



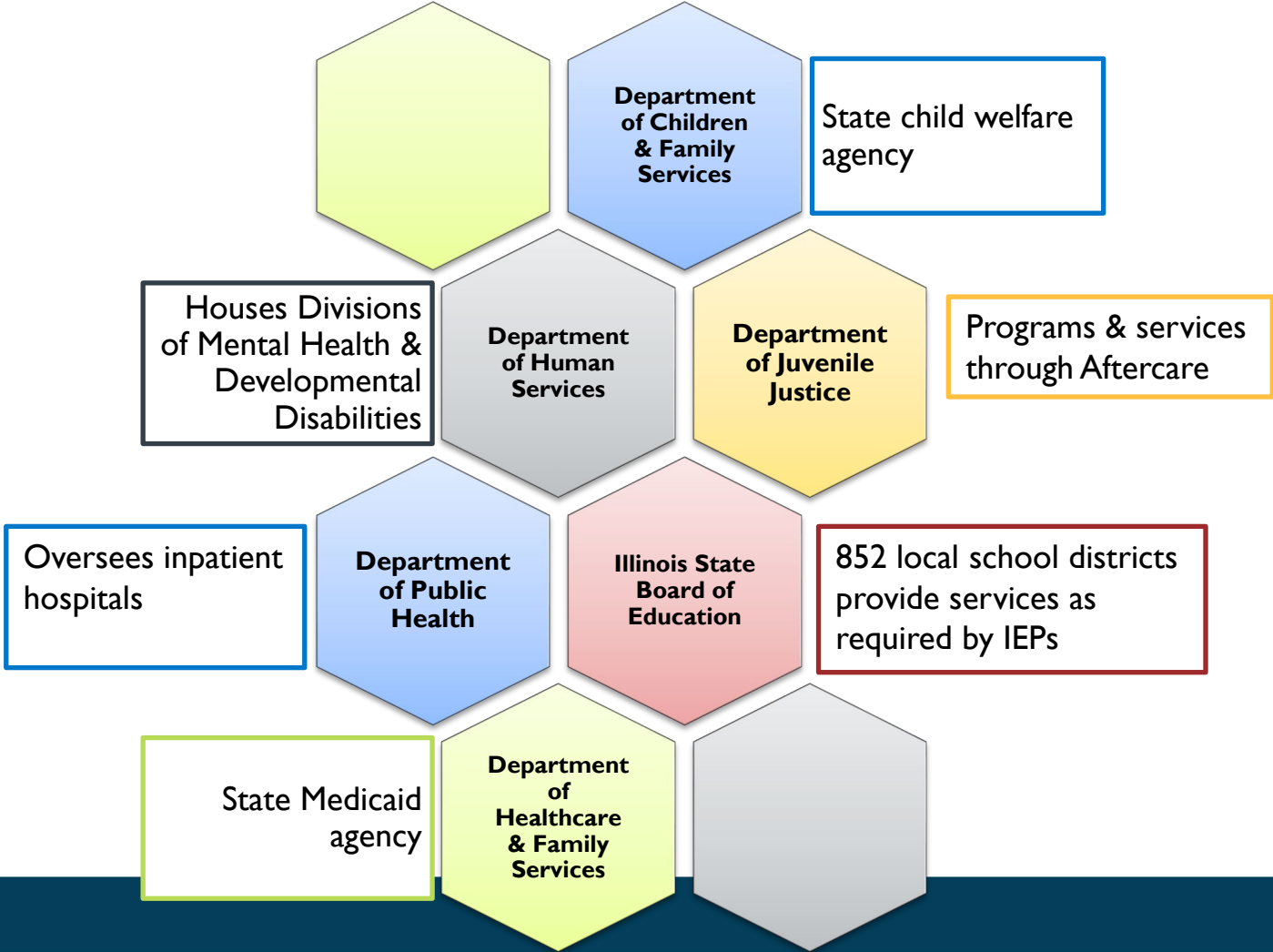
# Lessons Learned: A Landscape Scan of Mental Health Screening Practices in Illinois Schools

## Children's Behavioral Health Transformation Initiative Goals:

- Young people with significant behavioral health needs receive the community and residential services they need to thrive.
- Caregivers have transparency and clarity about how to get help for their children and the process for finding and getting placed in appropriate services.



