



**AB 114: Educationally Related Mental Health Services (ERMHS) - Advocacy, Legal & Practical Perspectives: How School Psychologists May Be Best Positioned to Provide Mental Health Services for all Students at all Tiers**

**I. Introduction**

Researchers report that 75-80% of school-age children in need of mental health services do not receive them. Of those who do receive mental health services, 70-80% receive mental health services in school.<sup>1</sup> Schools are a natural access point for mental health services; school psychologists are mental health providers trained to support students, parents, and staff in the educational setting at all Tiered levels of support.

*Mental health services exist on a continuum and are increasingly provided within a Multi-Tiered System of Support.*

The California Department of Education is promoting Multi-Tiered System of Support (MTSS) as a model for outlining comprehensive school-based mental health services that are delivered within a range of layered services and supports that promote mental and behavioral wellness among all students.<sup>2</sup> The MTSS model is useful to promote mental wellness and to support students experiencing depression and anxiety,

emotional and behavioral disorders, trauma, loss and grief, family struggles, and stressors due to influences such as poverty and homelessness.<sup>3</sup>

The National Association of School Psychologist's (NASP) White Paper titled *School Psychologists: Qualified Health Professionals Providing Child and Adolescent Mental and Behavioral Health Services* states that each of the following mental and behavioral health services can be provided by school psychologists within an MTSS model for both general and special education students.

**Tier 1 (promotion of mental and behavioral wellness and prevention of mental and behavioral health problems):**

- Universal screening for academic, behavioral, and emotional barriers to learning
- Classroom lessons on resilience building skills
- Consultation with teachers to promote the infusion of social-emotional learning into classroom/curriculum
- Development and implementation of school-wide positive behavior interventions and supports with a focus on creating a positive school climate
- Data collection and evaluation of the effectiveness of school-wide social and emotional programs
- Consultation on effective discipline policies and practices, especially to ensure culturally responsive practices and avoid disproportionate application to specific populations
- Development of evidence-based bullying/violence prevention policies and practices
- Participation in crisis prevention and intervention teams
- Staff development related to mental health problems

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<sup>1</sup> White Paper-School Psychologists: Qualified Health Professionals Providing Child and Adolescent Mental and Behavioral Health Services, NASP.

<sup>2</sup> California Department of Education. (2018). A Guide to Increase Mental Health Services for Students.

<sup>3</sup> California Department of Education. (2018). A Guide to Increase Mental Health Services for Students.



Tier 2 (direct and indirect services to address emerging mental and behavioral health problems and prevent risky behaviors):

- Suicide risk/threat assessment
- Protocols for responding to bullying
- Evidence-based mental and behavioral health programs (e.g., Check-In Check-Out)
- Counseling groups (e.g., social skills training, anger management, stress reduction)
- Assessment and interpretation of behavioral data to monitor response to interventions
- Development and monitoring of individual student behavior intervention plans
- Solution-focused groups
- Mentoring of students
- Facilitation of educator–family collaboration to address mental and behavioral health problems
- Facilitation of collaboration among family, school, and community to address mental and behavioral health problems and understand the impact of cultural issues

Tier 3 (direct and indirect services to address identified mental and behavioral health problems):

- Direct therapeutic services to all students in need, including individual and group counseling, even in the absence of a clinical diagnosis or identified educational disability
- Cognitive-behavioral therapy, behavior therapy, and dialectical behavior therapy
- Psychological assessment of social, emotional, and behavioral problems
- Suicide intervention and postvention
- Crisis intervention/crisis response
- Facilitation of collaboration among school providers with community agencies and other outside mental and behavioral health providers

The ability of school psychologists to provide comprehensive mental health services to students is sometimes influenced by Local Educational Agencies' (LEA's) organizational dynamics. There are several hurdles for school psychologists to navigate:

- Low school psychologist to student ratios
- High psychoeducational evaluation caseloads
- Competing district needs/priorities
- Lack of administrative approval, expectation, and support
- Division of roles with other school-based mental health professionals<sup>4</sup>

## II. Individualized Education Program (IEP) Driven Mental Health Services

Mental health services may be required for special education students to progress in their IEP programming if they provide meaningful educational benefit. For students qualified for a special education program, Designated Instructional Service (DIS) counseling may be added. To better meet the mental health needs of special education students, DIS counseling may be provided in a tiered fashion. These services may be referred to as Educationally Related Mental Health Services (ERMHS).

Five questions accompanying these introductory paragraphs are considered for school psychologists and administrators who are experiencing some of the above hurdles. The topics are also intended to address concerns of administrators who are unsure if ERMHS is within the school psychologist's scope of practice

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<sup>4</sup> Hanchon, T. A., & Fernald, L. N. (2013). The provision of counseling services among school psychologists: An exploration of training, current practices, and perceptions. *Psychology in the Schools*, 50, 651–671. doi:10.1002/pits.21700



and are therefore excluding school psychologists from the opportunity to provide ERMHS. The hope is to empower the reader to advocate for school psychologists as the natural mental health provider within the school system, inclusive of special education programming. The position of CASP is that school psychologists are qualified school-based mental health professionals whose scope of practice includes providing mental health services within all tiers of MTSS, including DIS Counseling and ERMHS. Regardless of the tier, school psychologists are uniquely trained to ensure all students have the mental health support they need in schools. The questions address the following:

Question 1: Historically, who has delivered counseling services to students eligible for special education?

Question 2: What provider is best prepared to conduct ERMHS assessments and has that expertise been upheld in court?

Question 3: Is providing DIS Counseling/ERMHS counseling within a school psychologist's scope of practice?

Question 4: What specific district ERMHS models, delivered by school psychologists, currently exist in California?

Question 5: What resources are available to increase a school psychologist's counseling skills?

### III. Historical Delivery of Counseling Services

Question: Historically, who has delivered counseling services to students eligible for special education?

In 1975, school psychologists provided school-based mental health services to special education students. In California, County Mental Health (CMH) providers were added in 1984.

In 1975, the United States Congress guaranteed disabled children the right to a free appropriate public education, passing PL 94-142 (the Education for All Handicapped Children Act, amended as the Individuals with Disabilities Education Act or IDEA). Under PL 94-142, all children, regardless of the severity of the handicapping condition, must be provided an education program designed to meet the student's unique educational needs at no cost to the parent(s)/guardian(s), which is often referred to as Free Appropriate Public Education (FAPE). Included in this principle is the concept of related services (Designated Instructional Services in California Education Code §56363 (a)). Related services include those determined educationally necessary for a student to receive educational benefit. One of the services is psychological counseling; students can access this related service if it provides meaningful educational benefit to their special education instruction. In California between 1976 and 1984, schools were responsible for providing all psychological services to students in special education who needed the services to benefit from their Individualized Education Program (IEP).

