SCHOOL-BASED HEALTH ALLIANCE
The National Voice for School-Based Health Care

Integrated Mental Health

March 27th, 2025

12pm Eastern Standard Time

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School-Based Health Alliance
Transforming Health Care for Students

Our **Focus**
The School-Based Health Alliance Works to Support & Grow SBHCs

Policy	Standards	Data	Training
Establishes and advocates for national policy priorities	Promotes high-quality clinical practices and standards, including for telehealth	Supports data collection and reporting, evaluation, and research	Provides training, technical assistance, and consultation

We support the improvement of students' health via school-based health care by supporting and creating community and school partnerships.

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REMINDERS

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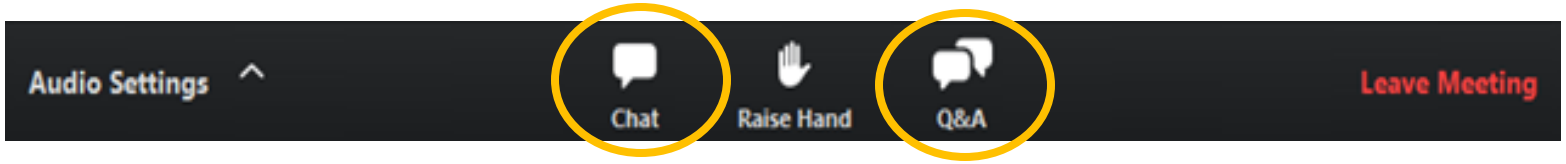
- All attendees are in listen-only mode.
- To ask a question during the session, use the “Chat” or “Q&A” icon that appears at the bottom of your Zoom control panel.



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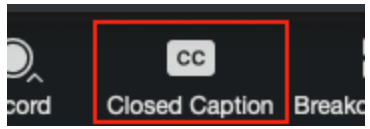

- Please complete evaluation poll questions at the end of the presentation.
- The recording, slides, and resources will be shared via email.

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Learning objectives

Participants will be able to…

1. Describe the role of integrated mental health in health centers, school-based health centers, and schools, including key components and benefits.
2. Use case study examples to identify best practices and address challenges in implementing integrated mental health approaches.
3. Learn, explore, and apply strategies from key resources, including the School Nurse Mental Health Toolkit and PMHCA programs, to strengthen mental health support in health centers and school settings.

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Today's Speakers

Addie Van Zwoll
Director
School-Based
Health Alliance

Donnie Greco
Associate
School-Based
Health Alliance

Joanna Pitts
BSN, RN, NCSN, CNOR
School Health Nurse
Consultant
VA Department of Health

Jennifer Bliven
BSN, RNC-OB, NCSN, MPA, MBA
Secretary
Virginia Association of School Nurses

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Definitions

Integrated mental health, often referred to as integrated behavioral health, involves the systematic coordination of mental health, substance use, and primary care services. In this model, medical and behavioral health clinicians collaborate within primary care settings to address students' comprehensive needs, which encompass mental health conditions, health behaviors, life stressors, and stress-related physical symptoms.

Integrated mental health has also been called “behavioral health integration,” “integrated care,” “collaborative care,” or “primary care behavioral health—**what terms have you heard?**

Source: https://integrationacademy.ahrq.gov/about/integrated-behavioral-health

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Key Differences in Traditional vs. Integrated Mental Health

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Aspect	Traditional Behavioral Health Services	Integrated Mental Health Services
Service Delivery	Behavioral health and primary care services operate independently, often in separate locations.	Behavioral health and primary care services are co-located or fully integrated within the same setting.
Communication	Limited interaction between primary care providers and behavioral health specialists.	Regular, collaborative communication among a multidisciplinary care team.
Care Coordination	Patients are responsible for navigating referrals and appointments between providers.	Seamless coordination with shared treatment plans and immediate referrals within the same system.
Access to Care	Potential delays in receiving behavioral health services due to separate scheduling and locations.	Improved access with the ability to address behavioral health needs during primary care visits.
Patient Experience	Patients may feel stigmatized seeking separate behavioral health services.	Reduced stigma as behavioral health is part of routine medical care.
Outcomes	Fragmented care can lead to unmet behavioral health needs and poorer health outcomes.	Integrated care has been associated with improved health outcomes and patient satisfaction.

