

Topic: Kristin Moses Presentation and Pre-Planning Discussion

Date: November 17, 2022

Grantee and Partner Participants:

- Advocates: Ann Pruszynski from Advocates & Jacob from Framingham Public Schools
- Aspire: Kristen Woodbury and Abby Foley from Aspire
- BHN: Sarah Manseau from BHN & Bridget, Toni, Mara, Jen, and Colon from Washington Elementary School
- Eliot: Elizabeth Lineweaver from Eliot
- Riverside: Julie Greiner-Ferris and Marcel Descheneaux from Riverside & Bill Chaplin from Milford
- Skaneateles School District: Kristin Moses
- MAMH: Joan Mikula, Jenifer Urff, Lina Stolyar

Welcome and Housekeeping

- Summary of post-Zoom survey findings
 - o There was a consensus that we should keep meetings to 1 hour.
 - o As suggested, we will try to send information related to learning community meetings in advance so grantees can invite other team members to participate when relevant.
- Next steps for evaluation
 - o Great discussion about the evaluation at the last learning community meeting. There has been a change in that the lead evaluator for this project is leaving NRI for a position with another consulting company. We have potentially identified another evaluator, who would serve as a consultant to NRI and lead the project. We're finalizing details and hope to follow up to schedule grantee meetings by mid-December.
- Potential for Learning Community expansion
 - o As Danna mentioned last week, the Charles F. and Beatrice Adams Charitable Trust has agreed to provide additional funding to expand the number of participating sites, so we may have two new grantees joining the Learning Community during December or January.

Presentation from Kristin Moses

Kristin started her career as a social worker and then moved into being an assistant principal and district administration, so she has worked on both sides of providing mental health to students in schools. She is currently the Coordinator of Student Support Services & Family Engagement at the Skaneateles (NY) Central School District.

- About two years ago, the school district partnered with Helio Health to provide interventions to Tier III (MTSS model) students.
- Funding for the project is in Year 2 (of 3 years), with the majority of funds coming from the county. The project is working to demonstrate success in order to access additional funding for subsequent years. Some of their funding was from ARPA, so there is also a need to be more sustainable once that funding goes away.
- The clinician currently is seeing 40 students. They schedule them around what works best for the child's schedules, trying not to have them miss the same class every time, or perhaps after school. The program is year-round including breaks.

Questions and Answers from Kristin Moses

- There was a question from a school about students who might not want to receive therapy in school and how that works with their partnership with Helio. Kristin said the Helio clinician is able to refer to other agencies and providers.
- There was a question about how students get access to services. Kristin explained that if a student is a Helio student, they can access a counselor immediately and get necessary services. Additionally, the school does a universal 32-question behavioral health screening for each student. Any student in grades 6-12 responding positively to Q24 – “Have you had thoughts of hurting yourself in the last week?” – is immediately triaged and someone will meet with them. In one screening, approximately 15% of students had thoughts of self-harm.
 - o Best practice is to administer this questionnaire 3 times a year for students in grades 6-12. Teachers provide assessments for students in grades K-5.
 - o One school noted that they offer universal assessments using the [SHAPE System](#).
- Some schools noted that they don’t want to fill all the clinicians’ time seeing students, and that ideally students would be sent over to CBHC for necessary services.
- One school mentioned that right now, there is a lot of Tier III interventions. It’s important for schools to build an ecosystem of Tier I, II, and III services, so we are less reactive and more proactive in supporting students.
- When asked how they measure success, Kristin noted that the school district uses the [SHAPE System](#), which allows them to monitor progress and ensure transparency so that stakeholders will let them know if they are not doing well.

Discussion of Pre-Project Activities

- Are you hiring a clinician specifically for this project and, if so, what skills and experience are you looking for? How will the school be partnering with the CBHC in the interview process? What challenges have come up in recruitment? Would it be helpful to have a job description?
 - o All grantees said they are in the process of hiring (except for one grantee that has hired a clinician for one of their schools).
 - o All grantees said they are involving or will involve the schools in the candidate review process.
 - o There is a balance in hiring someone with the right level of experience, the right personality and fit, and knowing that there are behavioral workforce shortages.
- Will you/do you have a dedicated space at the school to provide services? What does that look like? Can anyone share what kind of set up they have in their schools/with their school partners?
 - o Grantees are looking into this and understand the importance of the clinicians not feeling like they are untethered and floating without a connection to the school.
- How engaged are the school principals in this work? If not the principal, are there other key champions in the school administration?
 - o There seemed to be a consensus that this is happening in some capacity.

Logistics and Next Meetings

- Thursday, December 1
 - o Paul Hyry-Dermith from the Brookline Center’s BRYT program will join us to talk about prioritizing students for services, integrating clinicians into the school setting, and the BRYT model.
- Thursday, December 15