At that time, school psychologists, along with other Pupil Personnel Services (PPS) professionals, provided mental health services for students within the general education environment. Therefore, with the introduction of related services to special education students, school psychologists were the natural providers. In 1984, however, a shift occurred; it introduced an additional service provider. With the passage of Assembly Bill 3632, the services were provided by County Mental Health (CMH) departments through a referral from the IEP team if an IEP team believed a child's psychological needs exceeded the school's resources. Assembly Bill 3632 created a structure where student mental health needs were often served outside of the school setting, such as a mental health clinic, and by a provider often unfamiliar with school structures. In 1996, the Legislature expanded CMH



responsibilities to include restrictive placements such as out of state school and residential treatment centers when LEAs exhausted resources necessary for a child to make progress toward IEP goals.

With IEP counseling services provided by CMH and, by extension, providers trained within a clinical setting, the landscape of mental health support for students with IEPs was altered. Many administrators and school-based mental health providers began to view those services as best provided by CMH providers, in turn forgetting the service delivery prior to 1984 when school psychologists were the natural provider of mental health services within the school setting.

#### IV. ERMHS Assessment Providers

Question: What provider is best prepared to conduct Educationally Related Mental Health Services (ERMHS) assessments, and has that expertise been upheld in court?

In June of 2011, California enacted Assembly Bill (AB) 114, which changed the process for California students in special education programs to receive mental health services. Under the California Education Code, Pupil Personnel Services (PPS) credentialed school psychologists and Licensed Educational Psychologists (LEPs) are ideally qualified and uniquely trained to be the individuals providing these services. However, other mental health professionals, including licensed clinical psychologists, Licensed Marriage and Family Therapists (LMFT), Licensed Clinical Social Workers (LCSW), and other clinical counselors, associates, and interns could be hired under the supervision of an appropriate PPS credentialed staff member.

As schools have transitioned to providing ERMHS without CMH involvement, a debate has occurred regarding who is qualified to complete ERMHS assessments. Other than school psychologists, some school districts have hired licensed clinical staff to assess the need for and provide ERMHS. CASP's ongoing position is that school psychologists and LEPs are the only persons qualified in the state of California to conduct ERMHS evaluations. This determination is based on training, experience, and the Education Code. Furthermore, it has been supported by the Office of Administrative Hearings (OAH), Special Education Division, and the judiciary.

*Assessing students within a school system is a core tenet of training and experience for school psychologists.*

A scope of practice is the definition provided in law that sets forth what the profession does and places limits upon or confines the breadth of functions that a person within a profession may lawfully perform.<sup>5</sup> Essentially, it provides guidance on what a professional can or cannot do to ensure they remain within their professional training; keeping within one's scope of practice is essential to

maintaining a professional license/credential. For licensed Mental Health (MH) providers such as LMFTs, LCSWs, and Licensed Professional Clinical Counselors (LPCCs), the scope of practice is found in the Business and Professions Code, but for credentialed school psychologists, the law that outlines scope of practice is found in California Education Code and in the Pupil Personnel Service credential (See Appendix B).

<sup>5</sup> Riemersma, M., (2001). *The Therapist*. <https://www.camft.org/Resources/Legal-Articles/Chronological-Article-List/scope-of-practice>



For instance, according to the California Education Code, the scope of practice for school psychologists is with **children in the public schools of California**.<sup>6</sup> Furthermore, the PPS credential outlines scope of practice, stating: *Provide psychological services in grades 12 and below, including preschool, and in programs organized primarily for adults.*<sup>7</sup>

Scope of competence defines or limits what the licensed/credentialed provider within the profession may do and is determined by one's **education, training, and experience**. How does a "scope of practice" differ from a "scope of competence?" Mary Riemersma, former Executive Director of the California Association of Marriage and Family Therapists, answers this question: These two scopes tend to overlap. Mental health providers have a duty to work within their scope of practice, but they are also limited by their scope of competence. Scope of practice is defined for the profession as a whole. Whereas, the scope of competence is individually defined/determined for each mental health provider according to training and experience.

*School psychologists' training is exclusively serving students within the school system.*

For example, even though it may be within the MH providers' scope of practice to work with children, it may be outside of an individual provider's scope of competence if they have never assessed students in a school system, or have never provided behavioral or mental health

support to children within a school setting. Comparing the broad scope of practice of school psychologists and LEPs to licensed MH providers, such as LMFT, LCSW, and LPCC, only school psychologists and LEPs are MH professionals that specialize in providing mental health services to children and adolescents within a school setting. They are also the only MH professionals with training and experience in assessment within the framework of the Education Code.

The coursework for the National Association of School Psychologist (NASP) approved master's and specialist level programs was reviewed for this article. **All coursework** in the training programs target working in the school system to support children, families, and staff in academics, behavior, and mental health and wellness. School psychology students are trained in school systems (on average for 15% of program coursework); they are trained in education law and the special education code (on average for 10% of program coursework). On average 17% of program coursework is dedicated to assessment using standardized tests, which excludes other assessment courses, such as in curriculum-based measures, Response to Intervention (RtI), etc. At least 27% of the coursework is related to field-based experience while practicing under the supervision of the training program and the LEA supervisor (See Appendix A). Among the Board of Behavioral Sciences (BBS) licensed providers, only LEPs are required to have training and experience working with students within a school system. Table 1 below highlights the vastly different training experiences between mental health professionals and the settings in which they are trained to provide services.

<sup>6</sup> California Education Code 49424; Emphasis is the authors

<sup>7</sup> Commission on Teacher Credentialing (2017). *Pupil Personnel Services School Counseling, School Psychology, School Social Work, and Child Welfare and Attendance Program Standards*, pp 121.



