CYBHWG School-based Behavioral Health and Suicide Prevention (SBBHSP) subgroup

Date: 4/23/2025 Time: 3-4:30pm

Leads:	Representative My-Linh Thai
	Christian Stark, OSPI

	Professional Members						
X	Brook Vejo Carelon Behavioral Health		Gina Cabiddu Kids Mental Health WA	X	Rafaela Steen UW Forefront Suicide Prevention		
	Chetan Soni WA Youth Alliance	\boxtimes	Gwen Loosmore WA State PTA	×	Rayann Silva <mark>[Eric Bruns]</mark> UW SMART Center		
\boxtimes	Daniel Smith Community Health Plan of WA		Jill Patnode Kaiser Permanente		Renee' Schoening Whitworth University		
	David Crump Spokane Public Schools	\boxtimes	Jodie DesBiens NWESD 189	\boxtimes	Sinuon Hem Asia Pacific Cultural Center		
×	Delaney Knottnerus King County	\boxtimes	Joe Neigel Monroe School District	×	Susan Peng-Cowan Behavioral Health Navigator		
×	Devyna Aguon Renton School District	\boxtimes	Mabel Thackeray North Thurston Public Schools	×	Tabby Stokes Vancouver Public Schools		
\boxtimes	Erin Drury WA School-based Health Alliance		Michelle Sorensen Richland School District				
	Georgianna Akers WA Association of School Social Workers	\boxtimes	Nolita Reynolds Catholic Community Services				

Youth Members						
\boxtimes	Hanna Baker		Kei Gregson (Lead)		Pradyu Kandala	
\boxtimes	Taanvi Arekapudi					

Parent/Guardian/Family Members						
\boxtimes	Byron Smith	\boxtimes	Marcella Taylor		Megan Reibel	
\boxtimes	Peggy Dolane	\boxtimes	Richelle Madigan	\boxtimes	Shawnda Hicks (Lead)	

Agenda Items	Lead
Welcome	Representative My-Linh Thai, 41st Legislative District
	Christian Stark, OSPI
Update/Overview of WA Thriving See accompanying slide deck	
Presentation Notes:	
Subgroup work is in alignment with and contributing to the strategic plan	
The strategic plan with included developing strategic recommendations	Hanna Traphagan, Health Care
Links/Resources/Upcoming Opportunities:	Authority Julia Kemner, Behavioral Health
Definition of behavioral health developed by the advisory group: https://www.washingtonthriving.org/blog/defining-behavioral-health	Catalyst
 Email <u>cybhwg@hca.wa.gov</u> if you'd like to be added to the contact list for the Children & Youth Behavioral Health Work Group, or any of its other subgroups. 	
Review of Reoccurring Priorities & Potential Strategic Focus Areas See slides in the main slide deck Links/Resources/Upcoming Opportunities:	Christian Stark, SBBHSP Co-Chair, OSPI
Padlet link: SBBHSP Defining School Behavioral Health	
 <u>Discussion/Questions:</u> Peggy D. – would like to see a vision [outside of current budget constraints], [rather than having our] SBBHSP contributions weighted down by budgetary realities. 	
On core components of school BH:	
Delaney K. – Referral to resources vs Referral to Treatment	
 Peggy D. – Tiered support structure not well understood. Define it. Top tier (tier 3) is not well understood, including non-public agencies, education in the prison system. 	
Anna Marie D. – robust Tiers 1 and 2 can prevent Tier 3. Providing	
robust, engaging lessons. • Ellen M Would social emotional learning (SEL) fall under Prevention & School Climate? Or Positive Behavioral Supports &	

