

SPOTLIGHT ON:**NEBRASKA
TITLE IV-A IMPLEMENTATION****TITLE IV-A USE OF FUNDS:****Using Licensed Mental Health Professionals to Support School Mental Health Programs**

In 2019, eight Nebraska school districts united their Title IV, Part A (Title IV-A) Student Support and Academic Enrichment Grant Program funds to create a consortium leveraging these dollars to deliver mental health services across the region. Through the consortium, these smaller public school districts can deliver services that would not have otherwise been possible using their independent funding allocations. Two part-time licensed mental health professionals (LMHPs) now support the mental and behavioral needs of students across all eight districts with direct therapeutic services and consultations such as facilitating individual or group therapy with students, training teachers, and connecting families to resources. This program marks the first time a mental health provider is available to work with students, teachers, and families within this consortium's districts.

After one year of implementation, participating districts and associated schools have reported increases in positive school climate survey measures as well as referrals for service.

Learn more about the Nebraska Department of Education school mental health efforts on its [Coordinated School Health](#) Web page.

PROGRAM IMPLEMENTATION TAKEAWAYS

To help replicate this innovative practice in other states, the Nebraska Department of Education and representatives from Educational Service Unit #13, who led the establishment of the consortium, have several lessons learned from their experience establishing and operating this consortium.



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SUGGESTED PRACTICE

Consider how to best allocate staff time across wide geographical service areas.

While the benefits of the consortium are evident, challenges arose with the broad geographical spread of the service area and how the limited LMHP staffing could meet the needs of students and families across the region. Program coordinators had to consider the logistical challenge of covering services for all eight districts and how to maximize the time of providers. The original consortium proposal included hiring one full-time LMHP; however, after reviewing the locations of the districts and the logistics of travel, the team realized that hiring two part-time providers would be more efficient and a more effective use of Title IV-A funding. One provider serves the northern tier of the state, and the other provider serves the southern tier.

SUGGESTED PRACTICE

Familiarize the providers with the school systems they serve.

Once the consortium began, the team faced the additional challenge of integrating the providers within the school systems so they become valued members of their school communities. To overcome this, program coordinators provided professional development to

help the LMHPs to integrate themselves into their schools as the program continues. The providers meet with coordinators weekly to discuss specific questions or cases. And LMHPs can ask questions relating to the schools they are working in and different approaches they can take to integrate better.

SUGGESTED PRACTICE

Consider how districts' individual contributions differed, if at all, and allocate provider time accordingly to ensure a sense of fair allocation of resources.

Most districts within the consortium contributed an equal amount of funding to the project; however, due to size and level of need, one district contributed a slightly larger amount. It was important to consider this when planning how to allocate provider services so each district felt as though it was receiving its proportionate amount.

The creation of a consortium and pooling of resources across school districts need not be limited to the topic of mental health supports but is a framework that might be used to deliver many aspects of Title IV-A support. Visit the [T4PA Center](#) for more information on Title IV-A and innovative practices implemented in states and localities throughout the United States.

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