Table 1 - School Psychologist Credential v. Licenses

Credentialed School Psychologist/LEP	Licensed MFT, CSW, PCC
Educational model	Medical model
School system (e.g., 504 Plans; discipline regulations; federal and state education laws; tiered systems of prevention, intervention and support)	Mental health system
Family Educational Rights and Privacy Act (FERPA)	Health Insurance Portability and Accountability Act (HIPAA)
Developing educational related mental health service goals	Developing mental health related treatment plans
Determining eligibility for Special Education Services based on IDEA and California Education Code	Determining eligibility for mental health treatment based on the Diagnostic Statistical Manual (DSM)

*Education Code: School districts, county offices, and SELPAs shall ensure that credentialed school psychologists are available to perform individually administered tests of intellectual or emotional functioning.*

The Education Code (Education Code § 56324(a)) states that any *psychological assessment of pupils shall be conducted by a credentialed school psychologist who is trained and prepared to assess cultural and ethnic factors appropriate to the pupil being assessed.* Furthermore, Education Code § 49424 says the school psychologist’s scope of practice as an individual is to apply *scientific principles of learning and behavior to ameliorate*

*school-related problems and to facilitate the learning and development of children in the public schools of California. To accomplish this objective, the school psychologist provides services to children, teachers, parents, community agencies, and the school system itself. These services include. . .(f) **Psychoeducational assessment and diagnosis of specific learning and behavioral disabilities, including, but not limited to, case study evaluation, recommendations for remediation or placement, and periodic reevaluation of such children.***<sup>8</sup>

Additionally, Title 5 of the California Code of Regulations (CCR) § 3029 provides: (a) *School districts, county offices, and SELPAs shall ensure that credentialed school psychologists are available to perform individually administered tests of intellectual or emotional functioning pursuant to Education Code section 56320(b)(3).*<sup>9</sup>

<sup>8</sup> Emphasis is the authors

<sup>9</sup> Emphasis is the authors



Education Code § 49422(e) provides further clarity on who is qualified to complete ERMHS assessments.

*...no person who is an employee of a school district shall administer psychological tests or engage in other psychological activities involving the application of psychological principles, methods, or procedures unless at least one of the following applies: The person holds a valid and current credential as a school psychologist issued by the Commission on Teacher Credentialing or is a psychological assistant or school psychology intern performing the testing or activities under the supervision of a person who holds a credential in school psychology.*

Additionally, other professionals that may provide ERMHS assessments are private practice individuals who are LEPs. The Board of Behavioral Sciences (BBS) lists the scope of practice for LEPs to include assessing the needs of children and providing intervention services. Explicitly, the BBS standards state LEPs are qualified to perform **educational evaluations, diagnose psychological disorders related to the academic learning process, administration and interpretation of diagnostic tests related to academic learning processes including tests of academic ability, learning patterns, achievement, motivation, and personality factors, and conduct psychoeducational assessments for the purpose of identifying special needs.**<sup>10</sup> While other individuals holding licenses with the BBS have been contracted by some LEAs to conduct and provide ERMHS assessments, only LEPs are clearly authorized within their scope of practice to conduct psychoeducational assessments for the purposes of identifying special needs.

In addition to the Education Code, Title 5 regulations, and the BBS guidelines, some limited case law is now available to clarify the issue of who is qualified to conduct an ERMHS assessment. While decisions of the Office of Administrative Hearings (OAH) are not binding law they provide guidance on how the laws surrounding ERMHS assessments are viewed in a legal context.

*Office of Administrative Hearings (OAH): School districts are mandated to utilize the services of a credentialed school psychologist to conduct any psychological assessment of pupils.*

Two specific findings by the OAH address the question of qualifications for an ERMHS assessment. In *Anaheim City School District* (OAH 6-14-10) No. 2010010357, the administrative law judge found that a psychoeducational assessment completed by a clinical psychologist who was also a licensed speech language pathologist was not valid

because she was not a credentialed school psychologist. The law judge determined that *school districts are mandated to utilize the services of a credentialed school psychologist to conduct any psychological assessment of pupils*. Individual tests of intellectual or emotional functioning must be administered by credentialed school psychologists. Therefore, the district failed to meet the legal requirement of providing a credentialed school psychologist, and the LEA was required to pay for the parent's Independent Educational Evaluation (IEE).

Additionally, in *Orinda Union School District* (OAH 10-5-17) No. 2017060787, a school psychologist assessed a student and determined that student did not qualify for ERMHS. However, the student's parents filed a due process complaint requesting an IEE arguing that the school psychologist was not qualified to complete an ERMHS assessment. The administrative law judge upheld the

<sup>10</sup> Business & Professions Code §4989.14(a); Emphasis is the authors



appropriateness of an ERMHS assessment that was completed by a credentialed school psychologist and, therefore, denied the parents' request for an ERMHS IEE at public expense.

Lastly, the Federal District Court in *D.O. v. Escondido Union School District* (S.D.Cal. 2018) 2018 WL 6653271, while not directly analyzing the qualification required to conduct an ERMHS assessment, defines an ERMHS assessment as an educationally related mental health services assessment, conducted by a school psychologist, to examine a child's social, emotional, and behavioral functioning.

In summary, according to the California Education Code and OAH, none of the professionals licensed by the BBS (except LEPs) are authorized within their scope of practice to conduct psychoeducational evaluations to identify special needs. Therefore, it is clear that the only school-based mental health professional qualified to conduct a psychoeducational evaluation to identify the need for mental health services are those that possess a school psychologist credential.<sup>11</sup>

## V. ERMHS and School Psychologists' Scope of Practice

Question: Is providing Educationally Related Mental Health Services (ERMHS) within a school psychologist's scope of practice?

What are Individualized Educational Plan (IEP) Driven Mental Health services?

Mental health services should be offered throughout the LEA's general education program of tiered level of support/MTSS, which may be accessed by general education and special education students. However, an IEP team may determine, based on a psychoeducational evaluation/ERMHS evaluation, that a student requires mental health services to receive educational benefit. In such an instance, counseling, as a DIS, may be written in the IEP document. The counter may also be true. A special education student may not require counseling to receive a FAPE, so DIS counseling would not be written into the IEP, but the student could still receive counseling as a general education intervention.

### ERMHS defined

The California Department of Education (CDE) defines ERMHS as a related service under IDEA that may include:

- Counseling Services (34 CFR 300.34(c)(2) and California EC 56363(b)(9)
- Parent counseling and training (34 CFR 300.34(c)(8) and California EC 56363(b)(11)
- Psychological services (34 CFR 300.34(c)(10) and California EC 56363(b)(10)
- Social work services in schools (34 CFR 300.34(c)(14) and California EC 56363(b)(13)

Assembly Bill (AB) 1651 grants LEPs the ability to supervise interns earning hours towards their license as a Marriage and Family Therapist (MFT), Clinical Social Worker (CSW) and Professional Clinical Counselor (PCC). Also, ERMHS is defined as follows:... *"educationally related mental health services" are mental health services provided to clients who have social, emotional, or behavioral issues that interfere with their educational progress. These services include all of the following:*

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<sup>11</sup> Letter from Carl Corbin to Melanee Cottrill re: CASP Scope of Practice Questions, dated February 3, 2020, revised May 18, 2020.