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Importance of Integrated Care in Health Centers & SBHCs

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- Improved Communication
- Improved Access to Care
- Early Identification and Intervention
- Holistic Care Approach
- Enhanced Academic Performance
- School & Community Partnerships

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Strong partnerships with committed and accountable partners result in high-performing SBHCs that meet the needs of students, increase coordination of care, have greater community support, and are grounded in sustainable resources.

School(s)

SBHC sponsor(s)

Local healthcare providers

Students & families

Community organizations

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Strengthening School + Health Partnerships

Health sponsors can …

- Get to know their school colleagues. Ask about their roles and needs
- Sponsor a welcome breakfast for school staff
- Offer staff wellness activities
- Collaborate with teachers on health education lessons
- Be present at lunchtime, drop off and pick up, after school events, etc.

School partners can …

- Visit the SBHC
- Participate in feedback opportunities offered by the health sponsor
- Collaborate with SBHC staff on health education lessons

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Common Models of Integrated Care in Primary Care Settings

Primary Care Behavioral Health (PCBH)

The Primary Care Behavioral Health (PCBH) Model is an integrated, population-based approach that embeds Behavioral Health Providers (BHPs) into primary care settings, including pediatric practices.

- Fully integrated
- Consultative role
- Stepped-care approach
- Whole-person care
- Helps to address mild-to-moderate mental health concerns within primary care settings.

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Common Models of Integrated Care in Primary Care Settings

Collaborative Care Model (CoCM)

The Collaborative Care Model (CoCM) is an evidence-based, team-driven model for managing more complex mental health conditions in primary care. It relies on a structured, measurement-based approach to treating conditions like major depression, anxiety, and PTSD.

- Dedicated behavioral care manager
- Psychiatric consultation
- Measurement-based care
- Systematic case reviews
- Helps to address moderate to severe mental health concerns who need ongoing treatment and monitoring

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What models are you using for integrating mental health in your health centers?

Please log on to Menti.com and enter code: 2537 9825

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General Considerations for SBHCs Providing MH/BH Services

- **Mental Health services provided in school can vary greatly**. Every SBHC has different modalities, positions, resources, and relationships.
- Co-locating behavioral health care services within the primary care SBHC services can help lower barriers to care access.
- Annual Current Procedural Terminology (CPT) and International Classification of Diseases code updates, as well as staff training, will need to be done to ensure that MH/BH services are being reimbursed properly.
  - Outreach may be required to get state Medicaid office to activate/turn on substance use services codes.
  - Some state Medicaid programs have opened **collaborative care model codes (CoCM)** for nonclinical staff billing under credentialed providers.

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SBHC Models & Staffing for BH/MH Services

Staffing for 1 SBHC in Midwest

- 1 full-time equivalent (FTE) Licensed Clinical Social Worker (LCSW) Manager
- 2 FTE Licensed Social Workers (LSWs)
- 1 part-time psychiatrist

Staffing for 3 SBHCs in Pacific Northwest

- 2 FTE Master's-level clinicians
- 1 FTE Bachelor's- level clinician (working on Master's degree)
- Access to psychiatric services and consult line

Staffing for 5 SBHCs in Southeast

- 3 FTE school MH providers (split among 5 schools)
- 1 FTE clinical supervisor

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Common MH/BH Services in SBHCs*

- Individual, group, and family therapy
- Substance use prevention, intervention, and treatment
- Crisis response and intervention
- Case management
- Classroom health education
- Universal screening (in and out of the SBHC)
- Psychiatric evaluation and medication management

*services available in SBHCs varies greatly throughout the country

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Standard Framework for Levels of Integrated Healthcare

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Key Levels of Integration

1. **Minimal Collaboration** – Separate systems with limited communication.
2. **Basic Collaboration at a Distance** – Some communication, but still functionally separate.
3. **Basic Collaboration On-Site** – Physical co-location but separate workflows.
4. **Close Collaboration in Partly Integrated System** – Increased communication, some shared treatment planning.
5. **Close Collaboration in Fully Integrated System** – Shared decision-making and joint treatment teams.
6. **Full Collaboration in a Transformed/Merged System** – Seamless integration with one team and shared systems.