# Six Child-Serving Agencies



# Blueprint for Transformation: A Vision for Improved Behavioral Healthcare for Illinois Children



# BLUEPRINT for TRANSFORMATION

*A Vision for Improved  
Behavioral Healthcare  
for Illinois Children*



January 2023



# Children's Behavioral Health Transformation Initiative Overview

## Centralize & Streamline

1. Develop Care Portal as centralized resource for families seeking services for children with significant and complex needs.
2. Improve coordination of service delivery.
3. Centralize oversight of residential beds.
4. Implement resource referral technology.

## Adjust Capacity

5. Conduct regular data analytic review to inform capacity adjustments.
6. Adjust rates, including standardizing rates for similar services.
7. Increase capacity by expanding eligibility and developing new service types.
8. Partner with providers in a standard protocol.

## Intervene Earlier

9. Offer universal screening in education and pediatrics.
10. Facilitate information sharing across agencies.
11. Build workforce using paraprofessionals and other roles.
12. Fortify community networks by investing in local communities and parent leadership.

# Public Act 103-0546

- Establishing Children's Behavioral Health Transformation Officer to lead systems change efforts
- Creating Interagency Children's Behavioral Health Services Team, consisting of DHS, HFS, DCFS, DJJ, DPH, and ISBE;
- Creating a public-facing, centralized intake portal (the "Portal") housed at DHS to triage cases, manage information, and provide parents with guidance to access state programs;
- Broadening supports and length of placement without custody that Comprehensive Community Based Youth Support (CCBYS) can provide to youth in crisis at risk of entering the child welfare system or juvenile detention
- Modifying the Community and Residential Services Authority to operate as a Parent/Guardian Navigator Assistance Program
- Requiring ISBE to build the foundation for annual mental health screenings for students in grades K-12 by conducting a landscape scan of current district-wide screening practices;
- Requiring all residential and institutional providers who receive reimbursement for children's mental health, substance use, and developmental disability services from HFS, DHS, DJJ, ISBE, or DCFS to submit staffing and occupancy numbers to the state for the purpose of establishing state need and placement availability;
- Requiring HFS to identify leading indicators for elevated behavioral health crisis risk and share them with Medicaid Managed Care Organizations (MCOs) and other HFS care coordination entities.

# Landscape Scan Methodology



- 13 Listening Sessions throughout the state – students, parents/caregivers, school personnel
- A feedback form was sent to all school districts, Regional Offices of Education, Intermediate Service Centers, and state-authorized charter schools



