School Health Services
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an initiative of the School-Based Health Alliance and the Center for School Mental Health

SCHOOL·BASED HEALTH ALLIANCE
Redefining Health for Kids and Teens

CSMH
Center for School Mental Health

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IMPROVE YOUR SCHOOL MENTAL HEALTH QUALITY AND SUSTAINABILITY!
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School Mental Health Sustainability Assessment Tool
For Schools

INSTRUCTIONS: The School Mental Health Team Leader should complete this assessment tool, answering questions about the status of the Comprehensive School Mental Health System (CSMHS)**. CSMHS are defined as school district-community partnerships that provide a continuum of mental health services to support students, families and the school community.

School "Sustainability" refers to the financial and non-financial dimensions of maintaining or supporting the system over time, in which its operational structure and capacity is sound and can evolve and adapt to match the changing needs of students, families, schools, communities, and other systems in their context.

** "School" refers to your school-level comprehensive school mental health system (or school CSMHS), including all school-employed, community-employed, and other partners and stakeholders, including youth and families, who comprise your team.

This School Mental Health Sustainability Assessment Tool is designed for your school to self-assess your system's sustainability. The team-based process of completing this Sustainability Assessment Tool is also intended to facilitate your team's communication about various aspects of school mental health sustainability and establish a common language about how sustainability improvements are pursued in your school.

We strongly recommend that the completion of this survey be done as a team process. To ensure all contributors are reflected in the report generated from this survey, please list names and roles of all contributing team members below (optional).

PRINT this assessment to see all areas you will be asked to provide data on and determine whether you need to collect any further information from your team before proceeding.

Name	Role

SUSTAINABILITY INDICATORS

TIME FRAME: Please complete these questions for LAST SCHOOL YEAR.
(This includes all activities conducted between July 1 through June 30 of the previous year. For instance, if today's date is between July 1, 2015 through June 30, 2016, your reporting period is July 1, 2014 through June 30, 2015. Your first assessment should always report on the last school year.)

The date range for the LAST SCHOOL YEAR WILL AUTOMATICALLY SHOW UP ON YOUR REPORT unless you want to report on a different time period. **If you're reporting on a period other than the last school year (i.e., because this is not your first assessment) please enter the time period's start and end dates below.**

1. Report period **start** date if different than last school year (format: 1/14/2016):_____
2. Report period **end** date if different than last school year (format: 4/14/2016): _____

Funding and Resources assessed in this section refer to strategies in place to leverage and apply various financial and non-financial assets in your school.

3. To what extent did your school use **multiple and diverse** funding and resources to support a full continuum of school mental health services and supports?

   Best practices related to multiple and diverse funding and resources to support a full continuum of school mental health services and supports include:
   - *Use of multiple and diverse funding sources considering school, local, district, state and federal levels, education, physical, mental, and public health, substance use, and/or private foundation dollars*
   - *Complementary funding strategies*
   - *Funding that fully supports a continuum of services and supports*
   - *A process to regularly evaluate and update financing plan*
   - *A process to regularly monitor new funding opportunities and local, state and federal policies that may impact funding for comprehensive school mental health systems*

   1 = Not in place: Our school did not use best practices related to multiple and diverse funding and resources to support a full continuum of school mental health services and supports.
   2 = Our school *rarely* used best practices related to multiple and diverse funding and resources.
   3 = Our school *sometimes* used best practices related to multiple and diverse funding and resources.
   4 = Our school *often* used best practices related to multiple and diverse funding and resources.
   5 = Our school *almost always* used best practices related to multiple and diverse funding and resources.
   6 = Fully in place: Our school *always* used best practices related to multiple and diverse funding and resources to support a full continuum of school mental health services and supports.

4. To what extent did your school **leverage** funding and resources to attract potential contributors? An example of leveraging would be, having a Memorandum of Understanding that indicates if the local Department of Education agrees to commit funds and the local Department of Health will provide professional development.

   Best practices in leveraging funding and resources to attract potential contributors include:
   - *Formal agreement that specifies contingent funding/resources*
   - *Evaluation of existing funding opportunities*
   - *Process to consistently evaluate contingent funding/resources and opportunities for additional partnerships and agreements*
   - *Process/priority to foster relationships with other agencies or professionals to create more opportunities to leverage funding*

   1 = Not in place: Our school did not use best practices to leverage funding and resources.
   2 = Our school *rarely* used best practices to leverage funding and resources.
   3 = Our school *sometimes* used best practices to leverage funding and resources.
   4 = Our school *often* used best practices to leverage funding and resources.
   5 = Our school *almost always* used best practices to leverage funding and resources.
   6 = Fully in place: Our school *always* used best practices to leverage funding and resources.