Source: SAMHSA-HRSA Center for Integrated Health Solutions (CIHS), 2013

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Comprehensive Health Integration (CHI) Framework

Self-Assessment Tool for Improving Integration

8 Domains

- Screening, referrals, and follow up
- Integrated prevention and treatment
- Ongoing care coordinator
- Personalized self-management support
- Interdisciplinary teamwork
- Systematic quality improvement
- Community interventions to address social influencers of health
- Financial and Administrative sustainability

3 Stages of Integration

- Historical Practice (Baseline-Stage 0)
- Screening & Enhanced Referral (Stage 1)
- Care Management & Consultation (Stage 2)
- Comprehensive Treatment & Population Management (Stage 3)

Source: https://www.thenationalcouncil.org/resources/the-comprehensive-health-integration-framework/

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Strategies for Collaboration & Partnerships

Health Providers, Educators, Students, & Families

1. Build Strong Communication Channels
2. Establish Formal Agreements & Policies
3. Increase Student, Family, & Caregiver Engagement
4. Expand Access through Integrated Care Models
5. Leverage Funding & Sustainability

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What are some ways you collaborate with internal and external partners?

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What is a PMHCA?

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A state level program developed in response to children's mental health crisis and shortage of child psychiatrists

- Designed to increase workforce capacity of primary care providers to make early identification, diagnosis, treatment, and referral of mental health conditions a routine part of children's health care.
- Programs consist of small teams, including a child psychiatrist, that provide:

Tele-consultation
through an established statewide phone line to pediatric primary care providers

Training and Education
to providers through ECHOS and web-based trainings

Resources and Referrals
to providers, families, and community members

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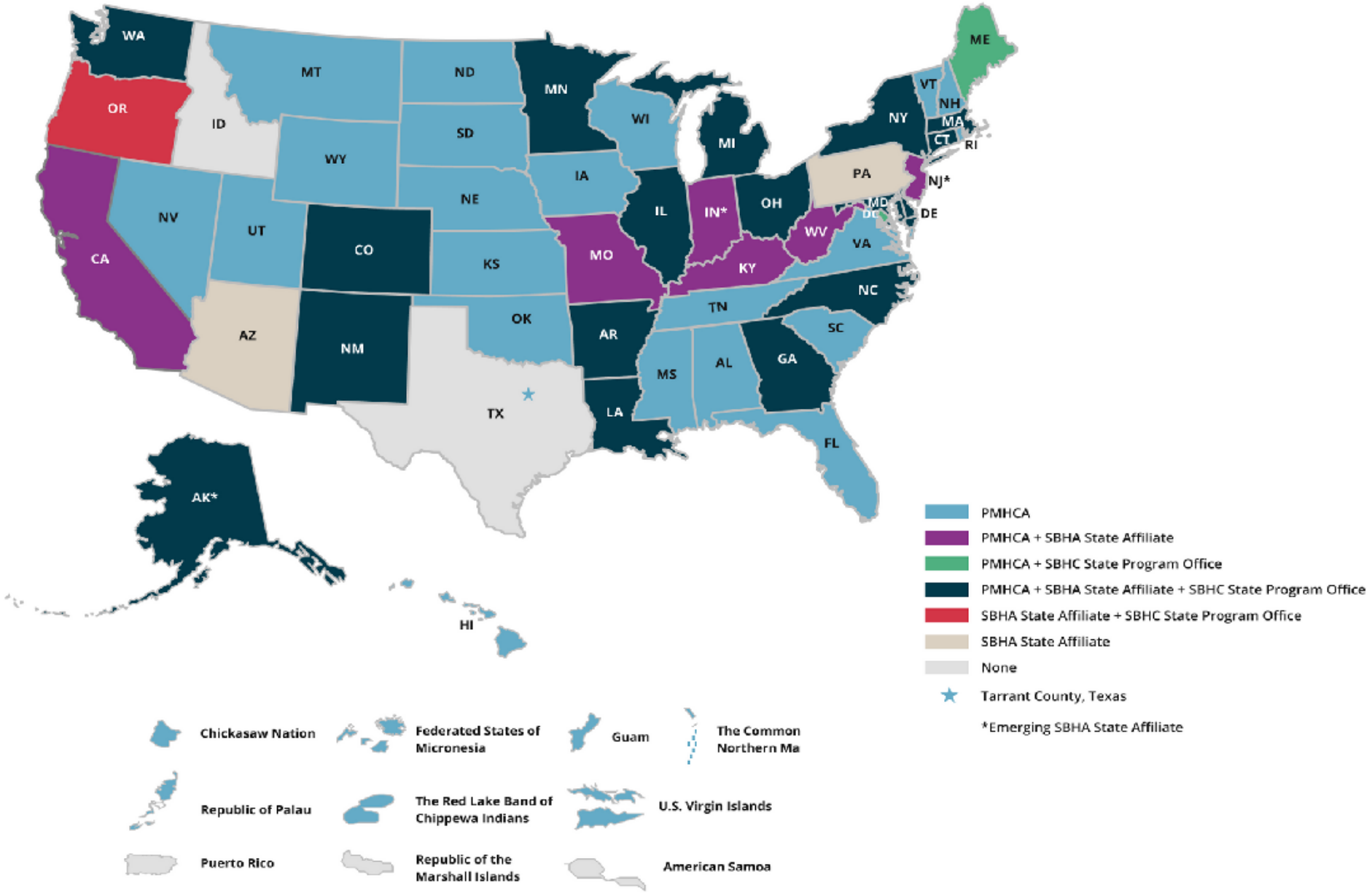
Pediatric Mental Health Care Access Network and School-Based Health Care