- Interventions (PBIS)? Maybe calling out those specifics is too in the weeds for this list?
- Delaney K. Put this in the Padlet, but separating postvention and crisis support. I think those are two separate things and different resources/action steps
- Peggy D. Tier 1 adding dyslexia how are students getting early intervention and how are staff being trained to recognize?
- Chloé W. We have a reference to resources (i.e. Treatment). What about the other end of the spectrum returning from services and integrating back to school supports?
 - o Delany K. Reengagement?
 - o Devyna A. Service coordination?
 - Delany K. Just wanted to second this comment. I think this
 is key and often missed between systems.
- Josh K. Where does specific lessons land? Like mental health literacy (MHL) or ither mental health specific education?
- Peggy D. for postvention, beyond a death.....also include emergent addiction to a parent (such as gambling) or a parent gets stage 4 cancer...
- Aubrey N. Framework and structure will help with staff retention.
- Anna Marie Dufault 1.) Consider naming it "Robust, Defined Tiered Support Structure" 2.) Consider adding a box "Child and Youth Engagement" This box would capture the fact that children and youth need to have friends, their voices heard and engaging lessons with some efficacy over their learning.
- Peggy D. what will the investment pay back? What is the return on the investment [into school behavioral health]?
 - Christian S. we could put this in as evidence for supporting SBBH
- Ellen M. I missed Hanna's presentation (but have seen others from her) how are we thinking this effort would tie into WA Thriving?
 - Julia Kemner WA Thriving will take the inputs developed by subgroups and integrate them as appropriate throughout the Strategic Plan, and/or in supplemental issue briefs that provide deeper recommendation to implementation strategies.
- Amanda L. I think the referral pathway/processes could span across the other two buckets, rather than just tier 3/crisis supports.
- Byron S. I have spent the last 3.5 months in 3 high schools, 4 middle schools and 2 elementaries for over 40 days as a "Guest Teacher". I've been at schools with student suicides, shootings and violent confrontations. I have 3 observations from that experience:

 A. The kids are addicted to screens that is their support system...
 B. Schools have more "safety enforcement" staff than counselors; and, C. Treatment is having little effect in classroom do whatever we

	want! "as students have learned that having an IEP is a license to "Do whatever we want."	
	v of Reoccurring Priorities & Potential Strategic Focus Areas les in the main slide deck	Christian Stark, SBBHSP Co-Chair, OSPI
Upcon	ning Meetings:	
•	Wednesday, May 28 th 3-4:30pm on Zoom	
•	Wednesday, June 25 th 3-4:30pm on Zoom	
WA Th	riving:	
•	WA Thriving Initiative through the Children & Youth Behavioral Health Work Group will deliver a draft strategic plan to the Legislature in November 2025.	
•	You can learn more about work done to date, and the work planned for this year in the Washington Thriving Progress Report that was submitted to the Legislature this past November.	
•	https://www.washingtonthriving.org/	
	ng Feedback Survey: https://survey.alchemer.com/s3/8281458/2025- P-Subcommittee-Feedback-Survey	

Staff: Nic Reed

Attendees:

State Agency & CYBHWG Staff:

Amanda Lewis, HCA
Anna Marie Dufault, OSPI
Aubrie Nettle, HCA
Bridget Underdahl, OSPI
Brisa Sanchez Cornejo, OSPI
Candis Coble, OSPI
Chloé Wilkins, HCA
Christine Mickelson, HCA
DeeSha Connor, DOH
Ellen McGuire HCA
Enos Mbajah, DBHR/HCA
Francesca Matias, OSPI
Hanna Traphagan, HCA
Joshua Kent, OSPI

Julia Kemner, BHC
Kerry Bloomquist, OSPI
LaPalm, Megan, Dept of Commerce
Meghan Hopkins, DSHS DDA
Michelle Curry, OSPI
Renee Tinder, DOH
Sonya Salazar, HCA
Tina Burrell, HCA
Todd Slettvet, HCA-Medicaid

State Legislators & Staff:

Public Attendees:

Cara Lynn
Chelsea Stone (she/her)-CHPW/CHNW
Children's Alliance--Policy Team
iPhone
Josh Henderson
Kristen Prentice
Matt Crichton
Max Lau, Children's Alliance
Meredith P.
Rebecca Goodvin
Reid Saaris
Yordanos Gebreamlak
12539733512
APCC's iPhone

Presenter Notes 2025-04-24 18:46:26

Bit more extended intro, role & group

School-based Behavioral Health and Suicide Prevention Subcommittee

Of the Child and Youth Behavioral Health Work Group

April Meeting – 04.23.2025





All students prepared for post-secondary pathways, careers, and civic engagement.