5. To what extent did your school have **funding and resources to support services at each tier (Tier 1 mental health promotion, Tier 2 selective prevention, Tier 3 indicated intervention**)? For example, did you have *prevention funds* to fully support prevention, and *intervention funds* to fully support intervention services?

N/A = Our school did not have funding and resources to support services at any tier.
1 = Not in place: Dedicated funding was available for only one tier of support, but funding levels were inadequate.
2 = Adequate, dedicated funding was available for only one tier of support.
3 = Dedicated funding was available for two tiers of support, but funding levels were inadequate for one or both tiers.
4 = Adequate, dedicated funding was available for two tiers of support.
5 = Dedicated funding was available for three tiers of support, but funding levels were inadequate for one or more tiers.
6 = Fully in place: Adequate, dedicated funding was available for all three tiers of support.

6. To what extent did your school have **strategies in place to retain staff**?

Best practices strategies to retain staff include:
- *In-person and virtual ongoing professional development activities such as lectures, didactic presentations and peer consultation.*
- *Recognition of accomplishments (e.g., monthly awards, thank you cards, sharing success stories with others)*
- *Recognition/celebration of personal milestones (e.g., birth of a child), birthdays, etc.*
- *Open communication*
- *Flexible work schedule*
- *Staff wellness activities (e.g., staff yoga)*
- *Opportunities for career advancement*
- *Incentive-based pay*
- *New-hire mentor or buddy program*

1 = Not in place: Our school did not use best practices in staff retention.
2 = Our school *rarely* used best practices in staff retention.
3 = Our school *sometimes* used best practices in staff retention.
4 = Our school *often* used best practices in staff retention.
5 = Our school *almost always* used best practices in staff retention.
6 = Fully in place: Our school *always* used best practices in staff retention.

Resource Utilization refers to the extent to which your school is actively accessing and maximizing the financial and non-financial assets available or potentially available to your system.

1. To what extent did your school's system **maximize the expertise and resources of all stakeholder groups** (including school and community employed staff, youth and families) **to support ongoing professional development activities**?

   Best practices to maximize expertise and resources of all stakeholder groups include:
   - *Process to poll school staff members (teachers, nurses, school social worker/psychologist, guidance counselors, behavioral specialists, SST team members, administrators), community providers and students, family members and caregivers about expertise about relevant mental health-related domains*
   - *Offer professional development activities that use the diverse knowledge and skills of all stakeholder groups*
   - *Use of diverse professional development mechanisms including in-person and virtual lectures, presentations, consultation, coaching, mentoring and written resources*

   Examples *of maximization of the expertise and resources of diverse stakeholder groups* include:
   - Community mental health providers training teachers on identification of mental health problems
   - School psychologists training community mental health providers on school language and policy
   - Training school and community employed mental health providers on the same topics, at the same time (such as evidence-based services or supports, policies or procedures related to Individualized Education Programs, etc.)
   - Engaging youth and family leaders and advocates in professional development as trainers and learners

   1 = Not in place: Our school did not use best practices to maximize the expertise and resources of all stakeholder groups.
   2 = Our school *rarely* used best practices to maximize the expertise and resources of all stakeholder groups.
   3 = Our school *sometimes* used best practices to maximize the expertise and resources of all stakeholder groups.
   4 = Our school *often* used best practices to maximize the expertise and resources of all stakeholder groups.
   5 = Our school *almost always* used best practices to maximize the expertise and resources of all stakeholder groups.
   6 = Fully in place: Our school *always* used best practices to maximize the expertise and resources of all stakeholder groups.

2. To what extent did your school's system **maintain and have access to a regularly updated mapping or listing of relevant school and community resources,** including information about quality and how to access?

Best practices related to mapping or listing of relevant school and community resources include:
- *Maintenance or access to a comprehensive, regularly updated list of school and community resources including:*
    - *Outpatient services*
    - *Inpatient services*
    - *Day hospital programs*
    - *Support groups*
    - *Mental health training resources*
    - *Career development*
    - *Youth and family advocacy services*
    - *Peer-to-peer support services*
    - *Housing*
    - *Food*
    - *Transportation*
- *A process that allows for input from diverse stakeholders as to the quality and satisfaction with resources that is integrated into and readily accessible as part of the resource directory/mapping*
- *A format/mechanism that allows for easy access to the resource directory/mapping for all stakeholder groups*

1 = Not in place: Our school did not use best practices to maintain or have access to relevant school and community resources.