Note: PMHCA programs were identified by the HRSA Map.

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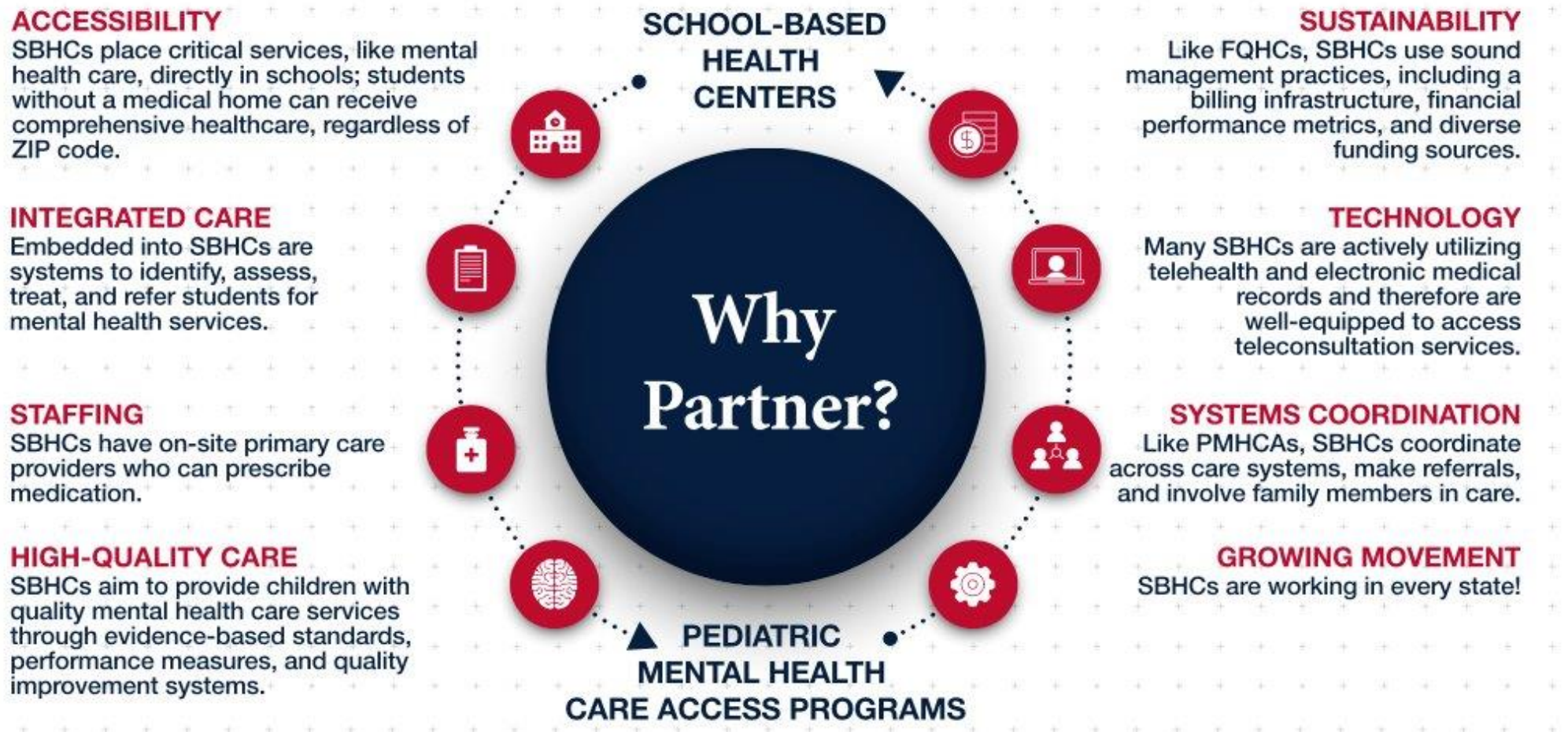
Pediatric Mental Health Care Access Programs



