## NH Behavioral Health Summit

Integrated school-community behavioral health: System development, innovative practices, and lessons learned

December 2025

Behavioral
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Improvement
Institute







### Who we are...

Behavioral
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### Learn how...



...schools can act as a hub for youth mental health prevention and treatment



...NH's MTSS-B framework promotes an integrated approach to student behavioral health



...an innovative school mental health liaison role supports treatment efficiency



...school-community mental health partnerships can be most successful

### Who's in the room?



School-based behavioral health clinician (counselor, psychologist, social worker, etc.)?

Community-based mental health agency clinician? Co-located in school(s)?

Other health care provider?

Mental health agency administrator?

School administrator?

Other health agency/non-profit administrator?

Public policy advocate?

Higher ed/research?

Other?

### The need



#### Youth need unmet:

**Up to 30%** of youth (aged 12-17) experience a mental, emotional, behavioral, or developmental problem

Less than ½ receive treatment



#### Without support, students at risk:



Chronic absenteeism

Reduced academic achievement

Suspension/expulsion

School drop out



Substance use

Risky sexual behavior

Violence

Suicide



#### Schools a hub for prevention

**70-80%** of youth who receive mental health services do so in schools

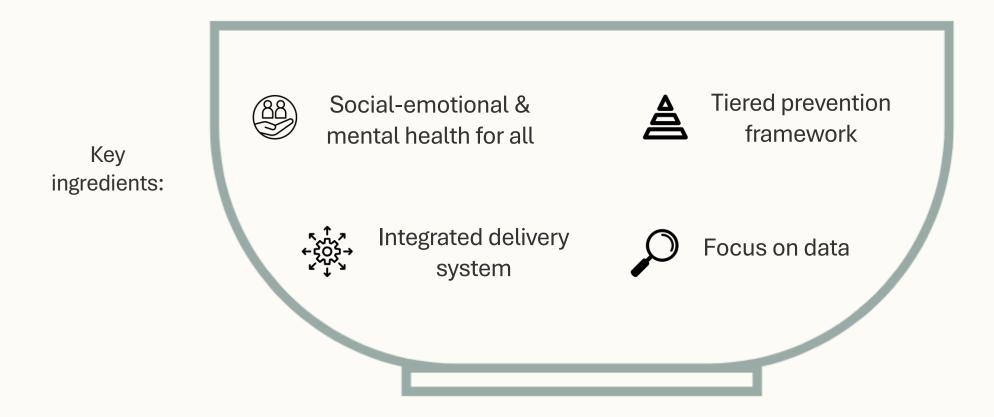
Youth **6x** more likely to complete EBTs in schools than in community settings

But only 1/2 of schools say they can effectively meet escalating student mental health needs

### The response

### NH's Multi-Tiered System of Supports for Behavioral Health & Wellness

A comprehensive system of social, emotional, and behavioral supports to promote student wellness and improve engagement in learning