# Landscape Scan Participants

**649 entities  
provided data  
about their  
screening  
practices**

**557 people  
participated  
in listening  
sessions**



# Landscape Scan Findings



The value of mental health screening of students in schools



The importance of the culture and climate surrounding mental health in schools

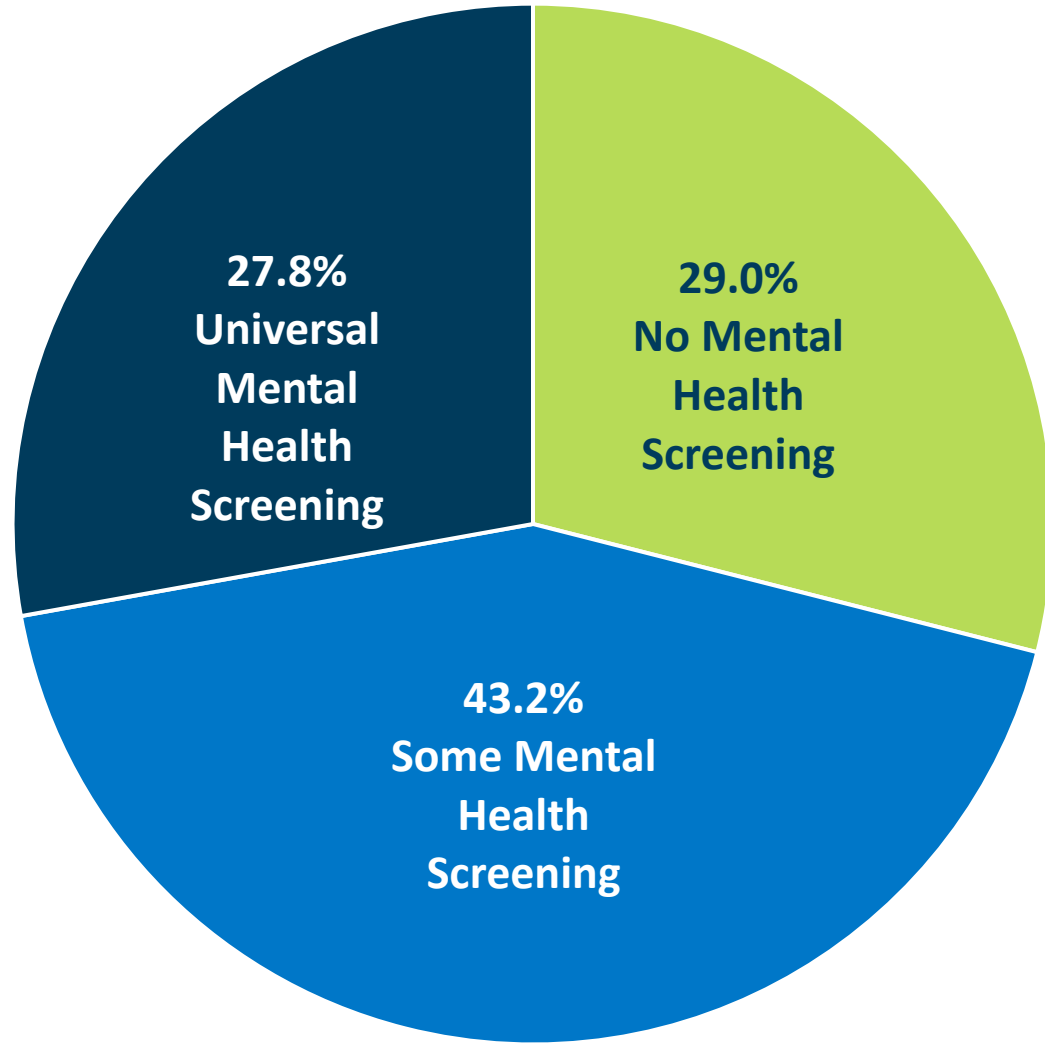


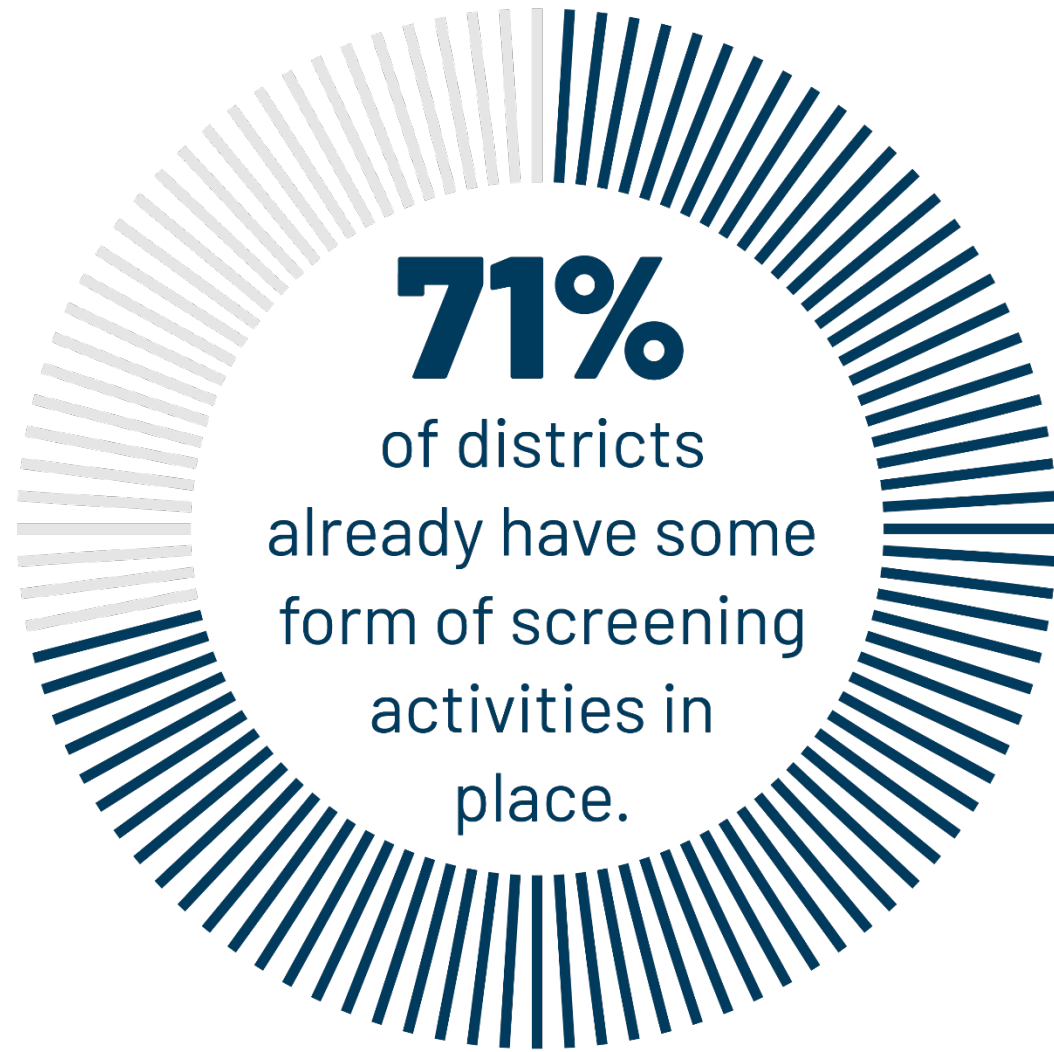
Current mental health screening practices in Illinois schools