- (1) *Educationally related counseling services to clients qualified for special education that are necessary to receive a free appropriate public education in the least restrictive environment pursuant to the federal requirements of Section 1412 of Title 20 of the United States Code.*
- (2) *Intensive counseling services on a continuum which may reflect an increase in frequency, duration, or staff specialization to address the client's emotional and behavioral needs.*
- (3) *Counseling services provided by qualified practitioners.*
- (4) *Parent counseling and training.*
- (5) *Psychological services that include consulting with staff members in planning school programs to meet the client's educational needs and assisting in developing positive behavioral intervention strategies for the client.*
- (6) *Social work services such as preparing a social or developmental history on a client with a disability.*
- (7) *Group and individualized counseling with the client and family.*
- (8) *Mobilizing school and community resources to enable the client to learn as effectively as possible in their educational program, as outlined in Section 300.34 of Title 34 of the Code of Federal Regulations.<sup>12</sup>*

School psychologists are qualified ERMHS providers due to their training, which specializes in therapeutic models, concentration in school systems, and providing services to students. In fact, for contracted community-based LMFTs, LCSWs, and LPCCs to practice in a school setting, they must be supervised by a PPS credentialed provider.<sup>13</sup>

Ethically-minded school psychologists and district administrators may ask this: Are school psychologists considered school-based mental health providers? According to the Every Student Succeeds Act (ESSA), school psychologists are school-based mental health services providers. ESSA states,

*School psychologists are school-based mental health providers who are trained to provide mental health services according to therapeutic models.*

*School-based mental health services provider. The term 'school-based mental health services provider' includes a State-licensed or State-certified school counselor, **school psychologist**, school social worker, or other State licensed or certified mental health professional qualified under State law to provide mental health services to children and adolescents.<sup>14</sup>*

Therefore, by definition, school psychologists are qualified, under law, to provide mental health services to children and adolescents.

According to the Commission on Teacher Credentialing, which oversees the PPS training standards, school psychologists *provide psychological counseling for individuals, groups, and families.*

The newly written standard, which takes effect in 2025, under the School Psychologist Performance Expectation 4: Behavior Interventions and Mental Health Services to Develop Social and Life Skills,

<sup>12</sup> [https://leginfo.ca.gov/faces/billTextClient.xhtml?bill\\_id=201920200AB1651](https://leginfo.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB1651)

<sup>13</sup> <https://www.cde.ca.gov/sp/se/ac/reqsecuresrvcs.asp>

<sup>14</sup> ESSA, Section 4102, definitions, of Title IV; *Emphasis is the authors*



states that school psychologists *provide and evaluate counseling, behavioral and mental health services, including individual, group, classroom, and school-wide interventions.*<sup>15</sup>

School psychologists are trained to provide MH services using therapeutic models. According to an informal survey of masters and educational specialist (Ed.S.) level Nationally Certified School Psychologist (NCSP) training programs, school psychologists are trained in therapy models:

- Cognitive Behavior Therapy (CBT)
- Dialectical Behavior Therapy (DBT)
- Solution Focused Brief Therapy (SFBT)

Within these frameworks, additional therapeutic interventions taught include:

- Mindfulness
- Motivational interviewing
- Play-based therapy
- Group process

A sample of counseling course offerings includes classes titled:

- Cognitive Behavior Therapy (EPSY 662), California State University (CSU) East Bay
- Individual and Group Counseling of Children in Schools (EPC 665), CSU Northridge
- Counseling and Psychotherapy for School Psychologists (EDS 241), CSU Sacramento
- Cultural and Community Issues in Counseling and School Psychology (SP 514), Chapman University
- Treatment of Emotional & Behavioral Disorder in Children & Adolescents (EDSP 6530), Loyola Marymount University
- Psychopathology and Wellness Promotion (EDUC 343), University of the Pacific
- Developmental Psychopathology (PSYCH 204), CSU Fresno

*School psychologists and LEPs are school-based mental health providers who specialize in school systems and specialize in mental health services with children.*

In Appendix B is a chart that summarizes the scope of practice for credentialed school psychologists, LEPs, LMFTs, LCSWs, and LPCCs. Reviewing the scopes of practice for each license/credential, only two providers specialize in children and adolescents: school psychologists and LEPs, which means their training and experience focuses on services to students and their parents.

The LMFT, LCSW, and LPCC scope of practice is broad, not school system-specific, and during fieldwork they are not required to earn counseling hours of experience working with children within a school system.<sup>16</sup> Therefore, when an LEA hires a LMFT, LCSW, or LPCC professional, the provider's training and experience may not include working within a school system and may exclude working with children.

<sup>15</sup> Commission on Teacher Credentialing (2017). *Pupil Personnel Services School Counseling, School Psychology, School Social Work, and Child Welfare and Attendance Program Standards*, pp 10.

<sup>16</sup> <https://www.bbs.ca.gov/pdf/forms/lcs/aswlog.pdf>; [https://www.bbs.ca.gov/pdf/forms/mft/mfwkylog\\_37a-525\\_option1.pdf](https://www.bbs.ca.gov/pdf/forms/mft/mfwkylog_37a-525_option1.pdf); [https://www.bbs.ca.gov/pdf/forms/lpc/lpcc\\_wkylog\\_37a-638\\_option1.pdf](https://www.bbs.ca.gov/pdf/forms/lpc/lpcc_wkylog_37a-638_option1.pdf)



In contrast, before an LEP may apply for a license via the BBS, *applicants must complete three years of full-time experience (or the equivalent to three years of experience) working as a school psychologist.*<sup>17</sup>

For LEAs that contract with LMFTs, LCSWs, and LPCCs to provide psychological and counseling services for Medi-Cal reimbursement, the newly revised California State Plan Amendment (SPA): 15-0021, states that licensed providers *must hold a valid Pupil Personnel Services (PPS) credential issued by the Commission on Teacher Credentialing (CTC), with the appropriate authorization for those services, or be appropriately supervised by a PPS-credential holder.*<sup>18</sup>

In an AB 114 guidance document, the CDE describes the nature of the supervision of licensed, non-PPS mental health service providers stating:

*In all cases, community-based mental health professionals must be supervised in their school-based activities by an individual possessing a Pupil Personnel Services (PPS) Credential. The term "supervised" in this context means that the PPS credential holder has oversight of the school-based activities undertaken by a community-based mental health provider for the purpose of **ensuring that these services are consistent with the needs of students** served and are coordinated with other student services to allow for the provision of an efficient and comprehensive Pupil Personnel Services Program.*<sup>19</sup>

In summary, non-PPS credentialed LMFTs, LCSWs, and LPCCs who are contracted community-based providers have to be supervised by an individual with a PPS credential while performing school-based mental health services because they do not necessarily have expertise in the public school system and are not trained in the governing legal requirements.<sup>20</sup>

## VI. ERMHS Delivery Models

Question: What specific district Educational Related Mental Health Services (ERMHS) models, delivered by school psychologists, currently exist in California?