Transform K–12 education to a system that is centered on closing opportunity gaps and is characterized by high expectations for all students and educators. We achieve this by developing equitybased policies and supports that empower educators, families, and communities.

- Ensuring Equity
- Collaboration and Service
- Achieving Excellence through Continuous Improvement
- Focus on the Whole Child





Each student, family, and community possesses strengths and cultural knowledge that benefits their peers, educators, and schools.

Ensuring educational equity:

- Goes beyond equality; it requires education leaders to examine the ways current policies and practices result in disparate outcomes for our students of color, students living in poverty, students receiving special education and English Learner services, students who identify as LGBTQ+, and highly mobile student populations.
- Requires education leaders to develop an understanding of historical contexts; engage students, families, and community representatives as partners in decision-making; and actively dismantle systemic barriers, replacing them with policies and practices that ensure all students have access to the instruction and support they need to succeed in our schools.



Tribal Land Acknowledgment

Presenter Notes

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Christian – read verbatim; credit to RoseLynne McCarter – UNDER CONTRUCTION



ONE Logo by Roger Fernandes (Lower Elwha Klallam Tribe)

We start today with a land, water, and people acknowledgement. OSPI is here in Olympia, on the traditional territories of the Coast Salish people, specifically the Squaxin Island peoples. We say their name out loud because they are still here today despite the attempted erasure of their language, culture, and bodies. We, as OSPI and the SBBHSP Subcommittee, honor the past, present and future caretakers of these lands and dedicate our work to honor this place they call home. We strive to do so by respecting and affirming tribal sovereignty and culture, working with our tribal governments through the state in government-to-government partnership, and lifting tribal voice in the work of supporting student physical, social, and emotional well-being.

Agenda: April 23rd, 2025

#	Agenda Items	Time	Lead
1.	Welcome	3:00 PM	Representative My-Linh Thai , 41st Legislative District
			Christian Stark, OSPI
2.	Update/Overview of WA Thriving	3:10 PM	Behavioral Health Catalyst
3.	Review of Reoccurring Priorities & Potential Strategic Focus Areas	3:30 PM	Christian Stark, OSPI
4.	Considerations for Statewide Guidance & Direction on School Behavioral Health	3:40 PM	Group Discussion
5.	Looking Forward: Choosing Priorities	4:05 PM	Group Discussion: Which 2-3 core components of school behavioral health are most important for us to focus on/refine over the next 3 meetings?
6.	Public Comment, Other Updates. & Closing Reminders	4:20 PM	
7.	Meeting Adjourned	4:30 PM	

Group Agreements

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Christian – pause for people to read

Share airtime; make sure all voices have the opportunity to be heard

Stay engaged

Speak your truth

Expect and accept non-closure

Listen with the intent to learn and understand

Assume positive intentions

Disagree respectfully

Clarify and define acronyms

Take care of yourself and take care of others

Ask for clarification

Listen harder when you disagree

Avoid using the phrase "committed suicide," instead refer to it as a cause of death