### MTSS-B strategies



Team-based decision making



Evidence-based practices across tiers



Use of school & community data



Ongoing coaching & performance feedback



Early access through comprehensive screening



Progress monitoring for fidelity and impact

### The evidence

#### When implemented with fidelity, MTSS-B supports:



Reduced student problem behavior and discipline events



Enhanced social-emotional functioning



Better attendance



Improved academic achievement

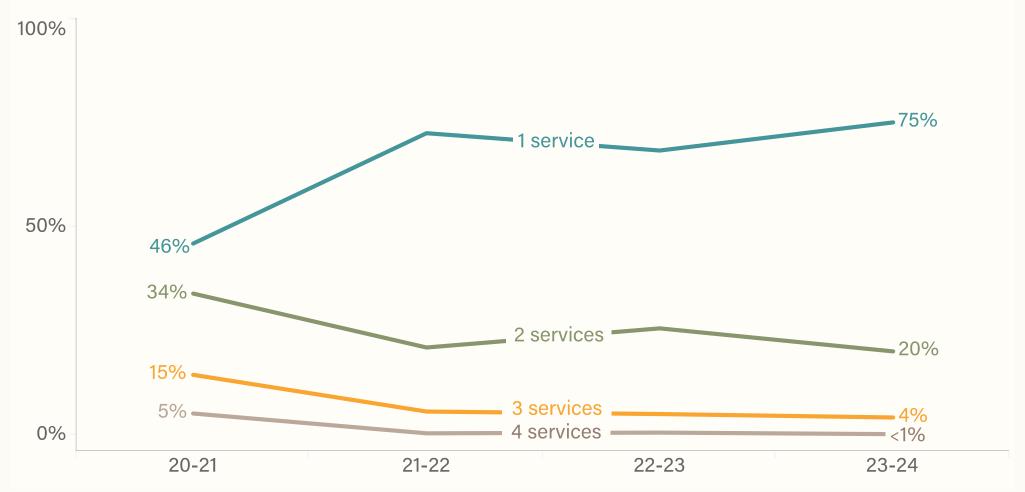


More efficient systems

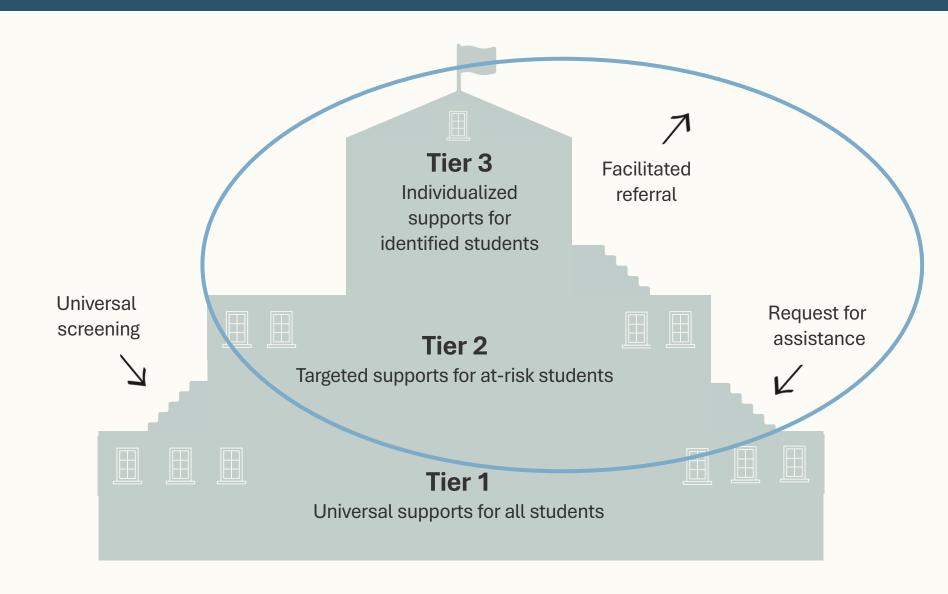
### Streamlined referrals



Percent of all Tier 2/3 referrals



## Tiered prevention strategies



## Behavioral health integration in MTSS-B



Collaborative district/community mental health agency implementation

Leadership, support, roles	Systems	Services
Formalized partnership	Teams	Tier 3 service array
Shared values	Facilitated referral pathways	Access to CMHA services
CMHA leadership	Information sharing	Progress monitoring
Behavioral health liaison	System-level data use	Consultation & coaching
	Crisis response protocol	
	Communication & confidentiality	
	CMHA discharge procedures	

## Leadership & roles



# District/Community mental health agency partnership

Formalized by an MOU Explicit roles/responsibilities

#### **CMHA** leadership

Decision-making authority
Regular strategy/policy development
meetings

#### School mental health liaison

CMHA-employed 50% systems/infrastructure development 50% clinical

#### **Behavioral health providers**

School-employed Co-located

Office-based

### School behavioral health liaison



MTSS-B partner/primary CMHA point of contact at the district and school levels

50% system/infrastructure development, 50% clinical service delivery

Actively participates in district and school-level team meetings

Provides behavioral health consultation as requested for administrators, teachers, staff, and students

