBH programs and can limit access to other members of the community outside of the hiring school district as the staff is now only serving one specific district. When SBBH programs are understaffed, wait times for services are increased.

School districts are not alone in supporting youth mental health; establishing partnerships with mental health providers can expand support available to schools. County mental health agencies are eager to work with school districts to facilitate partnerships with primary contractors, BH-MCOs, and area providers. DHS advises school districts to establish relationships with the appropriate county mental health office and BH-MCO to build mental health services programming unique to their students' needs, such as psychiatric outpatient services and intensive behavioral health services (IBHS), which include individual services, group services, and applied behavior analysis (ABA) services. Family-based mental health services (FBMHS) and mental health targeted case management may also be delivered at school. IBHS and FBMHS also deliver treatment in the home setting, so the child's care is consistent in the home and school — allowing for greater coordination.

The following data is provided by PerformCare, one of the five BH-MCOs serving Pennsylvania, showcasing how services are delivered in schools.

- 21.6% of Behavioral HealthChoices (an MA managed care program) funding was spent in the school setting.
- \$21.2 million was spent on actual treatment services in a one-year period.
- Each of the 48 school districts covered by PerformCare have students who received some BH-MCO-funded mental health services.

OMHSAS, in collaboration with counties, BH-MCOs, and other state agencies, supports mental health programming in Pennsylvania schools in several specific ways that include identifying risks through the Student Assistance Program, preventing youth suicide, building positive school culture, and serving students in crisis.

Identifying Potential Risks Through the Student Assistance Program (SAP)

Pennsylvania's Student Assistance Program (SAP) is a partnership supported by OMHSAS, the Pennsylvania Department of Education (PDE), and the Department of Drug and Alcohol Programs (DDAP). SAP started more than 30 years ago, and leadership from all three agencies oversees SAP implementation. The established process involves school SAP teams partnering with behavioral health "liaisons" from community agencies to screen or assess students when there is concern that a student may have an underlying mental health or drug and alcohol concern. SAP liaisons are knowledgeable about the range of services, supports, and resources available within a county and support school teams through consultation and by providing recommendations for student support in school and the community. OMHSAS provides funding to each county to support MH liaison services and funds five SAP Regional Coordinators who work at the regional level to provide support to schools and SAP teams. Additional funding would allow school districts to consistently increase the number of SAP MH liaisons providing services to schools and reach more children and families.

Preventing Youth Suicide

Through the federal Garrett Lee Smith (GLS) Youth Suicide Prevention grants, OMHSAS provides funding and project management to schools related to suicide prevention and awareness. Although the school-focused grant was completed in 2019, a new grant was received that is currently focused on implementing suicide prevention activities at the county level, which includes working with school districts. Through the GLS grants, schools have been supported in implementing the Behavioral Health Works Mental Health Screening tool, holding suicide prevention awareness events, and receiving ongoing technical assistance for suicide risk management.

Building Positive School Culture

In coordination with the Pennsylvania System of Care Partnership, OMHSAS has utilized federal funds to support Youth MOVE PA by implementing the evidence-based youth resiliency model, Sources of Strength, in collaboration with interested school districts. Sources of Strength is a program that trains student peer leaders and adult allies to intentionally build a school culture

that enhances protective factors. Enhancing protective factors has proven to reduce substance use disorders, suicidality, bullying, and other harmful dynamics within a school. In fact, research published in several journals, including the American Journal of Public Health, has identified increased help-seeking behavior and reduced substance use within schools that have implemented Sources of Strength with fidelity to the model. Currently, funding for Sources of Strength allows this model to be piloted in a small number of school districts, and OMHSAS is working to make this model sustainable and more readily available.

In addition to the model mentioned above, OMHSAS has funded the Pennsylvania chapter of the National Alliance on Mental Illness (NAMI), NAMI Keystone, to pilot crisis training for youth-focused public safety and school personnel. CIT for Youth empowers school resource officers, juvenile probation officers, and school personnel with additional skills when responding to youth who may be experiencing a behavioral health crisis. This training is increasingly relevant for schools as many districts are increasing the use of school resource officers and is intended to connect with existing Crisis Intervention Team (CIT) programs across the commonwealth.

Serving Students in Crisis

Students experiencing a behavioral health crisis in school are a priority and require cross-system collaboration with key players such as the Office of the Attorney General's Safe2Say program, PDE, OMHSAS, 988 call centers, and local crisis response to ensure they are getting the care and support they need and deserve. OMHSAS is focused on instituting national best practice guidance in responding to children's crises and ensuring our behavioral health crisis response system is well-positioned to support children and their families in the least restrictive way possible. OMHSAS has recently created a position dedicated to developing this work and looks forward to improving the crisis response system for children and all Pennsylvanians.

In conclusion, OMHSAS would like to thank you for the opportunity to provide written testimony to the committee. School-Based Mental Health is essential to the youth and families of Pennsylvania, and our office is committed to supporting these efforts.