



John A. Wilson Building | 1350 Pennsylvania Ave, NW, Suite 300 | Washington, DC 20004

MEMORANDUM

TO: DC Public School Principals
DC Public Charter School Principals

FROM: Ahnna Smith, Interim Deputy Mayor for Education
Amanda Alexander, Interim Chancellor

CC: Hanseul Kang, State Superintendent of Education
Scott Pearson, Executive Director, DC Public Charter School Board

DATE: June 13, 2018

SUBJECT: Expansion of School-Based Behavioral Health Update and Next Steps

We are excited to announce the District will begin expansion of a multi-tiered, school-based behavioral health system for all DC Public Schools and Public Charter Schools in the 2018-19 school year. We know that student mental health and well-being are directly linked to academic achievement. This expansion, using a coordinated approach to student behavioral health, will help ensure all of our students have the behavioral health tools to succeed.

Last year, Mayor Bowser convened a Task Force on School Mental Health to review and recommend any changes to the Comprehensive Plan to Expand School-Based Behavioral Health Services released in the spring of 2017. In their March 2018 Report, the Task Force endorsed the Plan's core program design. This model ties together school, agency and community-based provider resources around a common vision to provide access to prevention, screening, early intervention, and intensive mental health services for all public school students.

What does the Expansion mean at the school level?

- **For all schools**, our partners in school-based behavioral health will continue to support current behavioral health programming and partnerships and the clinicians from the Department of Behavioral Health School Mental Health Program will continue to perform their same functions for the next year.
- **For all schools**, the District will launch a new Community of Practice to leverage school, provider, and agency expertise around successful interventions, provide opportunities to learn and adopt additional evidence-based practices, and help both schools and providers build capacity to increase collaboration and coordination.
- **For all schools**, school-level implementation, of the new model, which builds on existing practices, will happen over the next three years, starting with those schools identified as within the top 25 percent of need based on behavioral indicators. [Here is the list](#) of schools ranked by behavioral health indicators.





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What will happen next?

For about 50 schools identified as within the top 25 percent of behavioral health need, we will work with school leadership to engage them in the expansion through three initial activities:

- 1. Schools will be contacted over the next two weeks to complete an initial behavioral health resource inventory.**
 - ❖ Each school will receive a call from a representative of our partner on the Coordinating Council for School Mental Health, the George Washington University (GW) Center for Health and Health Care in Schools.
 - ❖ GW is helping us gather this information from each school to minimize the impact on your staff during this busy end of year period.
 - ❖ **When the GW representative calls, please connect them to the person who is best able to speak to the prevention, early intervention, and treatment services already being provided in your school, including who provides the program or service.** *Principals are strongly encouraged to participate in the call.* The caller from GW will guide the information gathering and also ask a few questions related to minimum requirement necessary to support appropriate and effective delivery of different levels of behavioral health services.
- 2. Schools will be asked to identify the staff position that will serve as their Coordinator for their schools behavioral health expansion by the end of June.**
 - ❖ Schools may decide who is best to fill the Coordinator role, drawing from staff such as a Response to Intervention (RTI) Coordinator, Student/School Support Team (SST) Coordinator, a school-hired social worker, school psychologist, or clinician, DBH clinician, School-Based Health Center behavioral health staff, or a community-based provider.
- 3. Schools will be contacted by the DBH School Mental Health Program over the next few weeks.**
 - ❖ Schools will be contacted by a representative from the DBH School Mental Health Program, which is leading this effort in partnership with the Coordinating Council on School Mental Health (see below).
 - ❖ Schools will help DBH learn about their schools' needs, and DBH will share information about next steps, and how each school can begin to get ready for the next school year, in collaboration with the DCPS School Mental Health team for DCPS schools.

Implementation of this expansion is being guided by the new Coordinating Council on School Mental Health, which is comprised of school leaders, government agencies, community providers, parents, youth, and school behavioral health experts, and led by the Department of Behavioral Health. We invite you to learn more about their work and follow the Council's progress at <https://dbh.dc.gov/node/1321801>.

If you have questions please contact Deitra Bryant-Mallory at deitra.bryant-mallory@dc.gov for DC Public Schools and Audrey Williams at awilliams@dpcsb.org for DC Public Charter Schools.