Partners on development of facilitated referral pathways and procedures

Serves as an internal coach and support for school-based behavioral health staff

Provides Tier 3 services on school grounds

### Concord School District's SMHL role



Strengthens district MTSS by coordinating mental health systems, referrals, and collaboration with Riverbend

Provides district-wide consultation through MTSS-B teams and open office hours at all schools

Supports Tier 1 by promoting mental health literacy, school climate, and staff PD/consultation

Coordinates Tier 2/3 services, referral pathways, and navigation between school and community supports

Serves as liaison for communication, care coordination, and facilitating referrals

## Systems: Team-based approach

All teams integrated and representative:

- ✓ District/school leadership
- ✓ School behavioral health
- ✓ CMHA admin/clinicians
- ✓ Community partners
- ✓ Youth
- ✓ Family

### District-Community Leadership Team

Set district/community-wide goals & priorities, provide resources



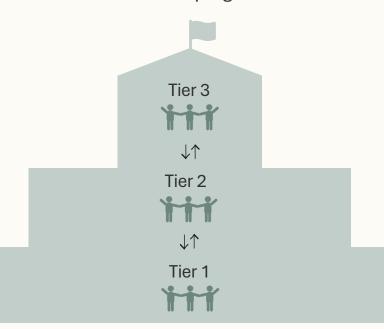


quality improvement



#### **School-based teams**

Implement practices, monitor progress



## Community mental health providers on teams

Tier 1



Consult to teachers: classroom management, social-emotional strategies

Training in behavioral health topics e.g., suicide prevention, trauma-informed practices, etc.

Provide aggregate data to Tier 1 team - e.g., presenting concerns, referral patterns, advanced tier "success" rates

Tier 2



Tier 3



Train staff in EBPs

Help use data (discipline, referral, screening, tx success, etc.) to inform array of services

Support data-based decision making related to selection of services/interventions