The need for policy and procedural resources related to mental health screening

**Mental health screening status in Illinois school districts**





# District Highlight: Mount Olive Consolidated Unit School District 5

2 schools serving PreK-12<sup>th</sup> grades

486 students enrolled

## Current screening practices:

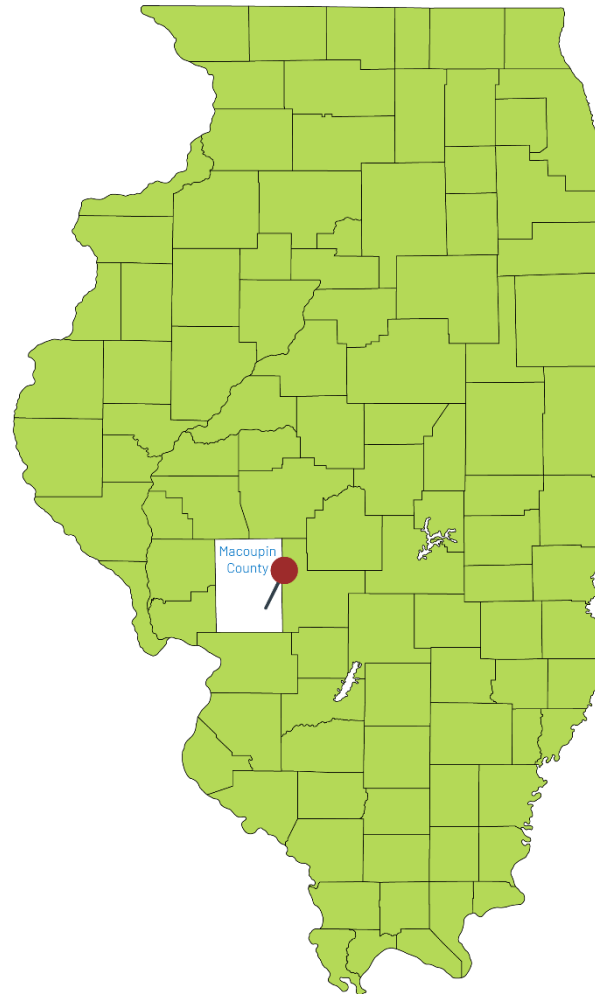
- All students in 3<sup>rd</sup> – 12<sup>th</sup> grades twice annually