Who can provide ERMHS?

In 2011, as California transitioned from AB 3632/SB 26.5 to AB 114 there was confusion by school districts regarding who could and should be responsible for providing ERMHS. Nine years later, there is little consistency between Special Educational Local Planning Areas (SELPA). There are SELPAs whose ERMHS services are provided by district-employed school psychologists or LEPs. On the other end of the spectrum, there are districts that provide ERMHS services exclusively by licensed therapists/clinicians through outside contracts. Our purpose is to clarify who is legally allowed to provide ERMHS, who is best suited, and to provide models of delivery. Because some districts have excluded school psychologists as ERMHS providers, the models presented herein are examples of PPS providers exclusively providing ERMHS.

<sup>17</sup> <https://www.bbs.ca.gov/applicants/lep.html>

<sup>18</sup> <https://www.medicaid.gov/sites/default/files/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/CA/CA-15-0021.pdf>, pp 9k & 9l

<sup>19</sup> <https://www.cde.ca.gov/sp/se/ac/regsecuresrvcs.asp>; Emphasis is the authors

<sup>20</sup> California Department of Education. (2018). A Guide to Increase Mental Health Services for Students.



In the State of California, ERMHS falls under the umbrella of counseling and guidance within the Education Code. Specifically, Code 5 CCR § 3051.9 states *counseling and guidance services may be provided to an individual with exceptional needs who requires additional counseling and guidance services to supplement the regular guidance and counseling program*. Furthermore, the Education Code clearly identifies which individual licenses or credentials are valid for providing ERMHS:

- (1) *license as a Marriage and Family Therapist or Marriage and Family Therapist Registered Intern who is under the supervision of a Licensed Marriage and Family Therapist, a Licensed Clinical Social Worker, a Licensed Professional Clinical Counselor, a Licensed Psychologist, or a Physician who is certified in psychiatry by the Medical Board of California, the Board of Behavioral Sciences, or the Board of Psychology, within the Department of Consumer Affairs.*
- (2) *license as a Clinical Social Worker, or Associate Clinical Social Worker who is under the supervision of either a Licensed Clinical Social Worker or a licensed Mental Health Professional by the Board of Behavioral Sciences, within the Department of Consumer Affairs; or*
- (3) *license as an Educational Psychologist issued by a licensing agency within the Department of Consumer Affairs; or*
- (4) *license in psychology, or who are working under supervision of a licensed psychologist, both regulated by the Board of Psychology, within the Department of Consumer Affairs; or*
- (5) **Pupil Personnel Services Credential, which authorizes school counseling or school psychology.**
- (6) *license as a Licensed Professional Clinical Counselor, or a Professional Clinical Counselor Registered Intern who is under the supervision of a Licensed Professional Clinical Counselor, a Licensed Marriage and Family Therapist, a Licensed Clinical Social Worker, a Licensed Clinical Psychologist, or a Physician who is certified in psychiatry by the American Board of Psychiatry and Neurology.<sup>21</sup>*

Note, number five clearly states that any individual in California that possesses a PPS credential in school psychology is deemed legally qualified to provide ERMHS.

Despite confusion regarding the ability of school psychologists to provide ERMHS, many school districts have built ERMHS programs around the skills of school psychologists. In Appendix C, you will find descriptions of two different ERMHS programs in two different districts.

The highlighted district's ERMHS programs are staffed exclusively with PPS credentialed providers because of their unique knowledge in school systems, behavior, research, and law (e.g., special education law, Education Code), special education assessment, and mental health therapeutic models. These skills are critical for overseeing and providing ERMHS and school-based mental health programs.

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<sup>21</sup> Code 5 CCR § 3051.9(c): Emphasis is the authors



## VII. Resources for Counseling Skills

Question: What resources are available to increase counseling skills?

*Continuing Professional Development is required to maintain Nationally Certified School Psychologist status.*

School psychologists who hold the Nationally Certified School Psychologist (NCSP) certification must complete a minimum of 75 hours of continuing professional development (CPD) activities within 36 months of renewal and maintain documentation of activities. At least 10 of the 75 CPD hours must come from a National Association of School Psychologist (NASP) or American Psychiatric Association (APA)-approved provider. NCSPs must also accrue 3 hours of CPD regarding ethical practice and/or the legal regulation of school psychology, which may be met with any appropriate CPD activity category.<sup>22</sup> All school psychologists should consider creating a self-growth plan that includes enriching counseling skills. School psychologists showing evidence of having taken the [NASP Self-Assessment for School Psychologists](#) and completing the [NASP Professional Growth Plan](#) can receive one NASP approved CPD credit each year, for up to three (3) CPD credits per NCSP renewal cycle.<sup>23</sup>

*Continuing professional development is a credentialed school psychologist's ethical requirement.*

Although maintaining an active Pupil Personnel Services (PPS) credential does not require professional development, ethics require school psychologists to commit to positive ethics that strive for excellence, not minimal obligations. According to the California Association of School Psychologist (CASP) Ethics Code, school psychologists engage in continuing professional development to support the welfare of populations served. They remain current regarding developments in research, training, and professional practices that benefit children, families, and schools. They also understand that professional skill development beyond that of the novice practitioner requires well-planned continuing professional development and supervision.<sup>24</sup>

### Maintaining proficient mental health skills

Having the scope of practice to provide mental health services, in theory, does not mean one can provide these services proficiently without CPD.<sup>25</sup> Choosing professional development is essential to professional competence and reduced liability. It is crucial for school districts to support school psychologists' involvement in local professional development opportunities (local CASP affiliates are a great option), attending CASP and/or NASP conferences, and taking part in online CASP and NASP offered CPD courses. These professional organizations are continually publishing content related to mental health; therefore, it is also recommended to join these organizations.

<sup>22</sup> <https://www.nasponline.org/standards-and-certification/national-certification/ncsp-renewal>

<sup>23</sup> <https://www.nasponline.org/standards-and-certification/national-certification/ncsp-renewal/cpd-guidelines>

<sup>24</sup> Makena, K., School Psychologist Code of Ethics (2020) CASP, p. 4-5.

