



# BIRCh Project

Development and Implementation of the Massachusetts  
School-Based Behavioral Health Technical Assistance Center:  
Annual Progress Report  
2024



## Table of Contents

1. Acknowledgements.....	2
2. Executive Summary.....	3
3. Introduction.....	4
a. Background and History of the TA Center.....	4
b. Mission of the TA Center.....	5
c. TA Center Implementation Timeline.....	6
4. Services & Supports and Outputs & Outcomes.....	7
a. Tier 1: TA for all.....	7
I. Leadership/Statewide School-Based Behavioral Health Advisory Board.....	7
II. Online Resources.....	8
III. Learning Modules.....	8
IV. Protocols and Toolkits.....	10
V. TA Center Tips and Tools Seminars.....	12
VI. Shared Solutions and Partnerships: Advancing School Behavioral Health in Western Massachusetts.....	13
b. Tier 2: Regional Approach to Technical Assistance.....	14
I. Professional Learning Communities.....	14
II. Workforce Development: BIRCh Fellows.....	16
c. Tier 3: Localized Approach for Demonstration Districts.....	16
I. Western Massachusetts Advisory Council.....	17
II. District Coordination Team.....	17
5. Next Steps and Scale Up.....	18

## Acknowledgements and Thanks

The BIRCh Project’s work would not be possible without the support and trust of:

- Massachusetts Department of Mental Health
- Boston Children’s Hospital
- Children’s Mental Health Campaign
- Boston Public Schools Comprehensive Behavioral Health Model
- Walker Therapeutic and Educational Programs/DESE
- Statewide and Western MA School-based Behavioral Health Advisory Boards

We continue to be profoundly grateful for the opportunity to work alongside the following partners in pursuit of our shared mission to support the clinicians, educators, parents and guardians of the youth whose behavioral health and overall well-being is our primary mission. Together, we are stronger and make greater progress.

The following BIRCh Project graduate students deserve special recognition and appreciation for contributing to this report including Diana Laenen, Ritushree Bagepalli, Jacqueline Osborn, Paige Pannozzo, Weihong Yuan, Yu Zhang, Kelley Murphy, and Kerstin Schnopp.

## Executive Summary

The Massachusetts School-Based Technical Assistance Center (SBBH TA Center) is grounded in an equity-driven, [Interconnected Systems Framework](#) (ISF), organized into three tiers at varying levels of intensity (Barrett et al., 2013). The SBBH TA Center is now legislatively funded within the budget of the Commonwealth of Massachusetts through the Department of Mental Health.

**Tier 1 initiatives** focus on creating a statewide infrastructure to fully deploy the TA Center's work, including:

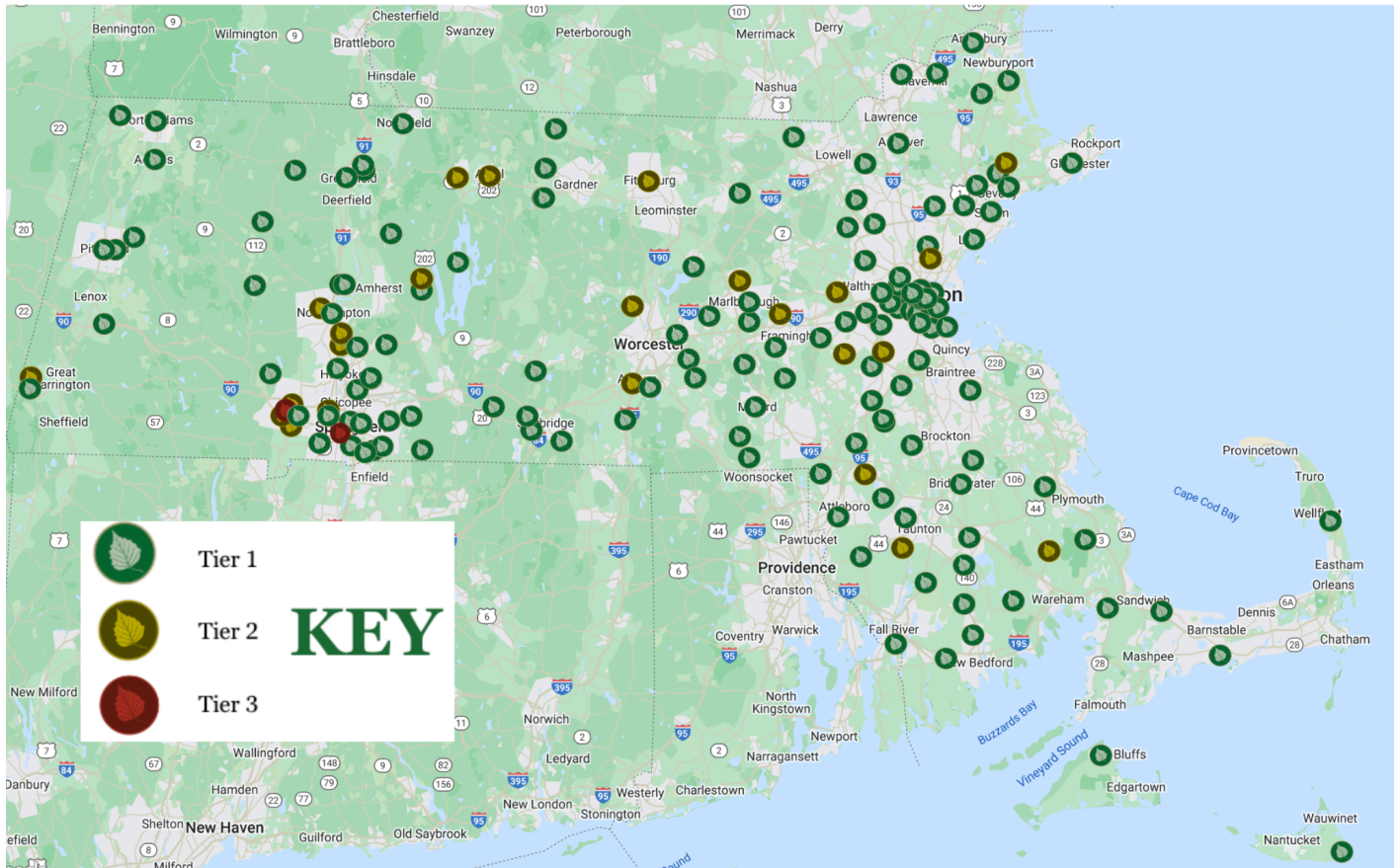
- Creating a statewide school-based behavioral health advisory board
- Developing a central TA center office
- Implementing a regionalized approach to TA
- Providing online resources and training (e.g., asynchronous learning modules, protocols and toolkits, TA Center Tips and Tools Live Training Seminars)