2 = Our school *rarely* used best practices to maintain or have access to relevant school and community resources.

3 = Our school *sometimes* used best practices to maintain or have access to relevant school and community resources.

4 = Our school *often* used best practices to maintain or have access to relevant school and community resources.

5 = Our school *almost always* used best practices to maintain or have access to relevant school and community resources.

6 = Fully in place: Our school *always* used best practices to maintain or have access to relevant school and community resources.

3. To what extent did your school **monitor federal, state and local policies that impact school mental health funding** (e.g., Affordable Care Act, Free Care Rule) and new funding opportunities on a regular basis?

    Best practices to monitor policies that impact school mental health funding include:
    - *Monitor legislation and grants that might impact funding related to mental health promotion, prevention, and intervention*
        - *Develop a list of websites, newspapers, and listservs that identify and describe relevant legislation and grants*
        - *Assign school members to monitor these sources and develop a system to document and report on their findings*
    - *Seek guidance and updated information about policies that impact school mental health funding from other schools in your state and nationally*

    1 = Not in place: Our school did not use best practices to monitor policies that impact funding.
    2 = Our school *rarely* used best practices to monitor policies that impact funding.
    3 = Our school *sometimes* used best practices to monitor policies that impact funding.
    4 = Our school *often* used best practices to monitor policies that impact funding.
    5 = Our school *almost always* used best practices to monitor policies that impact funding.
    6 = Fully in place: Our school *always* used best practices to monitor policies that impact funding.

4. Did your school bill health insurers or other third parties (e.g., Medicaid,Managed Care Organization) to support your CSMHS?
    - ☐ Yes
    - ☐ No

If Yes – go to next <u>question</u>; If No – skip to next <u>section</u> (System Quality)

1. To what extent did your school **maximize opportunities to bill** for eligible services, (under federal/state regulations)?

   1 = Not in place: Our school did not bill for any eligible services.
   2 = Our school billed for approximately 1-25% of eligible services.
   3 = Our school billed for approximately 26-50% of eligible services.
   4 = Our school billed for approximately 51-75% of eligible services.
   5 = Our school billed for approximately 76-99% of eligible services.
   6 = Fully in place: Our school billed for all eligible services.

2. If only billing for Tier 3 indicated intervention, to what extent did your school **provide a full continuum of care, i**ncluding Tier 1 mental health promotion and and Tier 2 selective prevention?

   N/A = Our school did not only bill for Tier 3 indicated intervention (i.e., we bill for other tiers of service).
   1 = Not in place: Our school did not provide Tier 1 mental health promotion or Tier 2 selective prevention.
   2 = Our school *rarely* provided Tier 1 mental health promotion and/or Tier 2 selective prevention.
   3 = Our school *sometimes* provided Tier 1 mental health promotion and/or Tier 2 selective prevention.
   4 = Our school *often* provided Tier 1 mental health promotion and/or Tier 2 selective prevention.
   5 = Our school *almost always* provided Tier 1 mental health promotion and/or Tier 2 selective prevention.
   6 = Fully in place: Our school *always* provided Tier 1 mental health promotion and/or Tier 2 selective prevention.

System Quality

The quality or standard of services and supports provided to students and families is highly important to system sustainability. Fundamental aspects of quality including use of evidence-based services and supports, regular use of data for decision making and youth and family partnership are included in this section.

1. To what extent did your school **use evidence-based services and supports practices (as recognized in national registries)**? *Evidence-based services and supports are programs, services or supports that are based directly on scientific evidence and have been evaluated in large scale studies and have been shown to reduce symptoms and/or improve functioning. For instance, evidence-based services and supports are recognized in national evidence-based registries such as Substance Abuse Mental Health Services Administration (SAMHSA), National Registry of Evidence-based Programs and Practices (NREPP), Blueprints for Healthy Youth Development, and Institute of Education Sciences (IES) What Works Clearinghouse.*

   1 = Not in place: Our school's services and supports were not supported by research (e.g. we develop them internally without consideration for evidence).
   2 = 1-25% of our services and supports were evidenced-based.
   3 = 26-50% of our services and supports were evidenced-based.
   4 = 51-75% of our services and supports were evidenced-based.
   5 = 76-99% of our services and supports were evidenced-based.
   6 = Fully in place: All of our services and supports were evidence-based programs recognized in national registries.