<sup>25</sup> Beam, E, Brady, J., Sopp, T.J., School Psychologists are the Best Equipped to Deliver Mental Health Services in the Schools. CASP



Seeking case consultation

Every mental health provider experiences a client in a counseling relationship that proves challenging. Regarding scope of competence, the CASP Ethics Code states: *School psychologists engage in confidential case consultation when needed (p.4).*

Meeting and consulting with fellow school psychologists can be a great benefit of attending local training and CASP/NASP conferences. Local CASP affiliates provide an opportunity to meet others in the field that may assist with case consultation, which may be especially helpful for those that work in small school districts without many colleagues. In addition, it may be beneficial for school psychologists to advocate for the time to meet with their colleagues within their district to review cases.

**VIII. Professional Development Resources**

Below is a list of opportunities to enhance skills in therapeutic models. These resources are intended to serve as a starting point.

*Table 2 - Therapeutic Model Training*

Topic/Therapeutic model	Website
Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)	<a href="http://tfcbt.org">tfcbt.org</a> Offers training and consultation.
Dialectical Behavioral Therapy (DBT)	<a href="http://behavioraltech.org/">http://behavioraltech.org/</a> Marsha Linehan's company offers live seminars, online learning, and consultations.
Variety of topics and models	<a href="https://www.pesi.com/">https://www.pesi.com/</a> PESI continuing education offers live seminars, online learning, and other educational products
A variety of topics and therapeutic models such as Motivational Interviewing, Solution-Focused Therapy, Psychopharmacology (understanding what medications may or may not be intended to help and possible side effects)	Often these topics are available at CASP events <a href="https://casponline.org/">https://casponline.org/</a> & NASP events <a href="https://www.nasponline.org/professional-development/nasp-annual-convention-x38308">https://www.nasponline.org/professional-development/nasp-annual-convention-x38308</a>
Cognitive Behavior Therapy (TEAM Model)	<a href="http://www.feelinggoodinstitute.com/">http://www.feelinggoodinstitute.com/</a> Offers live seminars, online learning, and podcasts.



Topic/Therapeutic model	Website
NASP approved school psychology training program professors can be contracted to deliver professional development on a variety of topics and therapeutic models such as CBT, DBT, SFBT, etc.	<a href="https://www.nasponline.org/standards-and-certification/graduate-program-approval-and-accreditation/program-approval/approved-programs">https://www.nasponline.org/standards-and-certification/graduate-program-approval-and-accreditation/program-approval/approved-programs</a> Use the above website to locate a NASP approved graduate program near you.

The California Department of Education (CDE) released *Stronger Together- A Guidebook for the Safe Reopening of California's Public Schools in the current global pandemic for the coming 2020-21 school year*.<sup>26</sup> In preparation for the reopening, one of the recommendations is training in Psychological First Aid. Although this is not exclusively in the realm of ERMHS, the effect of the pandemic may result in an increase of psychological trauma. School psychologists may want to consider refreshing skills in this area.

Table 3 - Psychological First Aid Training

Model	Website
Psychological first aid- The National Child Traumatic Network (NCTSN)	<a href="https://learn.nctsn.org/course/index.php?categoryid=11">https://learn.nctsn.org/course/index.php?categoryid=11</a> Offers a free 6-hour online version.
Psychological first aid- Red Cross	<a href="https://www.redcross.org/take-a-class/classes/psychological-first-aid%3A-supporting-yourself-and-others-during-covid-19/a6R3o0000014Zlg.html">https://www.redcross.org/take-a-class/classes/psychological-first-aid%3A-supporting-yourself-and-others-during-covid-19/a6R3o0000014Zlg.html</a> offers a free 3-hour version.
PREPaRE Model, 3 <sup>rd</sup> Edition- NASP	<a href="https://www.nasponline.org/professional-development/prepare-training-curriculum/prepare-workshops">https://www.nasponline.org/professional-development/prepare-training-curriculum/prepare-workshops</a>

Cite As

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Resource Paper Writing Group Members

Thomas J. Sopp, M.A., LMFT, School Psychologist, Long Beach Unified School District. CASP Chair Advocacy & Leadership Committee, CASP Past President

<sup>26</sup> <https://www.cde.ca.gov/ls/he/hn/strongertogether.asp>



**CALIFORNIA ASSOCIATION OF SCHOOL PSYCHOLOGISTS  
RESOURCE PAPER**

Nelarie Romo, Ed.S, M.A. Ed., LEP, NCSP, Director of Student Services, Escalon Unified School District. CASP Affiliate Representative, Stanislaus County Association of School Psychologists (SCASP) Affiliate President

Armando Fernandez, M.S., LEP, Lead Psychologist, Elk Grove Unified School District, CASP Region 10 Representative, EGRASP Affiliate President

Michael Giambona, Ph.D., LEP, School Psychologist, San Ramon Valley Unified School District. CASP Region II Representative

Melissa D. Wood, M.A. Ed., M.S., SELPA Coordinator, Kern County Consortium SELPA. CASP President-Elect

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## Appendix A

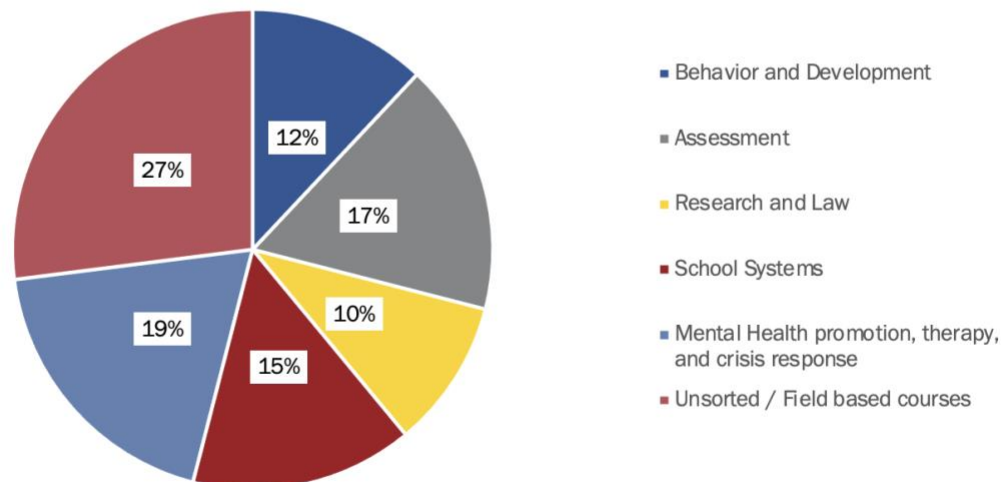
School psychologists have foundational knowledge in both psychology and education, making them uniquely qualified to provide mental health services and behavioral support.

