

## Mental Health in Schools Community Partnership

### *Lessons Learned*

As part of the grant deliverables, we would like to hear about some of the lessons learned through your experiences working on the Mental Health in Schools Partnership. This will be showcased in a web-based companion guide upon completion of the grant requirements. We appreciate and value your honest feedback on this process, so please share unreservedly. For example, if you had great community support, this is a great venue to share. Conversely, if you had difficulty gaining administrative or parental support, please feel free to explain why, so that we may clearly depict what others may come across in following the same process. This will assist us as we begin to disseminate the work to other districts throughout the state. Thank you in advance for your hard work throughout this process and taking the time to complete the document.

The Lessons Learned Document is separated into 5 components: Data Assessment, Partners, Support, Outcomes, and Future Plans. There are a series of questions associated with each topic. Please feel free to separate your answers into the 5 components to share your process.

- I. Data Assessment: What were the tools you used? **The committee reviewed surveys that had been completed within the last 2-3 years in the district. Student surveys included the Adolescent Health Risk assessment routinely completed by SBHC users at least annually. A district survey called C2S2 was reviewed (also related to risk behaviors). Statistics regarding disciplinary actions and type of offenses were reviewed. The committee also completed the Healthy School Report Card. Were they user friendly? Yes, all table form or summary charts. Time intensive? No. These were tools used during the normal course of work. Was the data you received helpful? Yes, even when we realized that the information did not necessarily tell us what we needed to know. It highlighted where there gaps in data collecting and how data was collected. Were you able to use it and if so how did it help you? The information was useful in confirming what we already believed to be the primarily issues in the district. Was some of the data “disposable?” If so, what were those items? One survey was conducted with such a small sample group that it was determined as little value.**
  
- II. Partners: Who served as a partner to you through this process? **The host organization for the school-based health center acted as site coordinator. Initially it was thought that this would be more efficient and relief the district (suffering from rapid turnovers among administrative staff). In addition to school staff and administrators, the local community mental health organization and a local child advocacy group – were partners. Were they a new partner? The host organization and district have had a nearly 20 year relationship in providing mental and physical health services. CMH and the child advocacy group were new to the partnership table. If they were an established partner, did this process strengthen your relationship? How? I think the partnership between the district and host agency became broader. There was more a feeling of we are in this together versus the feeling that hosting organization was just in**

the district running their own programs. Explain the process in establishing new partners. How did they respond to this grant process? The host organization and the child advocacy group are long time partners, together they approached the director of community mental health to explain the grant and ask for support. He assigned his COO, who has been an active participant and has actually improved relationships between the two.

- III. Support: Did you receive support from your school? Community? Others? Please specify the positions of those who provided you with support on this initiative within the district and community. The greatest support from the district was in an administrator that had held several positions within the district and was well informed about policy, issues, practices and history. The site coordinator knew this person and was able to solicit her support. Please describe how you were able to get their support. Was it difficult or easy? The difficulty in gaining support is that school staff were already saddled with a full plate. Although interested and supportive of efforts, they did not have a lot of time to do work. The burden falling on the site coordinator. In hindsight, I may have worked harder to get time carved out the teaching schedule to allow support for task. Are there recommendations you can offer on ways to generate support with these various representatives? Be clear about the type of support you need upfront. Do you need political capital, material resources, staff time, etc. I could have been more strategic in recruiting for the local committee.
- IV. Outcomes: Describe some of the benefits that have come from your work on this grant. Provide any qualitative and/or quantitative data. In addition, please provide any drawbacks you experienced throughout this process. The greatest outcome is the collaborative agreement between CMH and the district. The relationship between CMH and the host organization for the school-based health center has certainly progressed through this process – opportunities to work together are more evident. Unfortunately, the process also highlighted needs beyond the current capacity – leading to frustration among the school staff who wonder what the point was.
- V. Future Plans: What are your future plans in providing services and expanding reach? The district has an opportunity to organize its prevention and mental health support services in a continuum. I believe that this would be of greatest benefit at this point.