Person first language

Respect, but don't expect, the sharing of lived experience





Welcome Members and Guests

SBBHSP Members

Co-Chairs

Representative My-Linh Thai

Christian Stark, OSPI

Members w/ Lived Experience

Bryon Smith Parent/Guardian/Family

Keira Gregson Youth/Young Adult

Megan Reibel

Parent/Guardian/Family

Pradyu Kandala

Youth/Young Adult

Shawnda Hicks

Parent/Guardian/Family

Hanna Baker

Youth/Young Adult

Marcella Taylor

Parent/Guardian/Family

Peggy Dolane

Parent/Guardian/Family

Richelle Madigan

Parent/Guardian/Family

Taanvi Arekapudi

Youth/Young Adult

Providers & Community-based Organizations

Brook Vejo Carelon Bx Health

Nolita Reynolds Catholic Community Services Asia Pacific Cultural Center

Sinuon Hem

Advocacy & Other Professional Staff

Chetan Soni

WA Youth Alliance

Erin Dury

WA School-Based Health Alliance

Georgianna Akers

WA Association of School Social Workers

Jill Patnode

Kaiser Permanente

Rafaela Steen **UW Forefront Suicide Prev**

> **Rayann Silva UW SMART Center**

Gwen Loosmore

WA State PTA

School, District, & Educational Service District **Staff**

David Crump

Spokane Public Schools

Devyna Aguon

Renton School District

Jodie DesBiens

Northwest ESD 189

Joe Neigel

Monroe School District

Mabel Thackeray

North Thurston Public Schools

Michelle Sorensen

Richland School District

Susan Peng-Cowan

Behavioral Health Navigator Rep

Tabby Stokes

Vancouver Public Schools

Local Govt/Coalition, Managed Care, and Higher Ed

Daniel Smith

Community Health Plan of WA

Delaney Knottnerus

King Co., Bx Health & Recovery

Gina Cabiddu

Kids Mental Health Washington

Renee' Schoening

Whitworth University

State Agency Staff Supporting th Subcommittee

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Christian – please the chat function to state whether you would like to make a public comment. Not about public attendees - participating in the

chat, public comment

(OSPI)

Health Care Authority (HCA)

Office of the Insurance Commissioner (OIC)

Department of Health (DOH)

Department of Children, Youth, & Families (DCYF)

Department of Social & Health Services (DSHS)

WA State School Directors' Association (WSSDA)



Children & Youth Behavioral Health Work Group

Presenter Notes

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Co-Chairs:

Representative Lisa Callan, 5th Legislative District Jason McGill, Assistant Director, Medicaid Division, HCA

Staffed by Health Care Authority
- Children and Youth Behavioral

The CYBHWG recommends legislation and other changes to ensure that behavioral health services Washington State Health Care all of Washington's children, youth and young adults, and their families, are:

Authority

- Accessible, affordable, effective, timely, and engaging;
- Culturally, linguistically, and developmentally relevant;
- Supportive and affirming of gender orientation;
- Supported by evidence;
- Incorporate tailored innovations, as needed;
- Coordinated across sectors, and tailored and aligned with communities' strengths and needs;
- Integrated whole-person care;
- Normalized as part of everyone's health care;
- Sustainable, with robust capacity and funding;
- Hold the promise of measurably improving health and outcomes; and
- Amply resourced for all children, youth, and young adults.



The CYBHWG is informed by six advisory groups: CYBHWG - filled by Anna Maria Dufault, Assistant

Prenatal to Age Five Relational Health Subgroup Workforce and Rates Subgroup School-based Behavioral Health & Suicide Prevention (SBBHSP) Subcommittee Youth & Youth Adult Continuum of Care Subgroup Behavioral Health Integration Subgroup WA Thriving (P25 Behavioral Health Strategic Plan Advisory Group)

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OSPI has a statutorily established seat on the Superintendent for Student Engagement & Support OSPI has a statutorily established seat on the Strategic Plan Advisory Committee OSPI staff and Co-Chairs the SBBHSP Subcommittee OSPI sends representatives as needed when P-12 topics arise in the other subgroups The top 5 subgroups develop recommendations for the CYBHWG each fall, ahead of leg. session. The SPAG works a bit different, HB 2256 from this last session updated timelines: behavioral health landscape analysis for families in the perinatal 25 phase, children, youth transitioning into adulthood, and the caregivers of those children and youth



Changed from Kindergarten-12 from preschool-12 Added last

Purpose of the SBBHSP Subcommittee SBBHSP Subcommittee

To advise the CYBHWG on creating and maintaining an integrated system of care through a tiered support framework for preschool through twelfth grade school systems defined by the office of the superintendent of public instruction and behavioral health care systems that can:

- Rapidly **identify** students in need of care and effectively link these students to appropriate services
- Provide age-appropriate **education** on behavioral health and other universal supports for socialemotional wellness for all students, and
- Improve both education and behavioral health outcomes for students.

The school-based behavioral health and suicide prevention advisory group shall consider the broader behavioral health issues impacting children, youth, and families, while focusing on the issues that are unique to children and families that interface with schools. The work group cochairs may invite nonwork group members to participate as advisory group members.



What does the group actually do?