School psychology programs, with Nationally Certified School Psychology (NCSP) certification, were analyzed and categorized into the following classifications.

### Classifications

- **Behavior and Development courses** – Human development, [life-span](#), developmental milestones, applied behavior analysis, behavior intervention plans, multiculturalism with regard to learners, PBIS.
- **Assessment courses** – Norm referenced standardized testing measures (training of and application).
- **Research and Law courses** – Psychoeducational reports, data-driven analysis, ed code, ethics with relation to the law or organizational code of conduct.
- **School Systems courses** – Consultation, [history](#) and transformation of school systems, RTI, academic intervention, home-school collaboration, integration and understanding of the school system.
- **Mental health promotion, therapy, and crisis response courses** – Mental health tiered systems of support, trauma-informed care, psychopathology, crisis response, group and individual counseling, physiological impacts inclusive of mental health.
- **Unsorted/Field based courses** – Practicum and internship courses, fieldwork.

Breakdown of the Average California NASP-Approved School Psychology Graduate Program



In California, there are 12 school psychology [masters](#) level and specialist level programs that are fully NASP approved. Of the 12 programs, 4 exclusively offer an Educational Specialist degree ([Ed.S.](#)), 4 exclusively offer a [masters](#) degree, and 4 provide both a [masters](#) degree and an [Ed.S.](#) degree. Program courses were analyzed by catalogue descriptions. The units were averaged according to classification.

(Romo, N. & Sopp, T., 2020)



Appendix B: Comparing the Scope of Practice between LCSW, LMFT, LPCC, LEP, and credentialed school psychologists

Provider	Scope of Practice	
	Client	Service
<p><u>LICENSED CLINICAL SOCIAL WORKER (LCSW)</u></p> <p><b>Authorizing agency:</b> Board of Behavioral Sciences (BBS)</p> <p><b>Source:</b> <i>California Business and Professions Code §4996.9 (Amended by Stats. 2013, Ch. 473, Sec. 48. (SB 821) Effective January 1, 2014).</i></p>	<ul style="list-style-type: none"> <li>● Individuals</li> <li>● Families</li> <li>● Groups</li> </ul>	<ul style="list-style-type: none"> <li>● Counseling and using applied psychotherapy.</li> <li>● Providing information and referral services.</li> <li>● Providing or arranging for the provision of social services.</li> <li>● Explaining or interpreting the psychosocial aspects in the situations of individuals, families, or groups.</li> <li>● Helping communities to organize, to provide, or to improve social or health services.</li> <li>● Doing research related to social work; and the use, application, and integration of the coursework and experience required by Sections 4996.2 and 4996.23.</li> </ul>
<p><u>LICENSED MARRIAGE FAMILY THERAPIST</u></p> <p><b>Authorizing agency:</b> Board of Behavioral Sciences (BBS)</p> <p><b>Source:</b> <i>California Business and Professions Code §4980.02</i></p>	<ul style="list-style-type: none"> <li>● Individuals</li> <li>● Couples</li> <li>● Groups</li> </ul> <p>wherein interpersonal relationships are examined for achieving more adequate, satisfying, and productive marriage and family adjustments. This practice includes relationship and pre-marriage counseling.</p>	<ul style="list-style-type: none"> <li>● Use of applied psychotherapeutic techniques, to enable individuals to mature and grow within marriage and the family, the provision of explanations and interpretations of the psychosexual and psychosocial aspects of relationships, and the use, application, and integration of the coursework and training required by Sections 4980.36, 4980.37, and 4980.41, as applicable.</li> </ul>



Provider	Client	Service
<p><u>LICENSED PROFESSIONAL CLINICAL COUNSELOR</u></p> <p><b>Authorizing agency:</b> Board of Behavioral Sciences (BBS)</p> <p><b>Source:</b> <i>California Business and Professions Code §4999.20 (Amended by Stats. 2013, Ch. 465, Sec. 1. (SB 243) Effective January 1, 2014.)</i></p>	<p>None specified</p>	<ul style="list-style-type: none"> <li>• "Professional clinical counseling" means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems, and the use, application, and integration of the coursework and training required by Sections 4999.32 and 4999.33.</li> <li>• "Professional clinical counseling" includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth, change behavior, and make well-informed, rational decisions.</li> <li>• "Professional clinical counseling" is focused exclusively on the application of counseling interventions and psychotherapeutic techniques for the purposes of improving mental health, and is not intended to capture other, nonclinical forms of counseling for the purposes of licensure. For purposes of this paragraph, "non-clinical" means non-mental health.</li> </ul>
<p><u>CREDENTIALLED SCHOOL PSYCHOLOGIST</u></p> <p><b>Authorizing agency:</b> Commission on Teacher Credentialing</p> <p><b>Source:</b> <i>California Education Code §49424</i></p>	<p>A school psychologist is a credentialed professional whose primary objective is the application of scientific principles of learning and behavior to ameliorate school-related problems and to facilitate the learning and development of children in the public schools of California.</p> <p>To accomplish this objective the school psychologist provides services to children,</p>	<p>Per Ed. Code, these services include:</p> <ul style="list-style-type: none"> <li>• Consultation with school administrators concerning appropriate learning objectives for children, planning of developmental and remedial programs for pupils in regular and special school programs, and the development of educational experimentation and evaluation.</li> <li>• Consultation with teachers in the development and implementation of classroom methods and procedures designed to facilitate pupil learning and to overcome learning and behavior disorders.</li> <li>• Consultation with parents to assist in understanding the learning and adjustment processes of children.</li> </ul>



Provider	Client	Service
<p><i>Source: Pupil Personnel Services (Handbook Revised July 10, 2017, page 121).</i></p>	<p>teachers, parents, community agencies, and the school system itself.</p> <p>Provide psychological services in grades 12 and below, including preschool, and in programs organized primarily for adults.</p>	<ul style="list-style-type: none"> <li>● Consultation with community agencies, such as probation departments, mental health clinics, and welfare departments, concerning pupils who are being served by such community agencies.</li> <li>● Consultation and supervision of pupil personnel services workers.</li> <li>● Psychoeducational assessment and diagnosis of specific learning and behavioral disabilities, including, but not limited to, case study evaluation, recommendations for remediation or placement, and periodic reevaluation of such children.</li> <li>● Psychological counseling of and other therapeutic techniques with children and parents, including parent education.</li> </ul> <p>Per PPS credential:</p> <ul style="list-style-type: none"> <li>● Design strategies and programs to address problems of adjustment.</li> <li>● Consult with other educators and parents on issues of social development, behavioral and academic difficulties.</li> <li>● Conduct psychoeducational assessments for purposes of identifying special needs.</li> <li>● Provide psychological counseling for individuals, groups, and families.</li> <li>● Coordinate intervention strategies for management of individual and school wide crisis.</li> </ul>