Tier 1 resources and training are available to all schools, districts, and community partners in the Commonwealth. To date, the TA Center has served 117 Massachusetts school districts and has shared resources, materials, consultation, and trainings with 36 other organizations depicted in the map below.

**Tier 2 training and services** support providers, schools, districts, and communities with targeted Professional Learning Communities (PLCs). During the 2023-2024 school year, PLCs focused on building district capacity to implement universal behavioral health screening, and supporting district and school-based data analysts. Twenty-seven districts have been served at Tier 2. A Data Analyst PLC launched, with 28 participants from 21 school districts across the state that signed up and attended at least one session of the series.

**Tier 3 offers consultation and coaching for demonstration districts** in two Western Massachusetts school districts. The SBBH TA Center provides individualized coaching and needs assessment to inform the development of District-Community Leadership Teams and ongoing efforts for district coordination of behavioral health efforts.

# BIRCh Project 2022-2024 Impact



Each leaf represents a district supported by the SBBH TA Center from 2022 through the present.

## Introduction: TA Center Background and History

Beginning in the 2020-2021 school year, The BIRCh Project at the University of Massachusetts (UMass Boston and Amherst), contracted with the Department of Mental Health (DMH) to create a plan for the development of a School-Based Behavioral Health Technical Assistance (SBBH TA) Center.<sup>1</sup>

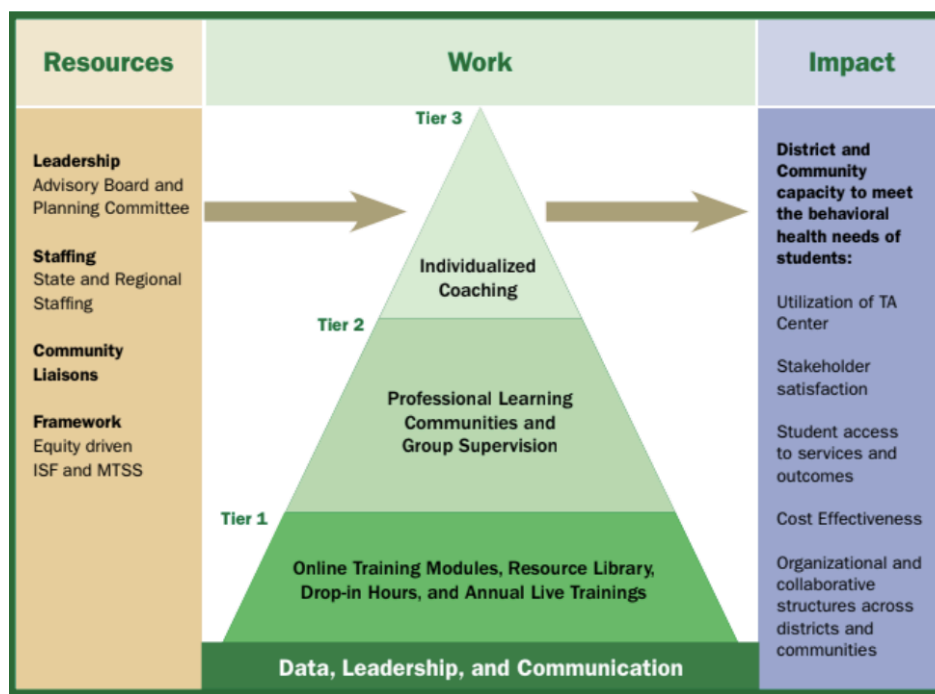
A needs assessment was conducted, surveying over 500 leaders, community partners and school and behavioral health professionals in Massachusetts. This assessment has informed the public health approach to the TA Center’s rollout and implementation strategies. A public health approach is an evidence-based strategy for organizing behavioral health supports and services at the district and school levels to improve access to, and quality of, behavioral health supports and services (Doll & Cummings, 2008; McIntosh et al., 2014; Sugai & Horner, 2009).

