

WEBINAR #3

Forging Partnerships Between Schools and the Crisis Coordinated System of Care

Pre-Webinar Newsletter

Imagine an ideal crisis response system.

A collaborative network between schools and crisis systems providing complete and comprehensive support that includes preventative education for students, parents, and staff; interventional strategies for parents and staff that are tailored to the specific crises and needs of various student demographics; and prompt coordinated care administered through a school and crisis system-based partnership.

A comprehensive school-focused crisis system of care like this is supported by the Multi-Tiered Systems of Support (MTSS) in schools.¹ In this newsletter, we will explore similar models along with five actionable strategies to facilitate the implementation of such systems.

The COVID-19 pandemic exacerbated mental health challenges amongst young people, impacting their well-being, academic performance, engagement, and sense of safety at school.² More than two-thirds of public schools reported an increase in the number of students seeking mental health services. Four in ten U.S. high school students reported feeling sad or hopeless with nearly 30% reporting poor mental health and 20% strongly considering suicide.^{3,4} Although most schools do offer some mental health services, in a 2022 survey by Kaiser Family Foundation, reportedly only 12% of schools strongly agreed that they had the ability to effectively provide mental health services to all students who need them.⁵ Barriers, including limited access to licensed health providers, limited staff bandwidth relative to caseload, and inadequate state funding hinder schools' capacity to address these concerns.⁶

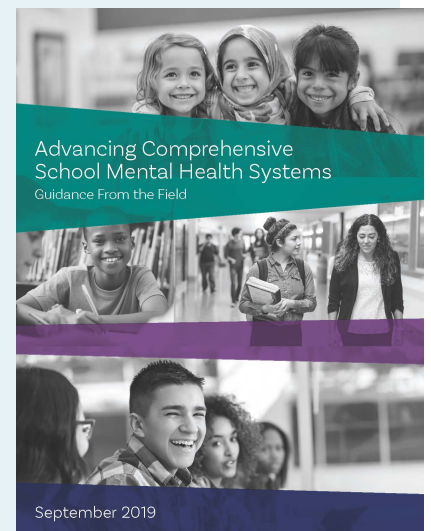
A VISION FOR INTEGRATED CRISIS RESPONSE SYSTEMS IN SCHOOLS

Schools and crisis systems have a unique opportunity to integrate their practices to form a dynamic safety

net for students and families facing behavioral health crises. Some schools are already doing this through *comprehensive school mental health systems (CSMHS)* that reflect valuable partnerships between behavioral health services and schools to support youths and families.⁷

To read more about CSMHS, explore this report from the National Center for School Mental Health: [Advancing Comprehensive School Mental Health Systems: Guidance from the Field, September 2019 \(PDF\)](#).

Join our webinar on Thursday, **February 27, 2025** to hear from CSMHS directly.



The Value of Comprehensive School Mental Health Systems: Positive Outcomes⁸



Better academic outcomes

Access to care

Early identification and intervention

Positive school climate and safety

Youth, family, educator and peer engagement

A continuum of services

Better psychosocial outcomes

What if more schools and crisis systems could quickly respond to students in crisis? And what if they could go beyond just responding and also provide long-term collaborative recovery support?

INTEGRATED CRISIS RESPONSE SYSTEM IN SCHOOLS

Key Partners

To enable communities to respond quickly to students in crisis and provide collaborative wraparound support, integrated crisis response systems rely on key partners including:

- **School Mental Health Staff:** Social workers, counselors, psychologists, and nurses support students' emotional, social, and mental well-being through assessments, interventions, and resource provision.
- **Community Care Providers:** Mobile crisis teams, crisis stabilization centers, and clinicians (including licensed mental health providers), respond to students in crisis at their home, school, or community. They offer immediate support and ensure a smooth transition to further care, helping avoid emergency room visits and potential juvenile justice involvement.
- **Policymakers:** Policymakers play a crucial role in crisis care systems by creating policies that promote school-mental health partnerships, establishing mandates regarding mental health training and education, and ensuring regulations

support effective crisis care in schools.

- **Parents/Caregivers/Students:** Parents, caregivers, and students with lived experience are key partners in crisis care and should be involved in every part of the planning and evaluation process. Those who have experience with mental health care systems can inform policies and procedures that enhance outcomes.⁹ Utilizing parents and caregivers also helps

foster trust and confidence between them and the schools.¹⁰ Lastly, youths can serve as powerful voices as both persons with lived experience and peer leaders.

- **School Administrators and Safety/Security Personnel:** Administrators and school security personnel (who research shows are present in over half of U.S. schools), are among the many other partners instrumental to school-based mental health systems.¹¹

Together, these partners create a strong foundation of expertise and experience that can seamlessly translate into collaborative partnerships and subsequent comprehensive systems.

Support Materials Are Coming Soon!

We encourage you to stay tuned following our Learning Collaborative this January – April 2025, which is focused on elevating children, youth, and families as those with lived experience in building strong crisis systems. Although this opportunity is now closed for registration, we anticipate the release and dissemination of accompanying materials to support ongoing work in this area.

To actualize this vision, however, essential, actionable strategies must be implemented.

Six Strategies

Below are evidence-based strategies for building an integrated crisis response system:

1. Implement crisis training for all school staff.
2. Create at-risk screening protocols with crisis teams and schools.
3. Streamline access to crisis care teams through virtual care and mobile crisis units for students/families.
4. Create shared platforms/contact methods for crisis teams and schools to communicate.
5. Develop wellness-focused initiatives and education for students (i.e., peer support groups and other mental health support initiatives with a focus on crisis).
6. Embed crisis staff in schools (i.e., peer support staff).

