Mental Health Considerations & Guidance to Referral Process for Schools in Arizona

What does this document provide?

This document provides step-by-step instructions for educators that have already identified a student that needs mental health support from a community-based provider. This document will discuss how an educator will connect students and their caregivers to services, how those services might be funded, and how to proceed with the referral. In the past, educators might have been nervous to connect with outside providers because of their lack of knowledge of rules and regulations, challenges in obtaining services for students, and concerns about payment. Some examples of common mental health services include:

- Psychological evaluations
- Individual or family therapy/counseling
- Behavioral therapy
- Group therapy (anger management, social skills, grief)
- Psychiatric services

We hope this document will provide guidance and insight to educators trying to navigate care pathways for students in need. This document, however, is not considered, nor a substitute for proper legal advice.

What is a mental health referral and why do they matter?

Mental health referrals from school sites are one access pathway that connects the education system to the healthcare system. A mental health referral is best understood as a formal process in which professionals, in partnership with parents/caregivers, connect students to specific behavioral health services and/or related support services. Consider it similar to an airplane boarding pass that contains all the necessary information a gate agent needs to know before you board. In Arizona, mental health referrals that comes from a school to a community mental health provider should succinctly communicate an important series of information:

- Must obtain active parent consent for services
- Student demographic and contact information for the student and their caregivers; language spoken in the home
- Why the schools believe the mental health referral will help the student and/or their caregivers
- Name of school sending the referral and the name of district sending the referral

Note: As of the current publication of this document, most community-based mental health providers require schools to use a referral form that was designed specifically for their agency and electronic health record system. See below for specific regional contacts.

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Not all referrals made in school settings for mental health services go to a community-based agency or provider; some schools have the capacity to provide needed services through school-employed social workers, school counselors or school psychologists.

**When** might educators consider a mental health referral to an outside provider?

Educators might consider a connection with outside mental health support for several reasons. Mental health, like physical health, exists across a spectrum that ranges from wellness to illness to acute crisis. Fluctuations along this continuum can be part of normative youth development. Many educators in Arizona are trained to identify [students that are experiencing distress or challenges](https://www.azed.gov/wellness/projectaware) that exceed typical development and/or are so serious in presentation that may benefit from additional professional attention. Referral to mental health services might be beneficial for a student/family due to: grief/trauma; self-harm; depression/anxiety/ADHD; juvenile or DCS involvement; family conflict; behavioral difficulties; and/or continuous academic challenges.

Educators can access training or additional information on how to identify students in need of an outside provider mental health referral on the Arizona Department of Education website at [https://www.azed.gov/wellness/projectaware](https://www.azed.gov/wellness/projectaware).

**Who** might also refer students to community mental health services?

- School administrators
- School psychologist, counselors, or social workers
- Teachers, librarians, coaches,
- Nurses, health room aides

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<tbody>
<tr>
<td>Southern Arizona</td>
<td>Arizona Complete Health – Complete Care Plan</td>
<td>Elizabeth Barry <a href="mailto:Ebarry@azcompletehealth.com">Ebarry@azcompletehealth.com</a></td>
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<tr>
<td></td>
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<td>Office: 1.888.788.4408 ext 84531. Direct: 520.809.6531. Mobile 520.528.0952</td>
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<td><a href="https://www.mercycareaz.org/wellness/bhschools">https://www.mercycareaz.org/wellness/bhschools</a> <a href="mailto:Grants@mercycareaz.org">Grants@mercycareaz.org</a> (preferred) or 480.825.3311</td>
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<tr>
<td>Northern Arizona</td>
<td>Health Choice of Arizona</td>
<td>Sarah Hester <a href="mailto:sarah.hestern@healthchoiceaz.com">sarah.hestern@healthchoiceaz.com</a> Mobile 913-206-5911</td>
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What are funding options for families?