<sup>1</sup> Please refer to BIRCh Project (2021), “Development and Implementation of the Massachusetts Technical Assistance Center for School-Based Behavioral Health” for more information.

## A Public Health Approach to Statewide Technical Assistance

The work of the TA Center is grounded in an equity-driven, Interconnected Systems Framework (ISF), organized into three tiers at varying levels of intensity (Barrett et al., 2013). An ISF is a multi-tiered system of support (MTSS) that integrates community behavioral health supports to create and sustain comprehensive school behavioral health systems.

- At the universal Tier 1 level, all districts can access online learning modules, live training, and protocols/toolkits to guide the implementation of best practices.
- At the targeted Tier 2 level, districts can access Professional Learning Communities (PLCs) to provide ongoing coaching.
- Tier 3 provides individualized coaching for demonstration districts in Western Massachusetts, based on need and the district’s readiness for systems change. A regional conference in spring 2024 brought together collaborators across Western Massachusetts to network and plan comprehensive district behavioral health initiatives.



The three-tiered ISF framework

## The TA Center Mission

This year, the University of Massachusetts granted BIRCh status to become a Center on the Boston campus. Upon formalization, The BIRCh Center will have a new mission statement:

*The BIRCh Center advances equitable interconnected behavioral health systems that support children and their caregivers in Massachusetts by building school districts’ capacities for implementation of **integrated behavioral health, fostering community***

*partnerships, providing pre-service training and professional development, and advancing best practices through translational research.*

The goals of the TA Center are to:

1. Strengthen **school districts' capacity** to promote wellness, including behavioral health
2. Enhance **partnerships** between school districts, and with state and community agencies/organizations
3. Develop the children's school-based **behavioral health workforce**
4. Improve access to, and effectiveness of, high-quality and culturally and contextually responsive school-based **behavioral health services**

The TA Center's theory of change aims to improve children's access to prevention and evidence-based services by strengthening tiered behavioral health supports and community partnerships. Operating at district, community, regional, and state levels, the Center builds resources and enhances existing structures. Upon formal establishment as a Center, BIRCh partnered with evaluators to refine its theory of change and logic model, guiding implementation and assessment.

### **TA Center Implementation Timeline**

To build capacity to support all districts in developing comprehensive and sustainable behavioral health systems across the Commonwealth, the TA Center launches and scales efforts with a phased approach, based on implementation science.

**Development phase and Year 1 (2020-2022):** Objectives for Exploration, Adoption, and Installation were largely met. These included establishing the SBBH Advisory Board, designing the TA Center, and developing and reviewing resources. Solidifying leadership and communication structures are still in progress.

**Year 2 (2022-2023 school year):** Initial implementation of the TA Center began. Please refer to the BIRCh Project (2023), "[Development and Implementation of the Massachusetts Technical Assistance Center for School-Based Behavioral Health](#)" for more information about the plan for the rollout and implementation of the TA Center.

**Year 3 (2023-2024 school year):** The TA Center's foundations expanded, along with further developing the Western MA regional hub and the statewide center.

This report will summarize this year's progress on the resources, work, and impact/outcomes at each tier of the SBBH TA Center implementation over the first three years of the project, as proposed in the 2021 report.

### **Staffing**

The BIRCh team comprises faculty and staff from the UMass Boston, Boston Children's Hospital, and UMass Amherst campuses. The leadership team consists of two executive directors and faculty in School Psychology: a Clinical Psychologist who serves as the Director of Advancement, and a School Psychologist who serves as the Project Director at UMass Boston. Doctoral students in School and Counseling Psychology support Center development, implementation, and research. Consultants provide guidance on content and process (e.g.,



national and local efforts in implementation and evaluation of school mental health; communications support, and evaluation and coaching activities). Current efforts are underway to hire TA Center Regional Directors in Western and Central Massachusetts to help develop regional hubs.

### **Funding**

The Boston Children’s Hospital Collaboration for Community Health Mental Health Systems awarded the BIRCh Project a three-year grant in 2022 to support the retention and mentoring of students from historically marginalized backgrounds in behavioral health graduate training across the state. This Fellows program is discussed later in this report.

The SBBH TA Center received funding from the state legislature, with a continuation into the 2025 Massachusetts state budget that Governor Healey signed on July 29, 2024. We continue to be grateful to the Legislators and the [Children’s Mental Health Campaign](#) for their tremendous and tireless advocacy in helping to secure significant investments in children’s behavioral health during a difficult budget season. We are hopeful the TA Center will remain a priority in the state budget for years to come.

The BIRCh Project also received a three-year, \$2.5 million dollar grant from the US Department of Health and Human Services Center in partnership with the MassHealth School-Based Medicaid Program for reimbursement for Medicaid services. This funded project will develop and pilot a comprehensive, scalable model to help local education agencies access expanded Medicaid reimbursement for behavioral health services, which largely go underutilized.

## **Services & Supports and Outputs & Outcomes**

### **Tier 1**

All schools, districts, and community partners across the Commonwealth can access the Center’s Tier 1 resources and training.