Some states have already made great strides toward these efforts, yet we acknowledge that many of these strategies rely on an often-elusive supportive infrastructure including workforce availability, funding, and appropriate policies and procedures.

POLICIES, PROCEDURES, AND SUPPORTIVE INITIATIVES

It can be challenging to envision a supportive infrastructure to drive the implementation of an integrated crisis response system, especially when resources are limited. However, recent state and federal advancements can help facilitate these efforts.

In 2023, The Centers for Medicare and Medicaid Services (CMS) released [new guidance for school-based health services](#) including behavioral health services. This guidance allows higher reimbursement rates for in-school providers and expands provider qualifications. CMS has also made advancements to alleviate the administrative burden on schools; expand access to 988 services through school-based Medicaid partnerships; encourage the use of CHIP Health services; provide technical assistance for school-based Medicaid services; and provide state grants for school-based service expansion.¹²



SAMHSA's Project AWARE and the U.S. Department of Education have also developed programs to improve student access to behavioral health services.¹³

In addition to the many federal-based initiatives that accounted for, according to a 2021–22 survey, 52% of school-based mental health service funding,¹⁴ there are state-based programs, policies, and initiatives, listed at the end of this document.

THE SHIFT: MOVING FROM FRAGMENTED TO COMPREHENSIVE APPROACHES

Implementing a comprehensive, evidence-based, coordinated crisis care system in schools requires a stepwise and strategic approach with engagement and collective buy in from all partners.

We encourage you and your team to consider these actionable next steps:

- **Engage in Goal Setting:** We urge crisis systems to locate and connect with schools within your community and vice versa. Cross sector collaboration to establish shared goals, barriers to action, and processes to address crisis needs within your community.
- **Develop Collaborative Crisis Training Programs:** Work collectively to create and disseminate training programs for crisis teams and schools highlighting best practices to support students and their families.

- **Review State Policies:** Review and understand your local and state-based policies around behavioral health support and crisis response. Where are these opportunities that are not being fully leveraged?
- **Establish Formal Partnerships:** After identifying partners, establishing shared goals, and ensuring a supportive infrastructure (policy and financing), develop agreements between partners

(especially schools and crisis systems). In these agreements, articulate roles, expectations, data sharing procedures, communication protocols, and workflows.

- **Pilot a Program:** To assess the effectiveness of your model, test workflows in select schools, evaluate the outcomes, and refine the model accordingly. There is no one size fits all approach.

VIGNETTES – TWO VERSIONS OF THE SAME STORY

Case Study: Addressing a Gap in School Crisis Support

Vignette 1

Ms. Lopez, a high school social worker, was called to assist Mia, a 16-year-old student who had expressed feelings of hopelessness and admitted to thoughts of self-harm. After ensuring Mia was safe in her office, Ms. Lopez contacted the local crisis response hotline for immediate intervention. However, she was informed of significant delays with no guarantee of timely support.

While waiting, Ms. Lopez led grounding exercises and stayed with Mia, offering reassurance and support. She also reached out to the school's emergency team and arranged follow-up care through a community nonprofit. By the time a crisis worker arrived later that evening, the delay had taken an emotional toll on Mia.

Vignette 2

In an alternative scenario, envision Ms. Lopez being able to contact a crisis response hotline with which the school had a formal partnership and getting connected to a designated school liaison. The school liaison would ensure a crisis team would be dispatched in a reasonable amount of time. The crisis response team would include a mental health specialist trained to work with youth and a peer support staff member. The response team would work collaboratively with Ms. Lopez to ensure Mia quickly received the support she needed. A safety plan would be created for Mia, including a warm handoff to a community-based mental health provider. Both Mia and Ms. Lopez would feel supported and heard. Most importantly, Mia would receive the care she needed.

Developing a fully integrated and supportive partnership between crisis care systems and schools requires collaboration between educators, school-based mental health providers, policymakers, community partners, students, and their families. These stakeholders need to make a concerted effort to build safe, comprehensive, and equitable places of learning for the next generation.

If you are interested in exploring any of the strategies outlined in this document, please reach out to SAMHSA TTAC for Technical Assistance at support@988crisisttac.org.

Webinar Registration Is Open!

We also encourage you to register for our upcoming webinar, [Forging Partnerships Between Schools and the Crisis-Coordinated System of Care](#) on Thursday, February 27, 2025, at 2pm, where we will explore specific programs and the future of coordinated crisis care systems in education.

[Register for the webinar](#)

COMMUNITY SPOTLIGHT

Learn more about state-based programs, policies, and initiatives:

California

[Mental Health](#)

[Student Services Act:](#)

Establishes partnerships between county mental health or behavioral health departments and educational entities.

Nevada

[Student Services Division](#)

[Crisis Response Team:](#)

Works directly with school teams and families to conduct threat assessments, provide training, consult schools on suicide ideation assessments, and offer short-term counseling or reentry planning as needed.

Missouri

[Suicide Prevention & 988 Guide for Schools:](#)

Missouri offers robust 988 programming including the Missouri 988 Task Force's influence on the state's 988 Suicide and Crisis Lifeline. This offers statewide coverage, community partnerships, 988 promotion, and a school-based guide comprised of state data, resources, prevention initiatives, crisis response services, and postvention responses.

CITATIONS

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- 6 NCES. Press Release - *Roughly Half of Public Schools Report That They Can Effectively Provide Mental Health Services to All Students in Need - May 31, 2022*. nces.ed.gov. Published May 31, 2022. nces.ed.gov/whatsnew/press-releases/05_31_2022_2.asp
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