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Meetings are open to the public, invite participation from state agency reps, and anyone else interested our work

Bring people together

Monthly meetings with youth & family members, school and community behavioral health staff, advocacy, technical assistance, & other professional staff

Share information

 Highlight promising practices, share relevant data and information on system supports, and identify ongoing gaps in the system

Recommend policy changes

 Create annual recommendations to the CYBHWG for improving school-based behavioral health supports for p-12 students and their families in Washington



2025 SBBHSP Timeline

2025 Monthly Meeting Dates:

- Wednesday, April 23rd [TODAY!]
- Wednesday, May 28th
- Wednesday, June 25th
- Wednesday, July 23rd
- Wednesday, August 27th
- Wednesday, September 24th
- October No Meeting
- Wednesday, November 5th
- Wednesday, December 17th

Recommendations Timeline:

To be announced



Defining School Behavioral Health in (i.e. what's the school's role?)

Goal: Aligning shared language and defining core components for comprehensive statewide school system that meets needs specific based behavioral health supports

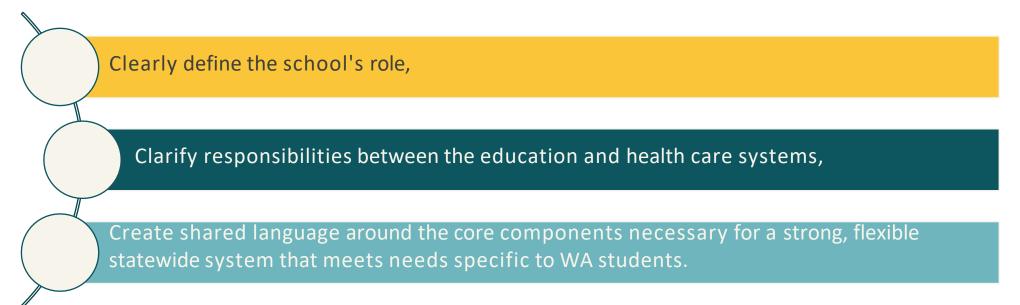
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What supports along the BH continuum are schools well positioned to provide? Clearly define the school's role. Clarify responsibilities between

the education and health care systems.

Create shared language around the core components necessary to WA students.

Since Washington doesn't have a clear statewide framework for school-based behavioral health, it's important to:





Ongoing SBBHSP Priorities

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Add full SBBHSP past recommendation overview in the chat

Statewide Guidance & Coordination

2021 K12 Student BH Audit – Designate a lead agency & establish strategic direction & goals for programming

'23 & '24 Recommendations – Designate a lead agency

'24 BloomWorks Discovery Sprint Report – Establish minimum expectations

'25 Recommendation - Define minimum expectations & establish strategic direction for statewide programming

Training, Technical Assistance (TA), & Navigation

Senate Bill 6168 (2020) – Funded a BH Navigator position at all nine regional ESDs

Senate Bill 5092, Sec. 501 (7) (2020) - 2.0 FTE to support MTSS data management and implementation activities

'21 Recommendation – Expand regional MTSS capacity

'24 Recommendation – MH training in school communities

'25 Recommendation – Establish a Technical Assistance & Training Network

School Funding for BH Supports along the continuum

22' House Bill 1664 (2022) aligned w/ '21 Recommendation – Increased school funding formula for school nurses, counselors, social workers, & psychologists

'22 Recommendation – Grants to districts for BH clinicians

'23 Recommendations – Support schoolbased health centers & expand the # of school & community-based clinicians

ES Senate Bill 5187, Sec. 510 (13) (2023): Funds for Education Service Districts to provide access to tele-behavioral health services in rural districts.

'24 & '25 Recommendations – Grants to districts for social, emotional, behavioral, mental health planning



1) To Inform the Strategic Plan

By the end of July, we will provide feedback on:

- The benefits of having an established statewide framework for SBBH
- The core components that should be included in a statewide framework for implement statewide guidance, including: Regulatory infrastructure/requirements of E
- Goals for effective statewide guidance on SBBH

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What supports along the BH continuum are school well positioned to provide? How statewide guidance should: Build above previous and

continuing SBBH efforts,

incorporate national evidencebased practices, and learn from similar efforts in other states Reflect considerations for regional and cultural differences in needs Impact coordination with

community organizations & behavioral health providers
What considerations may impact our ability to develop & implement statewide guidance, including: Regulatory infrastructure/requirements of BH in schools vs. other settings
Documentation/administrative/technology disparities between schools and