**Leadership/Statewide School-Based Behavioral Health Advisory Board (SBBH)** Since its formation in 2020, the board has met monthly, representing 33 agencies, organizations, districts, universities, and hospitals from across the Commonwealth. The SBBH board’s mission is to *center equity as we build knowledge and create advocacy strategies in efforts to improve access to school-based behavioral health services and supports*. Its goals are to:

1. Unite a coalition of different organizations to build buy-in among schools and districts to improve school-based behavioral health in Massachusetts.
2. Create shared definitions and standards for comprehensive school-based behavioral health across the Commonwealth.

3. Establish minimum standards for an equity-informed, comprehensive school-based system of tiered social, emotional, and behavioral supports.

**Organizations represented on Statewide School-Based Behavioral Health Advisory Board (SBBH)**

Boston Children's Hospital: Accountable Care Organization, Government Relations, Neighborhood Partnership	Federation for Children with Special Needs	MA Department of Elementary and Secondary Education	Rennie Center	UMass Amherst
Boston Medical Center	Franciscan's Hospital	MA Department of Mental Health	SEL4MA	UMass Boston
Boston Public Schools	Health Care For All	MA Department of Public Health	TeachPlus MA: Chelsea, Lowell, and North Reading Public Schools	UMass Lowell
Brookline Center including BRYT and the Massachusetts School-Based Telebehavioral Health Project	Higher Ground Boston	MassHealth	The Baker Center for Children and Families	Walker Therapeutic and Educational Programs
Children's Mental Health Campaign	Health Law Advocates	Methuen Public Schools	The Home for Little Wanderers	William James
Eliot Community Human Services	Massachusetts Association for Mental Health	Office of the Child Advocate	The NAN Project	Worcester State University
	MA Bureau of Community Health and Prevention	Parent Professional Advocacy League	Trails to Wellness	

**Online Resources Under Development**

A new BIRCh Project website is currently under development to optimize communication and collaboration developed. As of June 2024, the current website ([birchproject.org](http://birchproject.org)) has attracted 21,979 visits since its launch in 2019. Most visitors interact with the Technical Assistance Center, Trainings and Resources page. In the 2023-24 school year the site attracted 5,114 visitors, totaling 6,102 page views. Most views occurred on the “About” page, the Online Learning page, and the BIRCh home page.

**Learning Modules**

Participants can access online training modules freely on YouTube and Echo360, our learning management system (LMS). The LMS tracks progress to award participants with certificates they can put toward their DESE Professional Development points (PDPs). In total, 238 individuals have viewed our modules via the LMS. The YouTube videos have received a total of 6,862 views.



### **Universal Behavioral Health Screening Module Series**

These seven modules guide school or district teams on refining universal social, emotional, and behavioral screening practices and connecting screening data to interventions. As of June 2024, 71 participants viewed these modules on Echo360 to receive certificates, 17 of which completed the series and earned certificates. On YouTube, the videos have been viewed 741 times in total as follows:

- Introduction to Screening: Screening with An Equity Lens (209 views)
- Using, Social, Emotional, and Behavioral Screening Data (113 views)
- Prerequisites to Social, Emotional, and Behavioral Screening (111 views)
- Screening Approaches (91 views)
- Selecting a Universal Screener (82 views)
- Screening Data (68 views)
- Screening Administration (67 views)

### **Trainings for Paraprofessionals and Mentors Module Series**

The BIRCh Project, partnering with the [Office of the Child Advocate](#), created a 10-module training curriculum and supporting facilitation guides to conduct live training and coaching. This series focuses on evidence-based practices and interviews to enhance social, emotional, and behavioral services for children. The modules equip professionals with culturally responsive and trauma-informed assessment, prevention, and intervention strategies. They cover fostering youth wellbeing, behavior management, and skill building, while also supporting staff wellbeing and those exploring behavioral health careers. As of June 2024, 35 participants have accessed the modules on Echo360, but none have completed the series for certificates. On YouTube, the videos have been viewed 5,543 times as follows:

- Introduction to Module Series (1,271 views)
- Understanding behavior: The ABCs (922 views)
- Engagement Strategies at Tier 1 (616 views)
- Responding to Challenging Behavior (593 views)
- Fostering Wellbeing of Staff and Students (564 views)
- Skill Building at Tiers 2 & 3: Adding to Your Intervention (484 views)
- Skill Building at Tiers 2 & 3: Setting the Stage for Intervention Implementation (413 views)
- Mental Health Diagnoses: Community and School Settings (267 views)
- Assessment: School and Community Settings (228 views)
- Career Paths and Certifications (185 views)

### **Hospital to School Transition Module Series**

The BIRCh Project's Hospital to School Transition Protocol offers five modules that help schools develop policies and better collaboration with agencies to ease the return of youths to school after a psychiatric hospitalization. As of June 2024, 18 participants viewed these on Echo360 (one completion certificate issued), while on YouTube, the videos received 511 views. See the [Protocols and Toolkits section](#) for more information.

- Supporting the Hospital to School Transition (189 views)
- Case Study: Grey (97 views)
- Case Study: Jaden (94 Views)
- Case Study: Blossom (71 Views)
- Case Study: Larry (60 views)

### **School Psychologists and Medicaid Module**

The BIRCh Project and MassHealth’s School-Based Medicaid Program developed a free training to help school districts access federal Medicaid reimbursement funds for services provided by school psychologists. As of June 2024, 114 participants had signed up to view this module on Echo360, with 25 certificates of completion issued. The module has been viewed 67 times on YouTube.