2. To what extent were your school **use best practices to inform ongoing data-based decision making** about development, quality improvement, and sustainability? Data may include systematically-collected, quantitative or qualitative information from any students, families, teachers, other school staff, the school system, community partners or district.

   Best practices to inform ongoing school data-based decision making include:
   - *Use of data to determine mental health services needed by students*
   - *Use of a system for monitoring individual student progress*
   - *Use of a system for aggregating student mental health service and support data to share with stakeholders and make decisions about mental health service planning and implementation*
   - *Use of a system for disaggregating student mental health service data to examine school mental health system level outcomes based on subpopulation characteristics*

   1 = Not in place: Our school did not use best practices to inform ongoing data-based decision making.
   2 = Our school teams *rarely* used best practices to inform ongoing data-based decision making.
   3 = Our school teams *sometimes* used best practices to inform ongoing data-based decision making.
   4 = Our school teams *often* used best practices to inform ongoing data-based decision making.
   5 = Our school teams *almost always* used best practices to inform ongoing data-based decision making.
   6 = Fully in place: Our school teams *always* used best practices to inform ongoing data-based decision making.

3. To what extent were your school use best practices to **meaningfully involve youth and families in partnership with school and community partners** in designing, implementing, evaluating and sustaining school mental health services and supports?

   Best practices to meaningfully involve youth and families include:
   - *Involve school youth and families in all aspects of prevention, intervention, and health promotion design, implementation and evaluation; youth and families can provide insight on school strengths and areas of need, program selection, implementation considerations and on-going quality assessment and progress monitoring*
   - *Involve multiple youth and families on stakeholder teams; provide guidance and foundational information prior to each meeting so that they can have a meaningful role*
   - *Gather additional information from youth and families using surveys, interviews and focus groups*
   - *Investigate existing family mental health advocacy and navigation organizations in your community*
   - *Use family organizations to bring knowledge and passion based on practical, real-life experiences and expertise to support providers and other youth and families within the system*

   1 = Not in place: Our school did not use best practices to meaningfully engage youth and families in designing, implementing, evaluating, and sustaining school mental health services and supports.
   2 = Our school *rarely* used best practices to meaningfully engage youth and families.
   3 = Our school *sometimes* used best practices to meaningfully engage youth and families.
   4 = Our school *often* used best practices to meaningfully engage youth and families.
   5 = Our school *almost always* used best practices to meaningfully engage youth and families.
   6 = Fully in place: Our school *always* used best practices to meaningfully engage youth and families in designing, implementing, evaluating, and sustaining our school mental health services and supports.

Documentation and Reporting of Impact

It is critical to document and report on the impact of your system to a wide range of stakeholders who play a role in your system's sustainability. These activities can also support your advocacy for the system's maintenance, growth and change in many ways over time.

1. To what extent did your school use best practices to **document the impact of your CSMHS's effectiveness** on **educational/academic outcomes**?

   Best practices to document the impact of CSMHS effectiveness on educational/academic outcomes include:
   - *Identification of existing educational/academic outcomes within your school such as grades, attendance, office referrals/suspensions/expulsions, performance test scores and achievement or benchmark test scores*
   - *Use of these data to document program impact*
   - *If implementing new data collection, engage stakeholder groups to identify data that is useful for ongoing progress monitoring, in addition to program effectiveness*
   - *A process for data collection and aggregation*
   - *Use of electronic tracking for ease of collection, analysis and dissemination*

   1 = Not in place: Our school did not use best practices to document the impact of CSMHS effectiveness on educational/academic outcomes.
   2 = Our school *rarely* used best practices to document the impact of CSMHS effectiveness on educational/academic outcomes.
   3 = Our school *sometimes* used best practices to document the impact of CSMHS effectiveness on educational/academic outcomes.
   4 = Our school *often* used best practices to document the impact of CSMHS effectiveness on educational/academic outcomes.
   5 = Our school *almost always* used best practices to document the impact of CSMHS effectiveness on educational/academic outcomes.
   6 = Fully in place: Our school *always* used best practice to document the impact of CSMHS effectiveness on educational/academic outcomes.

2. To what extent did your school use best practices to **document the impact of your CSMHS's effectiveness** on **emotional/behavioral outcomes**?

