

NH School Behavioral Health CoP

Minutes- 5/24/16

Attendance- M. Halligan-Foley, M. Tracey, J. Lubarsky, K. Abate, E. Mann, K. Untiet, M. Steady, J. Malloy, S. Presti-Lazzar, L. Thomas, K. Murphy, K. Salvati, K. McKinnon

1. Discussion of mission, current activities, discussion of the “charge” of our mission, discussion of historical activities. KM- we have had multiple opportunities to inform the dialogue at a national level, were a national case study state for IDEA Partnership
2. ESSA: DOE has invited stakeholders to discuss certain areas- not sure violence has been addressed as part of that plan, is included in topics that can be addressed
3. Update- SB 534 has been signed
4. Kate S- attending national policy meeting (School Psych), anyone can attend but sponsored by Nat’l School Psych Association
5. Discussion of possible focus areas to further explore:
  - a. SHAPE system- M. Steady, national and free, can point up sustainability planning areas for districts
  - b. K. Murphy- Trauma- students impacted by trauma. Exploring best practices. Promotion?
  - c. E. Mann- idea around 3 distinct tiers as opposed to idea of practice across tiers/blend, vs. specific activities per tier- universal includes all. Teachers have to implement throughout the day with all kids, all recommendations and etc from all the specialists and interventions. If therapies are simply co-located, we miss opportunity. Most students have some sort of executive function challenge and yet are tasked to bring information back and apply interventions in daily life. Teach more at the Universal and utilize Tier 2 and 3 to enhance that teaching for students with more significant challenges. Ex: Teach self-regulation at the Universal, enhance at 2 and 3.
  - d. M. Tracey- clarify where SI sits for workplan- is under MTSS subgroup
  - e. K. Salvati- Social Emotional Learning as a component of best practices. Are currently 14 states with SEL Standards. Question as to whether tied to certification in all those states.
  - f. J. Lubarsky- Integrated Care is the current hot topic for cmhc’s, how do things move forward? Impact potentiality for SB 534.
  - g. K. Salvati- lots of discussion and work at NHASP re different roles for SP’s, beyond testing function.
  - h. E. Mann- using first 6 weeks of school year to integrate specialists into universal life of school, learn about real life classrooms. Develop best practice recommendations?
  - i. M. Salvatoriello- focus on “the cliff”- the dropoff of support for young people upon graduation. Adult eligibility so much tighter, need SPMI determination. Discussion of VR support variability.
  - j. J. Lubarsky- philosophy of agency, related to SB 534. Not using all the fancy SoC words, but is focused on what families and the community need. Focus on access as well. Co-location not just in schools, also within community health providers, warm handoff from medical practitioner to therapist. Portsmouth Resource Connections team- similar to

standing interagency teams, talk about shared cases. Sometimes families come to team prior to deep system involvement. J. Malloy- video on IoD website about Seacoast collaboration with Exeter around RENEW. Exeter also supplements contract with Seacoast to do the integration/observation work that is essential and not billable. Community Partners contracts with schools for time spent in consultation with school staff for individual students.

6. Planning for retreat:
  - a. One piece of agenda should be around leading by convening
  - b. Revisit mission and vision
  - c. Mary will check in with Joanne Cashman around whether she can extend her visit in August to facilitate some work with us on 8/9?
  - d. 8/10 is grant TA day