What does a comprehensive

WA-specific regulations

other settings

school behavioral health system

look like for students, families,

school staff, community



Providing Supports in a Tiered Framework

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Starting point – b/c we don't have an established statewide framework All within a tiered

Tier 3:

Wrap-Around Services

Tier 2:

Targeted Interventions

Tier 1:

Universal Protection

Home and Community Awareness

- Imbeded services
 - · Coordination via in school supports and telehealth
 - Individualized assessment, intervention, and family supports
 - · Small group social activities
 - Individual and/or group progress monitoring
 - Targeted screening and parenting education
 - Universal screenings, support school and home partnerships
 - Social Emotional Learning
 - Trauma informed training for school staff and MTSS supports
 - Destigmatize through mental health awareness and training
 - Build self healing, trauma informed communities
 - · Create community partnerships

Drivers

- Diverse, well-trained, thriving workforce
- Sustainable funding

Project AWARE: Interconnected Systems Framework

Enablers

- Guiding principles, defined leadership & structured coordination
- Supportive policy, shared resources, integrated data

Tier 3: Professional Exports structure

- Community-based providers within the components
 - School-embeddedioin-Flinicsystem continuum telehealth, crisis supportsschools (i.e. school,
- Licensed district staff (including ESA staff)

 listed but important component

 listed but important component

as well

Tier 2: With training, all staff

- ESA staff
- Student Assistance Professionals (SAPs)
- Paraeducators
- Integrated CBO staff
- Interventionists
- Teachers

Tier 1: All staff

- ESA staff
- Student Assistance Professionals (SAPs)
- Paraeducators
- Integrated CBO staff
- Interventionists
- Teachers
- Family Liaisons

Common Components of School Behavioral Honganything?

Presenter Notes 2025-04-24 18:46:29 Group Discussion:

Training & Staffing

Family-School-Community Collaboration

Needs Assessment & Resource Mapping

Prevention & **School Climate**

Tiered Support Structure (e.g. MTSS, WISSP, ISF, etc.)

Screening

Brief Intervention (non-clinical)

Referral to Treatment

Postvention/Crisis Support

Data & Accountability

Funding



Group Discussion Questions

Today and over the next three months:

Are we missing anything on the list of core components on the previous two slides?

Why would having an established WA framework for school behavioral health be beneficial?

What are our goals for effective statewide guidance on school behavioral health?

Group Discussion Questions (cont.)

How statewide guidance should:

- Build above previous and continuing SBBH efforts, incorporate national evidence-based practices, and from similar efforts in other states
- Reflect considerations for regional and cultural differences in needs
- Impact coordination with community organizations & behavioral health providers

What considerations may impact our ability to develop & implement statewide guidance, including:

- Regulatory infrastructure/requirements of BH in schools vs. other settings
- Documentation/administrative/technology disparities between schools and other settings
- WA-specific regulations

What does a comprehensive school behavioral health system look like for students, families, school staff, community providers, and others?

Presenter Notes 2025-04-24 18:46:29

Today and over the next three months:

How statewide guidance should: Build above previous and continuing SBBH efforts,

based practices, and learn from similar efforts in other states Reflect considerations for regional and cultural differences in needs

community organizations & behavioral health providers What considerations may impact our ability to develop & implement statewide guidance, including: Regulatory infrastructure/requirements of BH in schools vs. other settings Documentation/administrative/technology

WA-specific regulations

other settings

disparities between schools and

What does a comprehensive

school behavioral health system

look like for students, families,



school staff, community

2) To Inform the Strategic Plan

By the end of this month, choose 2-3 core components of SBBH to dig deeper into during and between our next three monthly meetings. What area(s) are most important to refine?

Within those 2-3 core components, we will work to provide feedback

• Toolboxes, resources, best practices

What 'system

supports' are

most needed to

enable effective

school-based

supports?, e.g.:

- RCWs, etc.
- System navigation supports
- State-level strategic direction senool-based supports?, e.g.: goals to remove barriers, monToolboxes, resources, best progress, and ensure quality practices

What considerations are needed to support **staffing** and funding?

