

MENTAL HEALTH SERVICES INFRASTRUCTURE ASSESSMENT

Consider current status and then plan coordinated efforts to address the mental and behavioral health needs of students, and increase capacity to support their needs

5 = Consistently Used 4 = Currently in Place 3 = Planning Underway 2 = Need to Develop 1 = Not Yet Considered

I. Awareness, training, and system supports

School staff, parents, youth, and community are each provided with:

1. Ongoing training/information, to increase awareness/recognition of:

a. risk and protective factors impacting children/youth	5	4	3	2	1
b. typical and atypical child/youth behaviors by age in stressful & other difficult life situations	5	4	3	2	1
c. culturally responsive approach to serving children/youth	5	4	3	2	1
d. actions staff can take to support the needs of children/youth	5	4	3	2	1
e. referral process for linking students/families to access mental health/behavioral health resources and services	5	4	3	2	1

2. Strengthen school supports that involve parents and community in:

a. student assistance team/child study team involvement	5	4	3	2	1
b. planning to provide student support and access to services	5	4	3	2	1
c. communications with and connections to parents/families appropriate to their culture and language	5	4	3	2	1

3. Track and report activities, with data collection and review:

a. mental health needs identified	5	4	3	2	1
b. resources and services available and accessed	5	4	3	2	1
c. outcomes measured	5	4	3	2	1
d. data share with key leaders for decision-making	5	4	3	2	1

II. Formalized referral process is established

1. Clear understanding among referral agents (staff, parents, youth, community, etc.) of the process for making referrals

5	4	3	2	1
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2. Referral forms provided to all referral agents (staff, partners, & other child-serving agencies, parents/youth, etc)

5	4	3	2	1
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3. Protocol for referral and exchange of information is understood by school personnel, community agencies, and parents/families

5	4	3	2	1
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4. System coordinated to triage referrals

5	4	3	2	1
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ASSESSING MENTAL HEALTH SERVICES - SCHOOL INFRASTRUCTURE AND CONNECTION TO COMMUNITY SERVICES

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III. System sustained for functional teams to do referral and triage (coordination among the providers for children and families)

1. Collect/share information about the functions and services that mental health staff provide within the 3 levels of intervention: Universal, Targeted, and Indicated (see chart last page)	5	4	3	2	1
2. Framework is in place to serve the full MH continuum of care	5	4	3	2	1
3. School personnel/administrators have a clear and approved process for connecting to community MH resources and providers.	5	4	3	2	1
4. Plan in place to address gaps/barriers/overlap within all systems	5	4	3	2	1
5. Evaluate effectiveness of referral/triage to increase service access	5	4	3	2	1

IV. Infrastructure, Capacity, Financing, and Resource Allocation and Management

1. Resource management team comprised of school & partner agencies meet regularly to review and address resource needs	5	4	3	2	1
2. Mapping of services within the MH continuum updated regularly	5	4	3	2	1
3. Cross agency staff development completed, and staff development needs are periodically assessed	5	4	3	2	1
4. Data regularly reviewed in planning for needed adjustments	5	4	3	2	1
5. Yearly review of financing resources & coordination of services	5	4	3	2	1

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V. Coordination of Work

1. Procedures in place to ensure confidentiality, a release for sharing information as appropriate (complying with HIPPA, FERPA, etc.)	5	4	3	2	1
2. School personnel/administrators have a clear and approved process for connecting to community MH resources and providers	5	4	3	2	1
3. Ongoing coordination of services among agencies within the 3 levels of intervention: Universal, Targeted, & Indicated	5	4	3	2	1
4. A plan is developed for reviewing and addressing barriers among agencies and community, to include:					
a. Education/School staff	5	4	3	2	1
b. Families	5	4	3	2	1
c. Youth	5	4	3	2	1
d. Juvenile Justice/Prosecution/Courts	5	4	3	2	1
e. Law enforcement	5	4	3	2	1
f. Mental Health and health agencies	5	4	3	2	1
g. Other agencies/stakeholders (e.g. social services, civic groups, faith groups, businesses, etc.)	5	4	3	2	1
5. Data collection systems continue to be utilized and shared	5	4	3	2	1
6. Decision-making process is in place for considering outcome data	5	4	3	2	1
7. Plan for continuity and follow-up	5	4	3	2	1

VI. Mental Health Programs/Services Planning and Integration - Considering Levels Of Intervention: Universal, Targeted, And Indicated

Program	Service	Location	Population Served	Personnel / Professional Skills Required	Referral System/ Service Tracking	Funding to Support	Resources Needed	Evaluation / Outcome Procedures	Staff Development /Initial & Ongoing	U*	T	I

Address the following questions:

What actions are needed to coordinate, evaluate, and connect students/families/staff to the services and supports?
 Using resources identified above, how can you assure students/families access and benefit from needed services?

* U = Universal Intervention
 T = Targeted Intervention
 I = Indicated intervention