### **Mobile Crisis-School Collaboration Module**

This module helps improve partnerships between school staff and mobile crisis staff to deliver responsive crisis intervention services. Based on the BIRCh Project’s Mobile Crisis Toolkit, this implementation support provides best practices and resources to build sustained, productive partnerships. See the [Protocols and Toolkits section](#) for more information. Two participants have signed up via our LMS to view the module.

### **Pre-Service Teacher Intentionality and Equity for Students (TIES) Teacher Training**

The six learning modules feature evidence-based strategies for (1) engaging in relational contact, (2) setting behavioral expectations, (3) creating opportunities to respond, (4) offering behavior-specific praise, and (5) providing corrective feedback. The goal is to enhance culturally responsive classroom management and improve student-teacher relationships by boosting teacher self-efficacy and self-awareness with diverse student populations. Participants engage in collaborative activities with opportunities for discussion and reflection. In January 2024, 60 pre-service teachers studying at UMass Amherst completed this training.

## **Protocols and Toolkits**

### **Hospital to School Transition Protocol**

The BIRCh team developed a comprehensive, research-based tool to guide the transition and return to school for students following psychiatric hospitalization. We reviewed research literature to identify the needs of students, families, schools, and hospitals during this transition. We then collected and vetted transition protocols from districts nationwide based on the following criteria:

- Applicability to K-12 settings
- Approval by a school district
- Legal defensibility
- Integration into a multi-tiered framework
- Promotion of equitable access to services
- Cultural responsiveness
- Comprehensiveness
- Clarity and simplicity
- Recency of the tool
- Ability to be implemented without requiring extra funding

The Hospital to School Transition Protocol was reassessed based on diverse resources and best practices from literature. A team of school-based providers then reviewed its feasibility and

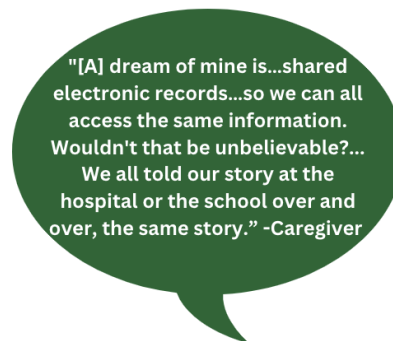
usability. As of June 2024, 258 participants had signed up to receive this protocol.

Schools and districts can contact other organizations to learn more, such as Bridge for Resilient Youth in Transition (BRYT), a program of The Brookline Center for Community Mental Health.

**Fostering Collaboration: Mobile Crisis Intervention (MCI) & School Teams Needs Assessment**  
Focus groups with school staff, MCI providers, and caregivers across the Commonwealth explored strengths and challenges of MCI-school collaboration. Participants identified systemic and interpersonal barriers, including:

- Limited capacity and resources
- Cultural and contextual variability
- Contrasting organizational models
- Challenges with collaboration and teaming
- Misinformation among providers and caregivers
- High levels of staff burnout

Some verbatim feedback from participants:



#### *A Toolkit to Foster MCI, School, and Caregiver Collaboration*

This free toolkit to support inter-agency collaboration was developed providing:

- Educational information on MCI's history and policy in Massachusetts
- Practices for setting the foundation for MCI-school-family partnerships,
- Practical tools and guidance to facilitate collaboration before, during, and after crises.

It was presented at the Fall 2023 Massachusetts School Psychologists Association conference and is being studied for part of a doctoral dissertation.

#### **Behavioral Health Terms Dictionary**

The TA Center created two behavioral health dictionaries: one for providers and one for caregivers. These aim to establish a shared understanding and common language across domains. Collaborators helped select terms to include.

BIRCh Team members researched and defined each term comprehensively. Using detailed

**TABLE OF CONTENTS**

**AGENCIES & SERVICES** .....3  
 LARGE AGENCIES .....3  
 COMMUNITY/INDEPENDENT AGENCIES .....4  
 ROLES .....5  
 SERVICES .....5  
**GENERAL MENTAL HEALTH TERMS** .....7  
**LEVELS OF CARE** .....11  
**LICENSE AND CERTIFICATION TYPES** .....13  
**SCHOOL BEHAVIORAL HEALTH-RELATED TERMS** .....15  
 LAWS .....15  
 FRAMEWORKS .....17  
 PROCEDURES .....18  
 RESOURCES .....19  
 ASSESSMENTS .....19  
**COMMON TYPES OF THERAPY** .....20  
**HELPFUL RESOURCES** .....22

*The BIRCh team would like to extend our thanks and appreciation to the organizations and individuals who contributed to the completion of this document. Thank you to the groups that encouraged us to make this resource available.*

feedback forms, they refined meanings, incorporated state agency-specific nuances, and improved sequence and accessibility. Online tools helped analyze reading levels, enhance precision, and eliminate jargon.

*To view the Provider Version, click [here](#).*

BIRCh distributes the dictionaries electronically via newsletters and email lists. They were presented at a national conference in February 2024, gathering feedback from professionals nationwide.

*To view the Family Version, click [here](#).*

The dictionaries are continually updated based on feedback, new research, and suggestions. They're available for download via the links above. Future plans include translations and further input gathering.