   Best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes include:
   - *Identification of existing emotional/behavioral outcomes within your school such as emotional/behavioral health screenings and assessments, behavioral observations, crisis incidents and school climate data*
   - *Use of these data to document program impact*
   - *If implementing new data collection, engage stakeholder groups to identify data that is useful for ongoing progress monitoring, in addition to program effectiveness*
   - *A process for data collection and aggregation*
   - *Use of electronic tracking for ease of collection, analysis and dissemination*

   1 = Not in place: Our school did not use best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.
   2 = Our school *rarely* used best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.
   3 = Our school *sometimes* used best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.
   4 = Our school *often* used best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.
   5 = Our school *almost always* used best practices to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.
   6 = Fully in place: Our school *always* used best practice to document the impact of CSMHS effectiveness on emotional/behavioral outcomes.

3. To what extent did your school use best practices to **document the impact of your CSMHS's effectiveness** on **sustainability factors** (e.g., shared system values, cross-system collaboration, public policy impact, return on investment, quality improvements made each year)?

Best practices to document the impact of CSMHS effectiveness on sustainability factors include:
- *Identification of sustainability factors within your school such as innovative shared system values, cross-system collaboration, public policy impact, return on investment or other economic benefits of your school, system quality improvement made each year such as additional service provision, use of evidence-based supports and services and stakeholder satisfaction*
- *Use of these data to document program impact*
- *A process for data collection and aggregation*
- *Use of electronic tracking for ease of collection, analysis and dissemination*

1 = Not in place: Our school did not use best practices to document the impact of CSMHS effectiveness on sustainability factors.
2 = Our school *rarely* used best practices to document the impact of CSMHS effectiveness on sustainability factors.
3 = Our school *sometimes* used best practices to document the impact of CSMHS effectiveness on sustainability factors.
4 = Our school *often* used best practices to document the impact of CSMHS effectiveness on sustainability factors.
5 = Our school *almost always* used best practices to document the impact of CSMHS effectiveness on sustainability factors.
6 = Fully in place: Our school *always* used best practice to document the impact of CSMHS effectiveness on sustainability factors.

4. To what extent did your school use best practices to **report the impact of your CSMHS** on **educational/academic and emotional/behavioral outcomes and sustainability factors** to key stakeholders (e.g., youth, families, school and community partners, existing or potential funders)?

Best practices to report the impact of your school on diverse outcomes to key stakeholders include:
- *Develop quarterly or semi-annual mechanisms such as reports or meetings to share school effectiveness data with funders.*
- *Share school effectiveness data with youth and families to promote communication and collaboration. Present data in useful and user-friendly terms*
- *Share school effectiveness data with stakeholders who were integral in compiling data*
- *Prepare a short "elevator" speech that highlights key school program impact to have readily available to share verbally or in writing with any and all stakeholders*

1 = Not in place: Our school did not use best practices to report impact on diverse outcomes to key stakeholders.
2 = Our school *rarely* used best practices to report impact on diverse outcomes to key stakeholders.
3 = Our school *sometimes* used best practices to report impact on diverse outcomes to key stakeholders.
4 = Our school *often* used best practices to report impact on diverse outcomes to key stakeholders.
5 = Our school *almost always* used best practices to report impact on diverse outcomes to key stakeholders.
6 = Fully in place: Our school *always* used best practices to report impact on diverse outcomes to key stakeholders.

It is critical to actively market and promote your school's system to a wide range of stakeholders who play a role in your system's sustainability.

1. To what extent did your school use best practices to **disseminate findings to the larger community** (e.g., contributing or disseminating data to social marketing campaigns, policy maker forums, and/or the business community)?

   Best practices to contribute and disseminate findings to the larger community include:
   - *Present findings at conferences and other meetings where individuals and groups that are invested in children's mental health and education may be present; use this as an opportunity to present your findings, but also to connect with other presenters and attendees who may be potential collaborators or funders in the future*
   - *Develop a social marketing campaign; this may include creating published (e.g., fliers) or online (e.g., website) access to your evaluation findings, having a listserv that interested individuals can sign-up for and findings can be disseminated at regular intervals, and establishing a social media presence on forums such as Facebook and Twitter where system updates and evaluation findings can be posted and discussions can be generated*
   - *Use news media outlets, including writing press releases for newspapers, relevant magazines, and online sources, as a dissemination tool for system findings*
   - *Create public service announcements (e.g., radio, TV, internet) that focus on the goals of your school and also provide information about your systems and outcomes*
   - *Prepare a short "elevator" speech that highlights key school features and system impact to have readily available to share verbally or in writing with any and all stakeholders*

   1 = Not in place: Our school did not use best practices to disseminate findings to the larger community.
   2 = Our school *rarely* used best practices to disseminate findings to the larger community.
   3 = Our school *sometimes* used best practices to disseminate findings to the larger community.
   4 = Our school *often* used best practices to disseminate findings to the larger community.
   5 = Our school *almost always* used best practices to disseminate findings to the larger community.
   6 = Fully in place: Our school *always* used best practices disseminate findings to the larger community.

