

2022



**PROFESSIONAL SUPPORT
PERSONNEL IN MASSACHUSETTS
PUBLIC SCHOOLS**

**Access to Professional Support
Personnel post COVID-19
Research Brief and Recommendations**



The Department of Elementary and Secondary Education (DESE) licenses Professional Support Personnel (PSP), and these credentialed professionals are employed by the local and regional public-school districts throughout Massachusetts. This research brief examines the number of PSP staff employed by public schools prior to and after the disruptions of the COVID-19 pandemic.

Access to School-based Professional Support Personnel Services: Children are more likely to access and complete behavioral health treatments when they are provided in schools compared to community-based settings, and this is particularly true in situations of community crisis (i.e., post-Katrina, Jaycox et al., 2010). Also, racial disparities in access to services are reduced when they are available through the education sector (Lyon et al., 2013). Thus, access to school-based behavioral health services is critical in the prevention, early intervention, and treatment of mental health symptoms.

DESE offers Professional Support Personnel licensure for school-based services in four fields, each of which requires professional and/or graduate training accompanied by supervised field experiences:

- School Counselor (Levels: PreK-8; 5-12)
- School Social Worker/School Adjustment Counselor (All Levels)
- School Psychologist (All Levels)
- School Nurse (All Levels)

School nurses provide critical services for students with a range of physical health and behavioral health needs; however, the surveillance testing and compliance protocols required to mitigate the COVID-19 pandemic were major responsibilities of school nurses during the 2020-2021 and the 2021-2022 academic years. As such, this brief will primarily focus on the staff specifically designated to address behavioral health concerns – those who have the training and skills to design and implement social, emotional, and behavioral health services in schools.

Using data from the 2018-2019 academic year, the BIRCh Project identified that students in Massachusetts lack adequate access to school-based behavioral health staff according to national recommended ratios. Based on available data from DESE, the 406 MA public school districts^[1] employed **5427** support personnel who provide school-based counseling, academic guidance, health, and behavioral health services to meet the needs of 951,631 students across the state.

¹ 406 public districts comprised of 291 Local and regional school districts (LEAs), 84 Charter Schools, 29 Vocational/Technical Schools, and 2 Online schools

² Professional ratio recommendations collected from the National Association of Social Workers, American School Counselor Association, National Association of School Psychologists, and National School Nurse Association.

Based on the 2021-2022 DESE data, many school districts increased the employment of licensed school behavioral health professionals to address the burgeoning needs. These 406 public school districts employed **6352** support personnel to address the needs of 911,529 students. The **17%** increase in staffing of school-based behavioral health providers increases children's access to interventions and support services.

Professional Support Personnel License	Number of Professionals in MA Schools 2018-2019	Number of Professionals in MA Schools 2021-2022	Increased Number of Professionals
School Social Worker / School Adjustment Counselor	1777	2533	756
School Counselor	2353	2470	117
School Psychologist	1297	1349	52
TOTAL	5427	6352	925

Despite the increase in number of professional behavioral health staff, Massachusetts schools continue to lack adequate access to school-based behavioral health staff, according to national recommended ratios, as indicated below.

Professional Support Personnel License	Student : Staff Ratio 2018-2019	Student : Staff Ratio 2021-2022	National Recommended Ratios
School Social Worker / School Adjustment Counselor	1:536	1:360	1:250
School Counselor	1:404	1:369	1:250
School Psychologist	1:734	1:676	1:500

Access to behavioral health professionals is critical to addressing the mental health needs of children and this data also highlights concerns within the mental health professions. With the increase in school-based providers, one concern is that qualified professionals may be leaving community-based settings; thus, putting a strain on the agencies' capacity to provide robust services.

Considerations: Access to behavioral health professionals is critical to addressing the mental health needs of children and this data draws attention to concerns within the community mental health professional settings. The increases in school-based providers may exacerbate the problem of qualified professionals leaving community-based settings; thus, putting a strain on the agencies' capacity to provide robust services. Additionally, there remain concerns regarding the inconsistent ways that school-based behavioral health professionals support students' social, emotional, and behavioral health (i.e., what types of services they provide, who they work with, their job responsibilities). This can be due to many factors, including district structures, staffing capacity issues, and administrative demands. Finally, this data does not include community mental health providers, including tele-behavioral health professionals, who also provide coordinated services in partnership with the schools.

Conclusion: Given that most people experience the first onset of a mental health disorder in childhood or adolescence, public schools possess a unique constellation of opportunities for health promotion. For public schools in Massachusetts to emphasize prevention of behavioral health challenges, comprehensive services require adequate staffing of Professional Support Personnel. Despite the 17% increase in school staffing in the last three years, students in Massachusetts' schools continues to lack adequate access to school-based behavioral health staff. In addition, there are concerns that the shift in staffing has worsen the access to community-based services. Further research is needed to examine the equity with which these increased staff supported underserved student populations.

Recommendations

The recommendations are designed to enhance access to school-based behavioral health supports to meet the needs of children in the Commonwealth. Recommendations include:

- **State Budget Funding** - Given the inequity in local resources, state funding resources could reduce barriers for access to social, emotional, and behavioral health by supporting the hiring and training of school-based professional personnel. State funding can also support a technical assistance center to build capacity of school professionals and enhance partnerships with community agencies.
- **Support Workforce Development Funding and Opportunities** - The hiring of key personnel requires a pool of highly, qualified school-based behavioral health professionals - and national reports suggest that there are labor shortages in these fields. Sustainable funding to increase the behavioral health workforce is needed, as several districts are using COVID related funds, such as ESSER, which are time limited. Also, licensing waivers through DESE have increased opportunities for mental health professionals to gain employment in school districts. This has increased the number of these professionals in schools, though additional training and supervision are needed on

education law and regulations in the academic setting, such as limits to confidentiality, school-wide practices, and special education referral processes. State resources could support pre-service and in-service training, with a unique focus on efforts to diversify the workforce.

- **Possible Use of Federal Relief Funds** - As districts identify effective use of federal relief funds, it is recommended that these resources also be used in ways that build capacity of staff. This can include the purchasing of evidence-based social and emotional curriculum that can be integrated in each classroom, stipends for staff to participate in teams and attend professional development on mental health, and tools for universal screening of behaviors that interfere with school functioning. These funds can also specifically focus on efforts for equitable access to educational opportunities.
- **Adoption of MTSS Framework** - An essential key is the statewide adoption of multi-tiered prevention and intervention frameworks that allow teams of school professionals to complete screenings, implement interventions, and monitor progress for students in need of services. State-wide technical assistance is needed by districts to support implementation of behavioral health tiered supports.
- **Expanded Behavioral Health Partnerships with Community Agencies** - Schools alone cannot meet all the needs of students and families. Blended funding resources could support the needed development of behavioral health partnerships between school districts and local behavioral health agencies to expand access and capacity of schools to better address student needs.

The BIRCh Project

Authors and Contact Information

The research brief has been created by the Behavioral health Integrated Resources for Children Project (BIRCh Project). The mission of the BIRCh Project is to provide professional development and resources for schools and strengthen the coordination of behavioral health supports provided by school and community agencies. It represents a collaboration between the University of Massachusetts Boston and the University of Massachusetts Amherst and is funded by Boston Children's Hospital. More information is available at www.umb.edu/birch (you can scan the QR code below), or contact us at [Birch.project@umb.edu](mailto:birch.project@umb.edu)



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