**TA Center Tips and Tools Seminars**

BIRCh collaborated with state school districts to promote free seminars on school-based behavioral health. Three sessions were developed: a SWIS refresher in October 2023, MTSS team-building in December 2023, and creating district mental health plan playbooks in January 2024.



Hourly virtual sessions offered practical takeaways and peer networking. Participants earning 80% or above on post-tests received certificates. Pre- and post-tests aligned with learning outcomes but lacked formal psychometric validation. Of 13 participants completing both tests across three sessions, 54% improved their scores. The "SWIS Refresher" had the highest attendance (11) and showed the most improvement, with all participants demonstrating growth. "Mapping the Future: Crafting a Comprehensive Mental Health Playbook for School Districts" had the lowest attendance with four participants.

Seminar attendance declined as the year progressed, possibly due to end-of-year demands or varying topic interest. Twenty individuals attended overall, with 5% joining multiple sessions.

All were White. Participants came from nine school districts, one charter school, and two partner organizations. Most learned of the seminars through colleagues or district emails.

All participants who completed the pre- and post-test also completed an **evaluation section** consisting of four feedback questions (i.e., three Likert-scale questions and one optional open-response). Eighty-one percent reported that they were “likely” and “highly likely” to implement their learnings into their practice.



Ranked Their Skills Higher After Attending Seminar



“Satisfied” or “Highly Satisfied” with Seminar Content

## **Shared Solutions and Partnerships: Advancing School Behavioral Health in Western Massachusetts**

In May 2024, the BIRCh Project hosted the above-titled event in Northampton. Its goal was to leverage local school-based mental health partnerships, build a shared understanding of the Interconnected Systems Framework (ISF), and establish strategic steps for developing School District Mental Health Roadmaps. 70 participants attended, representing a range of school districts, community agencies, and educational collaboratives.

Participants engaged in various activities designed to foster collaboration and strategic planning via keynotes, panels and breakout sessions. Dr. Nadia Ward, Executive Director of the Mosakowski Institute for Public Enterprise and national leader in discourse on the social-emotional and behavioral health needs of youth, provided an inspiring keynote address. Several crucial themes from discussions across the day emerged:

**Culturally Affirming Partnerships Across Schools and Community Services:** Attendees reported effective parent and mental health collaboration, successful MTSS use, and SEL program development. Growth areas include expanding mental health services, improving community service integration, increasing family engagement, and offering more professional development. Professionals seek help with data collection, SEL and trauma-informed care training, community outreach, and implementing evidence-based practices.

**Implementing Evidence-Based Practices in Schools and Community Health:** Attendees noted successful training sessions exist for SEL for teachers, student wellness initiatives, collaboration between mental health and academic support services, and improved family engagement. However, there remains great need for more training for teachers, integration of mental health services, better alignment of academic and mental health services, and family and community involvement. These could be satisfied with additional training, resources, and wellness programs; assistance with data collection and analysis, and facilitated collaboration between schools and community health providers.

**Integrated Needs Assessment Strategies for Districts and Providers:** Attendees reported increased parent engagement, strong data sharing practices, and effective use of student support teams. They desire more support with strategic planning, data interpretation, and creating a comprehensive needs assessment framework. Potential opportunities for growth lie in enhanced communication between departments, expanded professional development, better integration of community resources, and increased data-driven decision making.

**Data-Driven Decision-Making for Schools and Health Services:** Participants noted effective data use in instruction, collaboration between teachers and data specialists, and improved data literacy. However, they identified a need for more training on data interpretation in behavioral health, better integration and access to real-time data, and enhanced data privacy and security. Professionals seek workshops on data analysis, comprehensive data policies, system upgrades, and improved cross-departmental collaboration.

Feedback from conference participants was overwhelmingly positive around "hearing from others," "the opportunity to speak and bring up challenges," and the structured format of the breakout sessions. The availability of resource materials and follow-up documentation was also called very helpful.

## Tier 2: Regional Approach to Technical Assistance

The TA Center's Tier 2 training and services support those providers, schools, districts, and communities that have increased need.

### Professional Learning Communities

The BIRCh Project partnered with the Social Emotional Learning Alliance for Massachusetts (SEL4MA), a 501(c)(3) educational organization, to strengthen district and community capacity. Since its inception in 2011, SEL4MA is the leading voice for making SEL a strategic priority in Massachusetts education and communities. SEL4MA hosts approximately 3-4 regional workshops a year and has more than 4,100 members. From July 2023 to June 2024, we supported SEL4MA to implement six professional learning communities and online training to promote behavioral health initiatives across the Commonwealth, including:

- **District SEL Coordinator Job-Alike Group:** This statewide peer sharing network helps school districts to coordinate SEL activities, share experiences and resources, and problem-solve around shared challenges. Fifty-nine school districts participated in the virtual and in-person meetings, and an active email discussion group.
- **Consortium for SEL in Teacher Education (SEL-TEd)** aims to advocate and advance substantive integration of SEL research and practice in teacher preparation programs. The Consortium led seven monthly online peer sharing meetings on resource development and distribution from October 2023-June 2024.
- **SEL in Early Childhood Peer Sharing Network** launched and facilitated a statewide peer sharing network of early childhood educators, providing opportunities to share support, resources, and strategies in promoting SEL for themselves, as well as the children and families they serve. The first meeting in October 2023 attracted 138 participants; the second in December had 37.
- **The SEL Youth Leadership Council** aims to create a statewide peer network of youth leaders (under 24) involved in SEL projects. A landscape analysis identified 18 youth organizations focused on SEL, equity, and anti-racism. From August 2024, SEL4MA will partner with SparkShare to advance youth-led initiatives, facilitating sessions on Transformative SEL (tSEL) and engaging in coalition building.
- **The Intersecting SEL, Social Justice, and Equity Program** offers strategies for implementing SEL through an equity lens. Four cohorts (67 individuals total) participated in a two-part series exploring the relationship between SEL, social justice, and equity. The program provided foundational knowledge about Transformative SEL (tSEL) and systems of power and privilege, contextualized to participants' experiences.
- **The SEL Resource Showcase** was a daylong online professional development event. Nine hundred thirty-seven participants learned from national experts and exchanged practical SEL strategies through plenary and concurrent breakout sessions on innovative online and community-based SEL models, SEL assessment-driven instruction, and a deep resource library.



## Data Analyst PLC

The BIRCh Project’s Data Analyst PLC series aims to enhance the capacity of data leaders in schools to address equity and disproportionality. Participants from various Massachusetts school districts attended three monthly sessions from March-May 2024 to help them develop data-driven cultures and effective behavioral health interventions in schools. \

The workshop emphasized the importance of not just collecting data, but also interpreting it to generate actionable insights.

**Session 1** focused on identifying effective data leaders and fostering a data-driven culture. Twenty-four participants learned about establishing readiness for data collection, management and use; understanding the role of a data analyst, and reviewing psychosocial data indicators.

The workshop's clear and structured format, with a logical progression from basic concepts to more advanced techniques, made the content easy to follow and understand.

**Session 2** addressed practical strategies to tackle equity and disproportionality. Fifteen participants learned how to use behavioral health data to formulate precision statements and guide interventions, as well as analyze data from an equity perspective.

**Session 3** emphasized data-based problem-solving and team-based approaches. eight participants had training in the development and use of precision statements, creating and implementing action plans, and evaluating outcomes to adjust strategies accordingly.

By applying these techniques and insights, I can enhance my ability to use data effectively in my classroom, leading to more informed instructional strategies and better support for my students' learning journeys.

## Universal Screening PLC

To support universal behavioral health screening in schools and promote equity, the BIRCh Project facilitated another Universal Behavioral Health Screening PLC series in partnership with Walker Therapeutic and Educational Programs. This initiative is vital for developing and integrating comprehensive screening practices into school systems. During the 2023-2024 school year, the PLC series included three sessions with participants from various Massachusetts school districts, bringing diverse roles and perspectives. Many attendees were recipients of DESE’s SEL & Mental Health grant, and the PLCs were supported by DESE to enhance grant implementation efforts.

Session 1: Foundational Elements of Universal Screening	Session 2: Logistics of Screening Administration	Session 3: Ongoing Use of Screening Data and Continuous Improvement
24 participants	14 participants	12 participants
Participants emphasized the importance of approaching screening through an equity lens, establishing effective team structures, and exploring various screening methods. They also discussed how to choose screening tools that align with their district's objectives.	Participants reviewed data from the first session and learned strategies for engaging collaborators in screening efforts. They also focused on effectively using screening data to inform tiered interventions.	Participants reflected on their progress, set future goals, and discussed best practices for data use at various intervention levels. The session included strategies for developing comprehensive data policies, integrating multiple data sources, and creating effective data dashboards.

## Workforce Development: BIRCh Fellows Project

Our second cohort of 13 Fellows was named during the 2023-2024 school year. Seventy-five students from Massachusetts behavioral health graduate training programs applied.

Fellows identify with typically under-represented underrepresented populations in the behavioral health workforce around race, gender identity, sexual orientation, and disability status. They were master's and doctorate level students in school psychology, clinical psychology, counseling psychology, school counseling, and social work, from UMass Boston, UMass Amherst, Northeastern, Simmons, Merrimack, Tufts and Springfield universities.

Fellows receive living stipends, networking opportunities and assigned mentors. The program intends to broaden the pool of children's behavioral health providers in the Commonwealth by:

- Training and supervising a diverse workforce to support cross-system collaboration and enhance partnerships across school and community behavioral health agencies
- Fostering inclusive, anti-racist organizational climates that emphasize intersectionality and help underrepresented students receive mentoring from diverse mental health professionals.

94% of the Fellows and mentors completing the end-of-year survey indicated their interest in serving as a future program mentor. Verbatim feedback about the program cited:

- "Having my mentee come prepared with questions for our times together."
- "Reflection; shared identities; creating a safe space"
- "The interpersonal relationship. Tips on navigating academic school"
- "Communication and leadership qualities"

"Having a mentor who is also a School Psychologist was very helpful. My mentor could relate to the very specific aspects of my program and clinical work that other psychologists may not have had insight into."

"Being the first in my family to go to grad school, navigating the red tape of academia, bringing up challenges within my field practicum."

## Tier 3: Localized Approach for Demonstration Districts

In Years 1 and 2 of the SBBH TA Center's Western Massachusetts hub, two partner districts—West Springfield and Westfield—were chosen to develop a coaching model for enhancing behavioral health coordination within schools and with community agencies. These districts met the SBBH TA Center's readiness criteria for implementing a district-wide Interconnected Systems Framework, which included:

- Commitment to a multi-tiered system of support (MTSS) and measurement of social-emotional outcomes
- Designation of a district leader for these initiatives (e.g., SEL Director)

- Formation of a District Coordination Team with community partner representation
- Selection of demonstration schools willing to receive consultation on interconnected MTSS efforts.

