School Community Partnership for Mental Health

Milwaukee Model- Integrating Community Mental Health Services into Public School System

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SCPMH The Need

- In 2005, Milwaukee National Family Week Partnership sponsored study of youth mental health care in Milwaukee
  
  - Finding: Poor access to services for Milwaukee youth needing mental health care

- MPS support staff estimated only 5% of children referred for mental health services actually receive needed care.
  
  - Poverty, stigma and school bussing are barriers to families accessing services and collaborating with school staff

- No cohesive system for tracking referrals from schools to community providers

- No system for collaboration between families, schools and community providers

- MPS policy prevented provision of mental health services in schools by outside agencies
SCPMH The Leadership Team

- Milwaukee Public Schools
  - Support Services Coordinators and Safe Schools Healthy Students

- Mental Health Agencies: Aurora Family Services, Pathfinders, Sebastian Family Psychology Practice

- Academia: University of Wisconsin –Milwaukee and Medical College of Wisconsin

- City of Milwaukee Health Department

- Regional: Milwaukee County, Medicaid HMOs, Rogers InHealth, Planning Council for Health and Human Services

- State: Department of Health Services, American Pediatric Association WI Chapter
SCPMH The Model Design

- Youth Mental Health Connections planning process led by Planning Council for Health and Human Services (2008-09)

- Model based on outcomes from Baltimore, Albuquerque and Minneapolis

- CHW family-school-community triangle

- Integrate community-based mental health agencies into schools to provide teacher/parent consultation & direct services to students/families

- Train school staff and parents about conditions and classroom strategies that support mental health and school success

- Coordinate care with primary health care providers, psychiatrists, agency providers and schools

- Develop policy and financial solutions that support increased mental health services
Project Goals

- Earlier access to consultation and therapeutic services from community mental health providers
- Increased teacher and parent collaboration with mental health providers
- More therapeutic sessions for students
- Enhanced systems integration
- Payment/funding reform to support early intervention
Targeted Student – Specific Outcomes

- Fewer symptoms or mental health concerns
- Improvement in attendance
- Reduction in suspensions
- Improvement in academic achievement
Coordinated with MPS Priorities

- Positive Behavioral Intervention Supports (PBIS) - an evidence-based, highly structured, school-wide, behavior intervention system

- Integration of social-emotional skill development with a three-tiered system of reading and math instruction (RtI)

- Enhanced parent engagement
Agency Activities

Evidence Based Therapeutic Practices with students and families

Goals:
- Improved school functioning and mental health

Activities:
- Evidence Based Therapeutic Practices delivered at school/ office/ home

Mental Health Consultation
Case-Specific, Family-Centered Collaborative Intervention Planning

Goals:
- Build capacity of parents and staff to address education and emergent mental health needs of students and families and build relationship with family

Activities:
- School, provider and parent participate in student-specific, intervention planning team

Embedding in School Community

Goals:
- Increase trust in provider and school, knowledge of mental health as it relates to learning, systemic approaches to learning supports

Activities:
- Attendance at school events, parent teacher conferences, etc.
- Training of staff and parents as planned by collaborative teams of parents, school staff and provider (regular face-to-face and phone-in times)
- Participation in school/community planning for learning supports

Community Health Workers
Support parent engagement and research activities at all levels of the Model

PBIS

Intensive Interventions
Specialized individualized systems for students with high-risk behavior

Targeted Interventions
Specialized group systems for students with at-risk behaviors

Universal Interventions
School/classroom-wide systems for ALL students, staff & settings

Mental Health Consultation continues throughout therapy services
Three community-based agencies providing consultation and direct services in collaboration with four Milwaukee Public Schools

Project coordinator working with Leadership Team to oversee implementation

Public Health research partner developing and testing a process for outcomes research incorporating Community Health Workers

Operations manual and referral system being developed to support expansion
Training school staff and parents

- Twice monthly email tips to school staff regarding effective strategies to support youth with challenging behaviors
- Mental health consultation at grade level meetings, staff meetings and one-to-one with school staff
- Psycho-educational resources for parents via newsletters and backpack mail
Process Outcomes:

- Thriving and growing collaboration
- MPS policies and procedures
- Project manual for consistency and replication
- Creative work to engage parents
- Ongoing positive endorsement from schools
- Evaluation/research protocols that are responsive to parents, schools and providers
A Preliminary Pilot Outcome:

- When referred by school to a community mental health provider, rate of follow-up by parents went from an estimated 5% prior to pilot to 45% in year one and 60% in year two.
SCPMH Pilot Implementation 2012—2014

Healthier Wisconsin Partnership Program Grant:

- Increase strength of partnership between MPS staff, community providers, families and academic researchers
- Expand CHW parent engagement role in all aspects of SCPMH
- Facilitate Evidence Based Clinical Practice education series
- Add part-time school coordinator to team
- Implement comprehensive evaluation of SCPMH
SCPMH Ancillary Services Funding for Sustainability:

- To fund non-reimbursable ancillary services by community mental health agencies
  - Training
  - Consultation
  - Coordination

- $12,000 per school per year for each of 4 schools (part time)
CHW Roles Bridge Building

- Assist with delivery and completion of initial paperwork by parents - ROIs, research consents and data collection, service initiation, etc.

- Check-ins with providers and teachers

- Two-way communication with families

- Provide links to broad range of resources – school social worker and others

- Participate in school’s family events and staff meetings

- Provide a cultural bridge for families to schools and providers
SCPMH
The Schools and Community working together for the mental health of Students