(Co)facilitate small group interventions

Member of individualized student support teams

Support development of individualized student success plans

Provide individual tx

## Concord School District: Participation on teams



#### **Team participation**

Meeting structure SMHL contributions



Riverbend's support of the liaison role and school-community integration

Director of Student and Staff Wellness role

MTSS-B part of district strategic plan; embedded in fidelity assessment

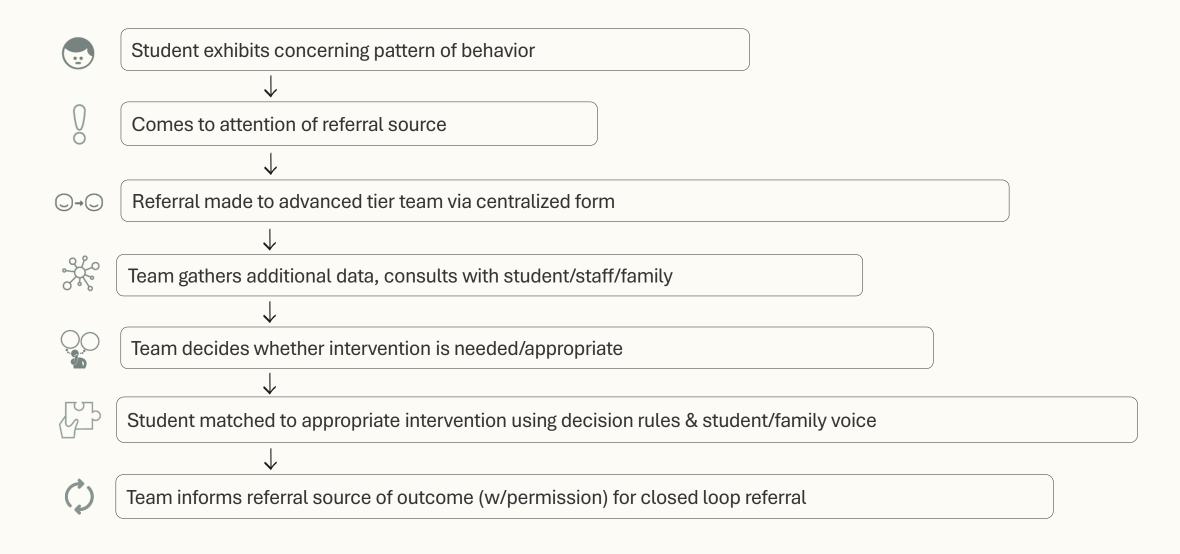


School cultures that are resistant to system change

Reactive versus proactive systems

Degree of need

## Systems: Request for assistance process



## Systems: Facilitated referral pathways



District & community mental health agency develop policies/procedures for efficient student referrals





With consent, school and community mental health providers coordinate care

## Concord School District's facilitated referral pathway

#### Tier 2/3 Team

Identifies student to refer to services provided by Riverbend and sends referral, with verbal consent from caregiver, to the Liaison.



#### School Mental Health Liaison

Contacts the family and initiates a brief assessment and information gathering to determine next steps. Brief Intervention process 4-6 weeks.



#### Liaison Facilitates Referral

School-Based Office-Based Family Peer Support Other Community Supports



#### Referral Wrap-Up

Meeting with parents and/or student with at least one school staff to provide recommendations for student support plan.

### Concord School District: Facilitated referrals



Comprehensive MOU between CSD and Riverbend that supports sharing of information



More appropriate referrals (matching the family with the right service)