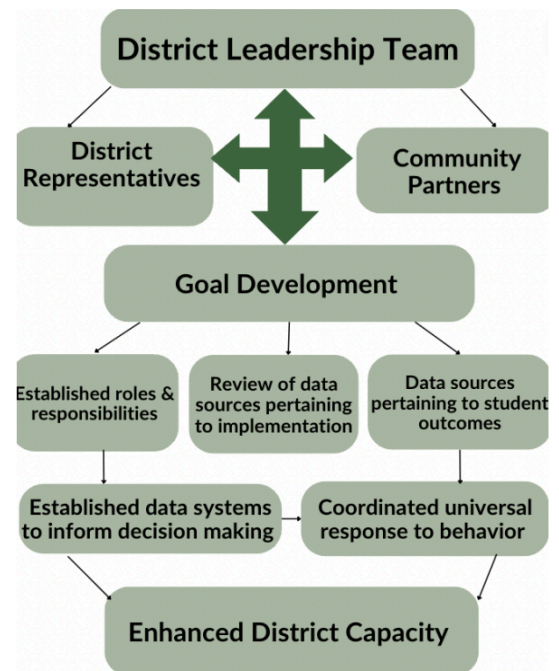
### Western Massachusetts Advisory Council

This regional advisory board for school-based behavioral health formed in April 2022. It meets quarterly with 30 representatives from 20 entities including agencies, educational collaboratives, and healthcare organizations. The board focuses on improving equitable access to school-based behavioral health services. Meetings cover statewide updates, regional partnerships, workforce development, and resources. In January 2024, they discussed school mental health planning, including legislation, funding, and resources.

### District Coordination Team

The District Coordination Team (DCT) is central to BIRCh’s consultation model, enhancing coordination and capacity for school-based behavioral health. Team members typically include district social workers, school counselors, adjustment counselors, principals, Board Certified Behavior Analysts (BCBAs), family engagement coordinators, special education administrators, and a health services administrator. Community partners (e.g., Center for Human Development, Behavioral Health Network) and local police are also invited. The Westfield DCT conducted an initial district needs assessment. The West Springfield DCT met quarterly and achieved the following tasks:

- **Completing and reviewing the District Systems Fidelity Inventory (DSFI)**, to identify strengths and gaps in coordinating MTSS and mental health efforts
- **Developing district goals**, based on DSFI data and a SBBH Center report
- **Clarifying the roles /responsibilities** of district behavioral health staff and community partners within a MTSS framework
- **Reviewing district data sources** (e.g., Tiered Fidelity Inventory, office referral data, school climate data) and uses related to social, emotional, and behavioral health, and group learning about the ISF
- **Building capacity for universal screening** via focus groups with teachers, students, and families; selecting of a tool, and a grade-level pilot of the screening process
- **Implementing data systems** to inform decision-making and coordinating universal responses to behavior
- **Developing a roadmap** for tiered models/integrated community partnerships to strengthen overall district capacity



## Next Steps and Scale Up for 2024-2025

The BIRCh Project will become the BIRCh Center in November 2024. We will continue integrating state, regional, and local structures to enhance understanding and integration of behavioral health services across domains. Our key goals include:

- Developing partnerships between Community Behavioral Health Centers and school districts in Western and Central MA regions, aligning with the New Behavioral Health Roadmap (Executive Office of Health and Human Services, 2021).
- Centering equity and elevate youth and family voice across TA Center Tiers
- Continuing to develop and implement Tier 1 and Tier 2 professional development and coaching, and connecting with districts across the state.
- Implementing a regionalized approach to TA in Tier 3, including an annual convening of school districts and community agency partners
- Advancing training on available state and federal funding opportunities via grants and Medicaid reimbursement programs
- Building and increasing our own communication structures including a new website, greater social media presence, and efficient dissemination of best practices
- Recruiting staff members from diverse backgrounds to leadership
- Developing a crosswalk of needs assessment tools
- Creating a school district mental health roadmap to guide the design and implementation of comprehensive behavioral health systems across school buildings.
- Maintaining partnerships with existing demonstration districts, supporting their leadership teams, evaluation efforts, and school-based consultation.
- Recruiting 1-2 additional Western MA districts ready for coordinated behavioral health efforts and MTSS.
- Identifying a demonstration district in Central Massachusetts to expand service delivery.
- Supporting CBHC and school district partnerships in Western and Central MA.

### Resources to learn more:

[District Systems Fidelity Inventory](#)  
[Interconnected Systems Framework Implementation](#)  
[DESE's Educational Vision and Catalog of Aligned Supports](#)  
[SHAPE system](#)

# The BIRCh Project

The BIRCh Project advances equitable interconnected behavioral health systems that support children and their caregivers in Massachusetts by **building school districts' capacities** for implementation of *integrated behavioral health, fostering community partnerships, providing pre-service training and professional development, and advancing best practices through translational research.*

More information is available at [birchproject.org](http://birchproject.org) or contact us at [birch.project@umb.edu](mailto:birch.project@umb.edu).



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