## Tools:

- Basic Assessment System for Children-3 Behavioral and Emotional Screening System (BASC-3 BESS)

## Administered by:

- Self-reporting by student



# District Highlight: Skokie School District 69

3 schools serving PreK-8<sup>th</sup> grades

1,802 students enrolled

## Current screening practices:

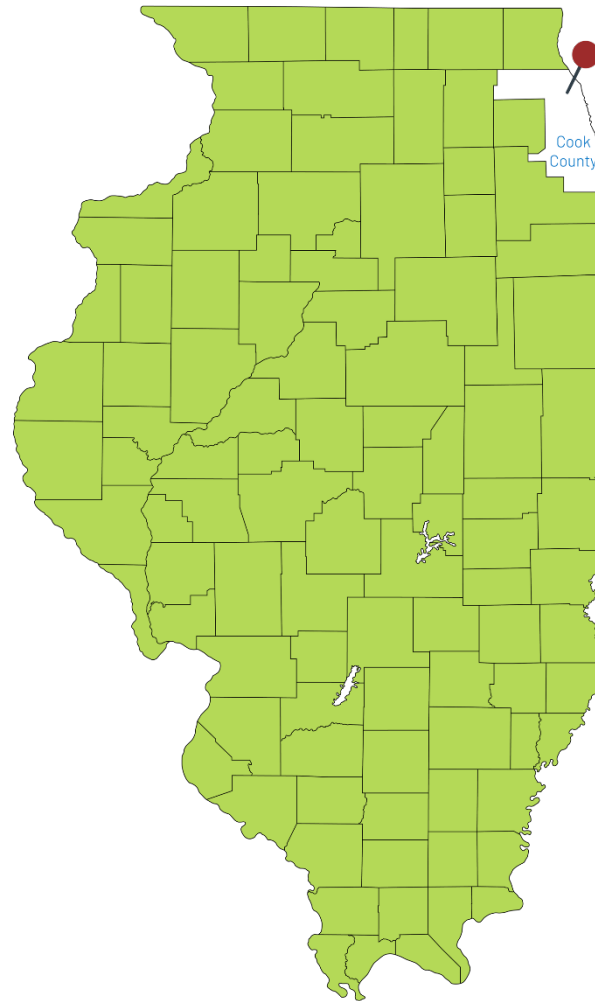
- All students 3 times a year (fall, winter, and spring) in Grades K-8
- PreK SEL screener prior to enrollment and three times during the year

## Tools:

- The Social, Academic, and Emotional Behavior Risk Scanner
- Brief Screening for Adolescent Depression
- Ages & Stages Questionnaire
- *MyTeachingStrategies* GOLD (PreK)