Presenter Notes 2025-04-24 18:46:29

What supports along the BH • State guidelines, model policies, model poli positioned to provide? Within those 2-3 core components, we Training & technical assistan will work to provide feedback on: ^lWhat 'system supports' are

most needed to enable effective

State guidelines, model policies, RCWs, etc. Training & technical assistance

System navigation supports State-level strategic direction & goals to remove barriers, monitor progress, and ensure quality What considerations are needed to support staffing and funding? What considerations are necessarWbatadapting services in rural neidestations mall care?necessary

for adapting services in rural, remote, a or small

schools?

necessary to support

coordination between schools

and community partners (i.e. BH



on:

are necessary to between schools and community partners community-based organizations, primary care, etc.)

Proposed Priority Topics

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Some ideas based on what I heard from member check in conversations and previous work of our group Lack of formalized care coordination between primary care (community health

worker role) and schools

Prevention

- Difficult to weave together social-emotional learning, mental health literacy, suicide prevention, substance use prevention, extracurricular opportunities, etc.
- Barriers to generating sustained buy-in & implementing evidence-based practices

Screening

- · Lack of clear definition of universal screening
- Lack of guidance for school, districts, and CBOs to follow vague RCW requirements
- Confusion around legal requirements [UW SMART Center Report]
- Need for accessible training & technical assistance

Tier 3/Crisis Supports

- Lack of policy requirement for contacting crisis teams and writing safety plans
- Lack of capacity for school staff to spend time on referral pathways
- What tier 3 services do students needs, who is best positioned to provide services to meet those needs, and how do we support schools in connecting those services?
- Aligning planning and supports across MH settings and school settings



3) In-state Therapeutic Education Options

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Very limited in-state day

treatment options
No in-state therapeutic
residential school options
Lack consistently accessible and

effective processes for crisis

In 2024, 71 students received services in an out-of-state residential therapeutic educational facilities.

To inform the strategic plan, we will work to:

- Describe the gaps in the WA continuum of care to drive children to out of state residential facilities
- Explore how the state might begin to fill the gaps (especially in the context of districts having to look out-of-state for residential therapeutic school options)

Table 1: Students at NPAs by Individuals with Disabilities Education Act (IDEA) Disability

Category

Disability Category	In-state	Out-of-state	Total	Change Over Prior Year
Autism	179	28	207	+3
Communication Disorders	1	1	2	+1
Deaf-Blindness	-	-	-	-1
Deafness	28	-	28	+1
Developmental Delays	11	-	11	+6
Emotional/Behavioral Disability	85	16	101	-22
Health Impairment	95	14	109	-7
Hearing Impairment	28	-	28	-5
Intellectual Disability	9	-	9	+2
Multiple Disabilities	36	9	45	-2
Specific Learning Disability	10	2	12	+4
Traumatic Brain Injury	-	-	-	-1
Visual Impairment	-	1	1	-
Total	482	71	553	-21

Source: November 2023 Federal Child Count.



Looking forward

April (Today)

- Update on WA Thriving
- Review SBBHSP priorities & proposal for strategic plan focus areas
- Discuss considerations for statewide guidance & direction
- Choose priority topics for April-July

May (5/28)

- Iterating considerations for statewide guidance
- Deep dive on priority #1

June (6/25)

- Iterating considerations for statewide guidance
- Deep dive on priority#2

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Very limited in-state day treatment options
No in-state therapeutic residential school options
Lack consistently accessible and effective processes for crisis

stabilization and assessment

July (7/23)

- Iterating considerations for statewide guidance
- Deep dive on priority#3
- Share info gained from ad-hoc convos RE therapeutic residential schools
- Bring it all together and finalize our input across all three topic areas



We'd love your feedback!

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https://survey.alchemer.com/s3/8281458/2025 SBBHSP-Subcommittee-Feedback-Survey New gov't delivery One Drive folder coming soon

Link: https://survey.alchemer.com/s3/8281458/2025-SBBHSP-Subcommittee-Feedback-Survey

The survey is anonymous, and you are welcome to answer as many, or as few, questions as you'd like

 Responses welcome from members, state agency reps, and public participants!



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