A school partnership with an Arizona Health Care Cost Containment System (AHCCCS) contracted mental/behavioral health agency or provider should never require a direct financial commitment. It is not the schools’ responsibility to determine the insurance eligibility for a particular student. In Arizona, students can receive funding for behavioral health services through a variety of options and can work directly with local providers to combine a variety of funding streams, regardless of their ability to pay. This is true even if a student or family has not traditionally qualified for such funding. The following are options that might be available to students and families:

- Private insurance
- Block grant funding
- Sliding scales payment fees
- Private community-based assistance counseling might be available through particular local agencies
- Medicaid benefits
- Tribal health insurance
- State appropriation funds

AHCCCS allows all students eligible for Medicaid to receive behavioral health services within the school settings at no cost.

Those students not currently eligible for Medicaid, uninsured, or underinsured, can receive these services at no cost through the Community Mental Health Block Grant (MHBG) allocated to Title XIX/XXI funding or through the Children’s Behavioral Health Services Fund.

More information can be found below:

https://www.azahcccs.gov/AHCCCS/Initiatives/BehavioralHealthServices/

How can your school become eligible to access these funds for your students and families?

- Develop and post mental health referral policy on the district website. The Children’s Behavioral Health Services Fund (CBHSF) does not specify what must be contained within the policy. However, an Arizona Model Policy was developed by a cross sector group with recommendations for school leaders. The statute does not mandate any requirements on what that policy must contain. Schools, however, can reference the Behavioral Health Resource Guide.

- It is important to remember that the state of Arizona is divided into three geographic regions (Northern, Central, Southern), this determines where the referrals go. The following link contains further information regarding this.
Any school who wishes to make a referral for a student to be served under The Children Behavioral Health Service Fund must provide students’ families with the opportunity to consent to the referral being made. It is further required that students who have received a referral for mental health services be offered the opportunity to participate in a survey related to the referral process, and experience with the services received. This will be administered by the community service provider.

**Example/Guidance to the Referral Process**

**Referral flow process**

1. **Determine referral**

   *If possible, confer with your school mental-health professional, including a licensed school mental health staff (licensed counselor, school psychologist and/or licensed clinical social worker) to ensure that a referral is appropriate and to discuss the most relevant reason for a referral. Schools, however, do not need to determine eligibility and/or student’s health status. See above for regional contacts for assistance.*

   **A. Gather the following information:**
   
   a. Name of student, birthdate, and caregiver contact information
   b. Special Education status and/or in progress Disability Determinations
   c. Summary of any known information regarding student’s needs

   **B. Use the above information to consider what behavioral health services are appropriate.**
   
   a. Are clinical mental health services appropriate for this student? If so, what community-based provider agencies might be a good fit? If not, what school-based interventions are available to support the youth and their caregivers?
   b. What relationships has your school already established with outside community-based behavioral health services?
**Important! if a safety concern arises:**

When a student is identified by a school staff as having a potential safety concern (e.g., suicidal risk, self-harm, intoxication), the student needs to be seen by a school-employed mental health professional, such as a school psychologist, school counselor, school social worker, **within the same school day**, to assess risk and facilitate referral, if necessary. Educators should also be aware of written threats and expressions about suicide and death in school assignments. Such incidents require immediate referral to the appropriate school-employed mental health professional. If there is no mental health professional available, a designated staff member (e.g., school nurse or administrator) should address the situation according to district protocol until a mental health professional is brought in.

If an imminent safety concern arises, follow this link for crisis hotlines contact, [https://www.azahcccs.gov/BehavioralHealth/crisis.html](https://www.azahcccs.gov/BehavioralHealth/crisis.html)

2. **Obtain parental consent**

Gather consent to participate in the referral process from the parent or caregiver. Examples of model school referral policies and consent forms can be found here [https://www.azahcccs.gov/AHCCCS/Downloads/Initiatives/BehavioralHealthServices/100104-ADOE-SBRG.pdf](https://www.azahcccs.gov/AHCCCS/Downloads/Initiatives/BehavioralHealthServices/100104-ADOE-SBRG.pdf)

3. **After the referral process, schools are encouraged to:**

   a. Tracking overall feedback from families
   b. Follow up with family/caregiver to remind them about completing feedback surveys
   c. Evaluate intervention effectiveness

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