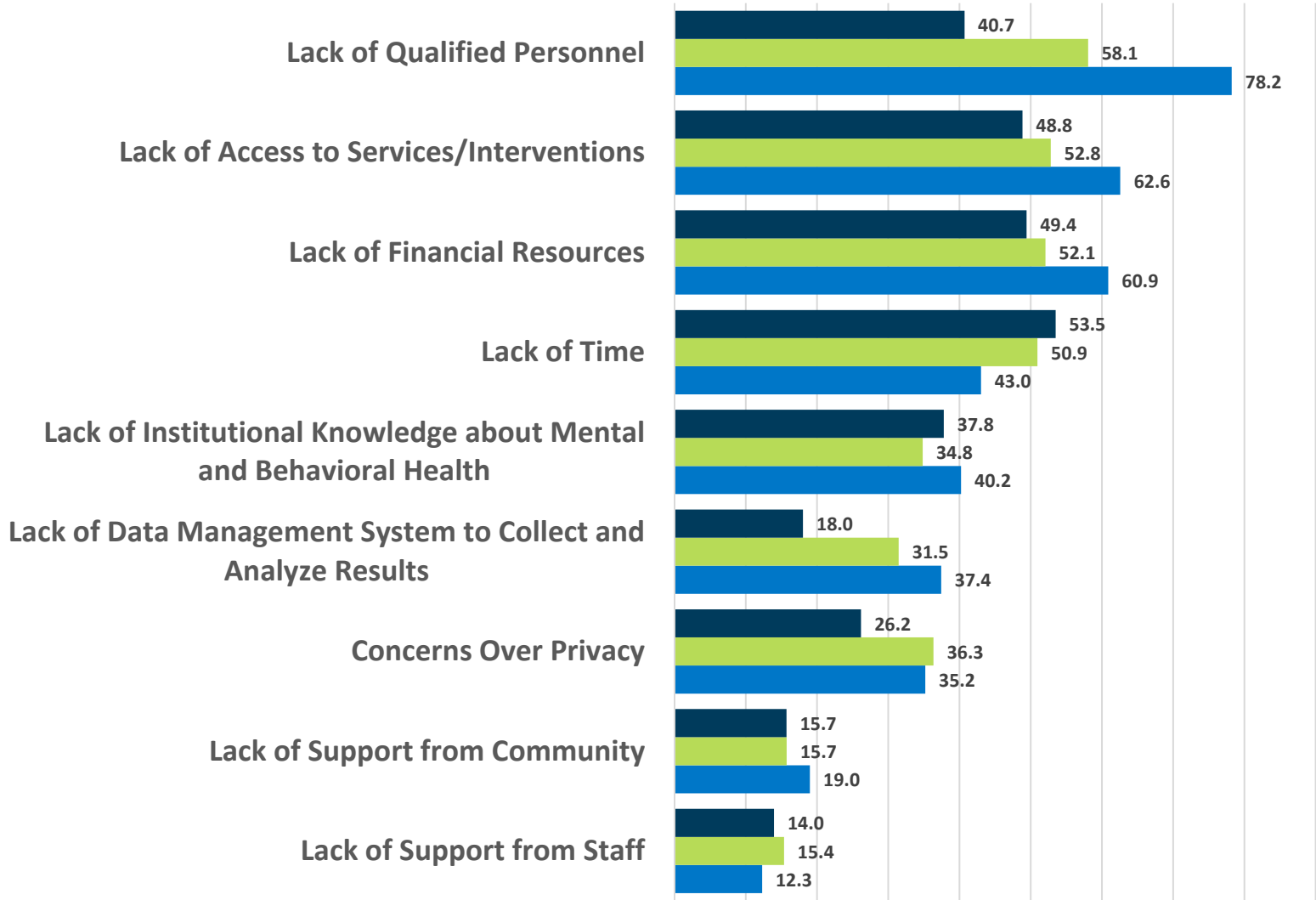
## Administered by:

- Teachers, parents, and self-reporting by student






■ Universal Screening   ■ Partial Screening   ■ No Screening



## Barriers and challenges to implementing universal mental and behavioral health screenings in schools by current screening status (in percent)



**Among the districts reporting no current screening activities, 80% reported a lack of qualified personnel as a barrier to universal screening.**

# Recommendation #1

Illinois should undertake a phased approach to universal mental health screening of all K-12 students enrolled in public school districts. Universal mental health screening of all K-12 students means mental health screening of every student in every grade enrolled in a school district each year.



## Recommendation #2

ISBE, in consultation with relevant stakeholders, should compile and organize resources to support school districts in improving the mental health culture and climate in schools and reducing the stigma related to screening, referral, and participation in mental health services.



## Recommendation #3

ISBE, in consultation with relevant stakeholders, should release guidance about (1) mental health screening tools available for school districts to use with students and (2) associated training for school personnel.



## Recommendation #4

ISBE should oversee a process of model policy development with relevant stakeholders that supports school districts in implementing universal mental health screening of students.

# SB 726 SA 1 – Passed Both Houses

105 ILCS 5/Sec. 2-3.203(b) On or before October 1, 2024, the State Board of Education, in consultation with the Children's Behavioral Health Transformation Team, the Office of the Governor, and relevant stakeholders as needed shall **release a strategy that includes a tool for measuring capacity and readiness to implement universal mental health screening of students.** The strategy shall build upon existing efforts to understand district needs for resources, technology, training, and infrastructure supports. The strategy shall include a framework for supporting districts in a phased approach to implement universal mental health screenings. The State Board of Education shall issue a report to the Governor and the General Assembly on school district readiness and plan for phased approach to universal mental health screening of students on or before April 1, 2025.

**Thank you!**

**Scan to view the report**