Provider	Client	Service
<p><u>LICENSED EDUCATIONAL PSYCHOLOGIST</u></p> <p><b>Authorizing agency:</b> Board of Behavioral Sciences (BBS)</p> <p><b>Source:</b> <i>California Business and Professions Code §4989.13- 4989.70 (Amended by Stats. 2014, Ch. 316, Sec. 25. (SB 1466) Effective January 1, 2015.)</i></p>	<p>The practice of educational psychology is the performance of any of the following professional functions pertaining to academic learning processes or the educational system or both:</p>	<ul style="list-style-type: none"> <li>● Educational evaluation.</li> <li>● Diagnosis of psychological disorders related to academic learning processes.</li> <li>● Administration of diagnostic tests related to academic learning processes including tests of academic ability, learning patterns, achievement, motivation, and personality factors.</li> <li>● Interpretation of diagnostic tests related to academic learning processes including tests of academic ability, learning patterns, achievement, motivation, and personality factors.</li> <li>● Providing psychological counseling for individuals, groups, and families.</li> <li>● Consultation with other educators and parents on issues of social development and behavioral and academic difficulties.</li> <li>● Conducting psychoeducational assessments for the purposes of identifying special needs.</li> <li>● Developing treatment programs and strategies to address problems of adjustment.</li> <li>● Coordinating intervention strategies for management of individual crises.</li> </ul>



**Appendix C Model Programs: Two Tiered Mental Health service models provided by PPS ERMHS specialists**

**District 1:**

**ERMHS Tiered Service Model**

Program:	Provider:	Services:
Level 1: DIS Counseling	School psychologists	<p>Skill-based individual/group counseling (e.g., anger management, social skills), 30-minute sessions per week, 3-month pre-referral counseling for all students that are referred for ERMHS services.</p> <p>Provider responsibility: skill-based counseling, pre-referral counseling for ERMHS services, and complete typical site-based responsibilities of a school psychologist at their assigned school sites.</p>
Level 2: District-based ERMHS	ERMHS counselors (PPS-school counseling or school psychologist)	<p>Students receiving outpatient ERMHS are typically provided 30-45 minutes per week of individual counseling and 30 minutes per month of consultation services.</p> <p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: exclusively complete ERMHS assessments and provide ERMHS counseling.</p>
Level 3: SDC, site-based 12 students, staffed with one teacher and two paraprofessionals	School psychologists	<p>Students receive weekly individual counseling for 45 minutes in addition to at least 30 minutes of group counseling weekly, in addition to crisis counseling as needed.</p> <p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: all standard services of a site-based school psychologist, including assessments (e.g., Triennial Evaluations, manifestation determinations, Behavior Intervention Plans), oversee the program's behavioral expectations level system and reinforcers, train staff on how to appropriately work with students with severe mental health challenges, and provide individual, group, and crisis counseling.</p>



**District 2:**

Prevention Focused School-Based K- 12 ERMHS service Tiered System

Program	Provider	Services
Level 1: DIS Counseling	School psychologists	<p>Skill-based individual/group counseling (e.g., anger management, social skills), 30-minute sessions per week, 3-month pre-referral counseling for all students that are referred for ERMHS services.</p> <p>Provider responsibility: skill-based counseling, pre-referral counseling for ERMHS services, and complete typical site-based responsibilities of a school psychologist at their assigned school sites.</p>
Level 2: Medi-Cal-Based Mobile Mental Health Clinic	ERMHS school psychologists	<p>Provide mobile mental health services at school sites throughout the district with Medi-Cal eligible students:</p> <ul style="list-style-type: none"> <li>● Individual counseling (site-based), 30-45 minutes.</li> <li>● Wrap-around program - a family-centered process that builds a team and coordinates all members to brainstorm ways to help the child and the family create a more satisfying life. The intent of the program is to help the family develop their own network of support through their community rather than develop a long-standing reliance upon formal services for intervention.</li> <li>● Serves approximately 180 students per year. About 1/3 of the students seen in the clinic are special education students.</li> <li>● The cost of the clinic is completely funded through direct billing to Medi-Cal.</li> </ul> <p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: complete needs-assessments with families, work with community members to help bridge families to services outside of the school setting, provide ERMHS counseling services, and complete Medi-Cal billing.</p>
Level 2: Non-Medi-Cal District-based ERMHS	ERMHS counselors (PPS-school counselor or school psychology)	<p>Students receiving outpatient ERMHS are typically provided 45 minutes per week of individual counseling. However, some students may receive individual counseling twice a week for 45 minutes or weekly family counseling.</p>



Program	Provider	Services
		<p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: exclusively provide ERMHS counseling.</p>

\*ERMHS Assessments completed by district-based school psychologist ERMHS Team

Intervention focused District-based ERMHS service model

Program	Provider	Services
<p>Level 3: Special Day Class (SDC)- 11 students per class. Mainstreamed for PE &amp; lunch. Staffed with a teacher &amp; paraeducators.</p>	<p>ERMHS counselors (PPS- school counseling or school psychology)</p>	<p>Students receive weekly individual counseling, 45 minutes, in addition to weekly group counseling, 30 minutes, in addition to crisis counseling as needed.</p> <p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: oversee the program's behavioral expectations level system and reinforcers, train staff on how to appropriately work with students with severe mental health challenges, complete intake for new students and families, provide individual, group, and crisis counseling.</p>
<p>Level 4: Special Day Class (SDC), Intensive self-contained classroom. 11 students per class with a teacher and paraeducator. Students referred to this program are considered to have significant mental health difficulties.</p>	<p>ERMHS counselors (PPS- school counseling or school psychology)</p>	<p>Students receive weekly individual counseling, 45 minutes, in addition to weekly group counseling, 30 minutes, in addition to crisis counseling as needed.</p> <p>Treatment Modalities: CBT, DBT, Trauma Informed Therapy, and Solution Focused Therapy.</p> <p>Provider responsibility: oversee the program's behavioral expectations level system and reinforcers, train staff on how to appropriately work with students with severe mental health challenges, complete intake for new students and families, provide individual, group, and crisis counseling.</p>