2. To what extent did your school implement best practices to **broadly market and/or promote** your CSMHS to district leadership?

   Best practices to broadly market and promote your CSMHS to district leadership include:
   - *Develop a school marketing and promotion team*
   - *Develop a school strategic marketing and promotion plan*
   - *Link school outcome and impact data to marketing and promotion efforts*
   - *Target marketing and promotion for school leadership such as Superintendent, Board of Education, school board, Director of Special Education, Director of Family Support Programs*
   - *Attend and actively engage in school board meetings; consider giving a formal presentation or brief overview of your system and its importance*
   - *Become a member of existing teams within the school that are relevant to school mental health; discuss your system and its importance with the team members*
   - *Use social media to market your system and its impact to students, parents/families, teachers, and school personnel; this may include Facebook and Twitter accounts, as well as columns/blurbs in the school or district newsletter*
   - *Create visually pleasing and easy-to-digest pamphlets on your system that can be disseminated at school or district meetings and events*
   - *Ask the school or district if you can have a presence on the school or district website; this may include a webpage with information about your system and links to helpful resources*
   - *Become involved with school and district fundraisers and other events where you can develop relationships with school leadership, promote your system and services, and help the school and district to raise funds*

   1 = Not in place: Our school did not use best practices to broadly market and promote our CSMHS to district leadership.
   2 = Our school *rarely* used best practices to broadly market and promote our CSMHS to district leadership.
   3 = Our school *sometimes* used best practices to broadly market and promote our CSMHS to district leadership.
   4 = Our school *often* used best practices to broadly market and promote our CSMHS to district leadership.
   5 = Our school *almost always* used best practices to broadly market and promote our CSMHS to district leadership.
   6 = Fully in place: Our school *always* used best practices to broadly market and promote our CSMHS to district leadership.

3. To what extent did your school implement best practices to **broadly market and/or promote** your CSMHS to non-education community partners, state agencies, local and statewide representatives, etc.?

Best practices to broadly market and promote your CSMHS to non-education community partners include:
- *Develop a school marketing and promotion team*
- *Develop a school strategic marketing and promotion plan*
- *Link school outcome and impact data to marketing and promotion efforts*
- *Attend, present at, and actively engage in conferences and seminars that focus on school mental health and education, or other related fields (e.g., medical, child welfare, juvenile justice) where you may be able to network and promote your system to future collaborators and funders*
- *Attend meetings, talks, and events for business and agencies with whom you hope to promote your system*
- *Become a member of local and regional groups with a shared mission where you can promote your system and build collaborative relationships*
- *Disseminate pamphlets with information about your system, its benefits to the broader community, and to businesses and agencies in the community*
- *Have a presence at local and state meetings, including community town halls; you may want to present about your system at some of these meetings*
- *Plan and implement fundraisers, which can serve a dual purpose of raising funds for your system while also serving as a promotion and marketing tool; you may want to partner with other agencies or businesses to further establish collaborative relationships in the community*
- *Use social media to market your system and its impact to the broader non-education community; this may include Facebook and Twitter accounts, as well as a presence on LinkedIn and other business networking sites*

1 = Not in place: Our school did not use best practices to broadly market and promote our CSMHS to non-education community partners.
2 = Our school *rarely* used best practices to broadly market and promote our CSMHS to non-education community partners.
3 = Our school *sometimes* used best practices to broadly market and promote our CSMHS to non-education community partners.
4 = Our school *often* used best practices to broadly market and promote our CSMHS to non-education community partners.
5 = Our school *almost always* used best practices to broadly market and promote our CSMHS to non-education community partners.
6 = Fully in place: Our school *always* used best practices to broadly market and promote our CSMHS to non-education community partners.

Thank you for completing the Sustainability Self-Assessment!

Standardized performance measurement is very new to the field of behavioral health, particularly school mental health. We would like to follow-up with some schools about their responses to understand how these indicators are working. May we contact you with follow-up questions about your answers to this self-assessment?

If yes, what is your preferred method of contact?
Phone: _____
Email: _____