



2017 Legislative Agenda

MSSWA LEGISLATIVE GOALS:

- *To promote the social, emotional and educational well-being of children and families*
- *To strengthen the profession of School Social Work*

The Minnesota School Social Workers Association (MSSWA) has been serving children in their schools, homes and communities for over 45 years. We are an association of licensed school social workers throughout Minnesota who work with students and their families to provide mental health related services and support within the school system. Although the roles and responsibilities of school social workers vary between districts statewide, we are united in our common goal of working with the “whole child”. MSSWA defines the “whole child” as working with the child in his/her environment with consideration to family, community, values, culture and language. We help teachers teach by reducing social and emotional barriers to learning by collaborating in the development of academic intervention plans to promote and ensure academic success. School Social Workers incorporate a systems approach to address the mental health needs of children and youth.

QUALIFICATIONS OF THE SCHOOL SOCIAL WORKER:

Social workers receive two different sets of credentials: degrees and licenses. Social work degrees are earned from accredited academic institutions. The bachelor level social worker is prepared for practice in mental health case management. The master level social worker has the training and skills to provide services beyond mental health case management through advanced clinical mental health practice. (SSWAA, 2013) School social workers at the master level receiving clinical supervision or holding clinical licensure are prepared through their education, practicum, clinical supervision and licensure to provide clinical mental health services in a school setting. Licensed clinical school social workers use their skills to address the mental health needs of students through evidence-informed assessment, diagnosis, intervention and evaluation of individuals, small groups, families and school-wide. (SSWAA, 2013). Minnesota school social workers are dual licensed by the Minnesota Board of Social Work and the Board of Teaching.

THE ROLE OF THE SCHOOL SOCIAL WORKER:

- School social workers not only provide services to individuals, groups of students and families but also collaborate and coordinate with community agencies or other professionals (*such as school-linked mental health professionals*) to provide the necessary resources to meet student needs.
- *Interventions provided through school social work services have shown improved student attendance, reduction of child abuse and neglect, improved graduation rates and early identification of a disability; thus increasing academic achievement.*
- School social workers address the social, emotional, physical and academic needs of **ALL STUDENTS** including students whose needs require special education support and services as well as students with in the general education setting.
- School social workers often focus on providing supports to vulnerable populations of students at high risk for truancy and dropping out of school, such as homelessness, students in foster placement, migrant children, students transitioning between school and treatment programs or the juvenile justice system, or students experiencing domestic violence. (SSWAA, 2013)
- *School social workers serve as a resource to administrators and other educators providing consultation and training on identifying students with mental health needs* and a referral process when services are sought.



MSSWA 2017 Legislative Priorities

1. Support to amend Educational Law Section 3525.1335 Other Health Disabilities Subpart 2A (2). Under current Minnesota statute defining the criteria to determine whether a pupil is eligible for Special Education Instruction and Services in the area of Other Health Disabilities, Subpart 2 Section A (2), it is written as follows: “*in the case of a diagnosis of attention –deficit hyperactivity disorder (ADHD), there is a written and signed diagnosis by a licensed physician, an advanced practice nurse or a licensed psychologist. The diagnosis of ADHD must include appropriate documentation using DSM criteria that items A through E have been met. DSM criteria documentation must be provided by a licensed physician, or a mental health or medical professional licensed to diagnose the condition.*” MSSWA recognizes that there is a discrepancy between Educational Statute and Minnesota State Statute regarding who is qualified to diagnosis ADHD. MSSWA supports the inclusion of Licensed Clinical Social Workers in a community mental health setting to the list above of mental health professionals licensed to diagnose the condition of ADHD in order to be in alignment with Minnesota Statute 245.462 Subdivision 18 which defines a “Mental Health Professional”.
2. **Support the incorporation of social emotional learning standards into required academic standards and curriculum throughout the school setting.** A substantial body of research provides evidence that when Social Emotional Learning Standards are incorporated into the curriculum, students show higher levels of pro-social behavior, more favorable attitudes towards school and others, increased academic achievement and are more prepared for college and career success. (Durlak, et. Al. 2011)
3. MSSWA supports the following recommendations from the Governor’s Task Force on Mental Health:
 - **Recommendation #1: Create a comprehensive mental health continuum of care.** The state should adopt a wide definition of the mental health continuum of care to include mental health promotion and prevention, early intervention, basic clinical treatment, inpatient and residential treatment, community supports, and crisis response services. The state should collaborate with partners and stakeholders to undertake systematic planning to improve availability and access to mental health services and mental health promotion activities in the continuum including an educational model of mental health.
 - **Recommendation #2: Strengthen governance of Minnesota’s mental health system.** MSSWA recommends while defining the governance scope to enable the mental health continuum of care, ensure that the local need of schools have highly qualified SISP, such as SSWs. This definition should include the expansion of school-based mental health services as well as school-linked partnerships in our schools to provide students with access to quality mental health interventions and supports.
 - **Recommendation #3: Use a cultural lens to reduce mental health disparities.** State agencies should convene a workgroup of people from American Indian tribes, communities of color, and other cultural backgrounds to detail strategies for improving mental health services and activities for communities experiencing mental health disparities. MSSWA recommends (1) *investing in trauma-informed practices in educational settings.* (2) *Expand school based mental health supports to cover the continuum of care.* The educational model of mental health acknowledges that cultural experiences may cause families to remain apprehensive of mental health interventions, whereas school support can induce a positive element that helps reduce fears and engages families to access mental health supports when needed.
 - **Recommendation #4: Develop Minnesota’s mental health workforce.** The Governor and Legislature should continue to support the development of Minnesota’s mental health workforce, including licensed school employed mental health professionals like school social workers.
 - **Recommendation #5: Achieve parity.** In general terms, “parity” is the concept that people should have access to mental health services under the same conditions that they have access to other healthcare services. MSSWA recommends *improving the availability and access to mental health services and activities in the mental health service delivery continuum.*
 - **Recommendation #6: Promote mental health and prevent mental illnesses.** Infrastructure and programs should be developed to fight stigma and build public understanding of mental health and wellbeing, strengthen community capacity to address system needs and gaps especially for vulnerable populations, and address adverse childhood experiences and trauma throughout the lifespan.
 - **Recommendation #7: Achieve housing stability.** Because housing stability is a critical factor in mental health, the Governor and Legislature should ensure that affordable housing is available to all individuals and families to ensure both the access to and the effectiveness of mental health care.
 - **Recommendation #8: Implement short-term improvements to acute care capacity and level-of-care transitions.** MSSWA recommends increasing intensive residential treatment services. Children, adolescents, and their families need access to a full range of options to address mental health crises. These services must provide the stabilization and supports necessary to improve functioning for children and adolescents in their home, school, and community.
 - **Recommendation #9: Implement short-term improvements to crisis response.** The Governor and Legislature should fund and assign responsibility for several short-term improvements to Minnesota’s system for responding to mental health crises. MSSWA recommends *strengthening connections between mobile crisis teams and external settings and providers.* Mobile crisis teams must engage in work with families and integrate outreach and collaboration with educational teams. SSWs are proficient and effective managing mental health crises in the educational setting.