Person in the role oriented to systems work combined with clinical

Master's-level interns to support bridge work

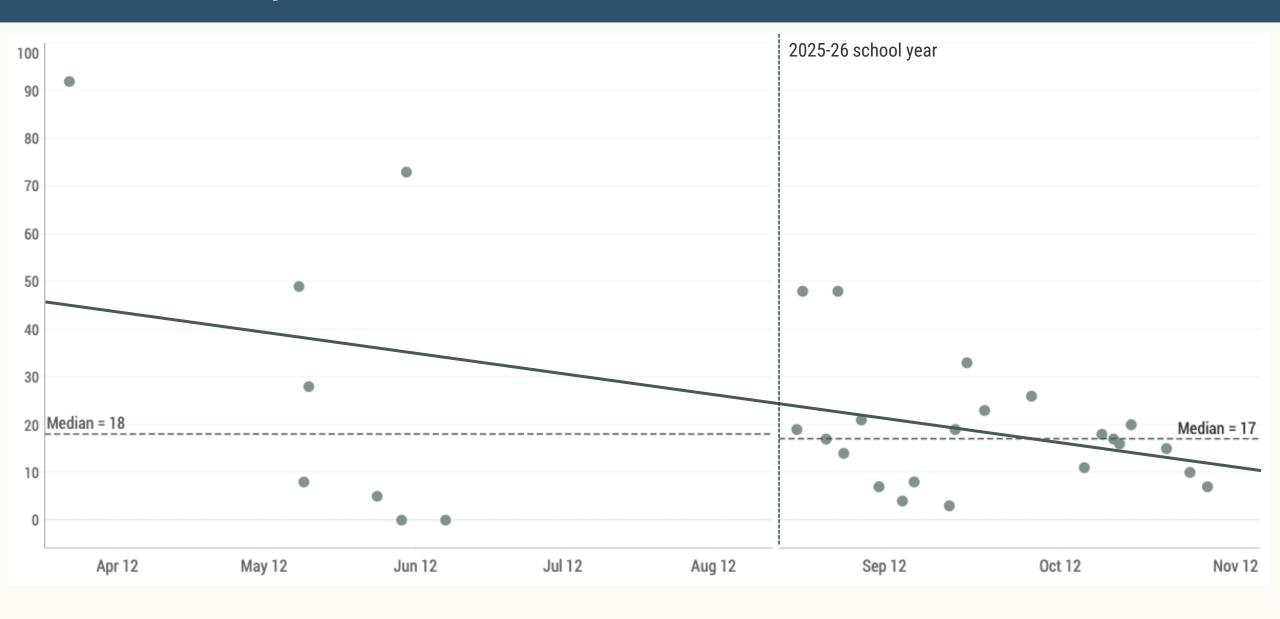


When communication fails, cold calls to families regarding referrals increases resistance

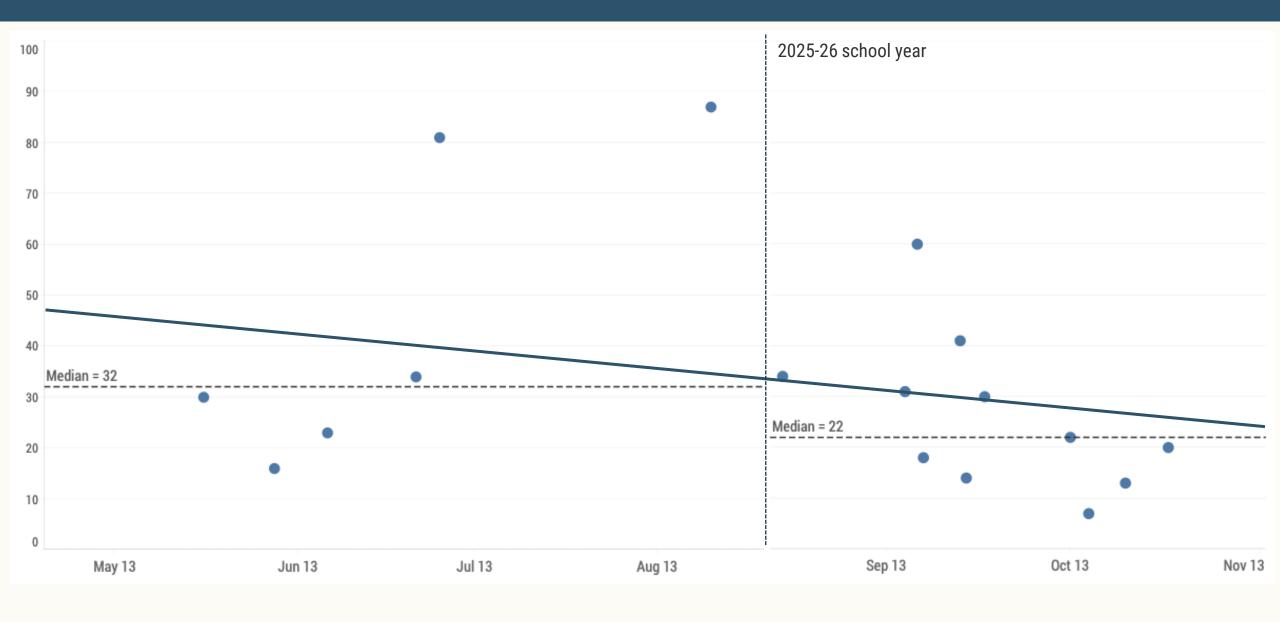
Success is relationship-driven: if the MTSS-B team doesn't trust the follow through, pathway is not utilized

Bridge work is time-intensive for one person

## The data: Days from SMHL referral to Riverbend admissions referral



## The data: Days from Riverbend admissions referral to intake



## Sustainability considerations



How to make bridge work billable?

Facilitated referral process is being replicated in other districts

Referrals are more appropriate, increasing efficiency

Professional development in MTSS-B for clinician in liaison role

Ongoing Appreciative Inquiry regarding Riverbend-CSD collaboration

Considering school-based clinical internship