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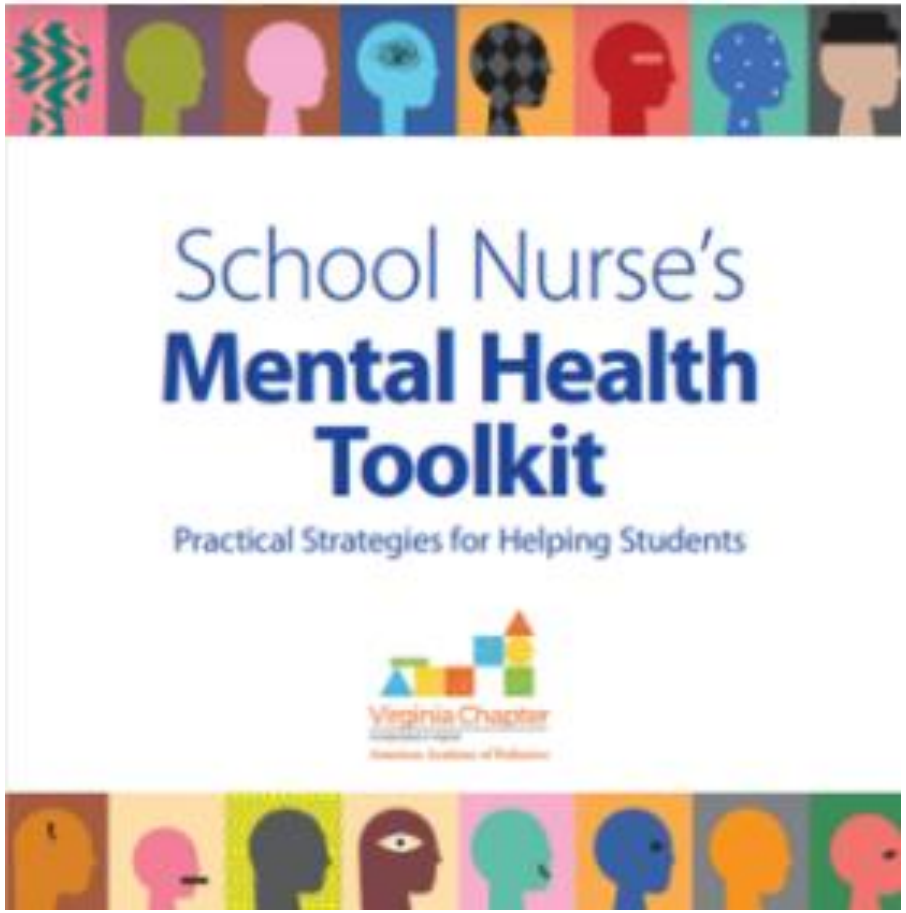
The Mental Health Toolkit

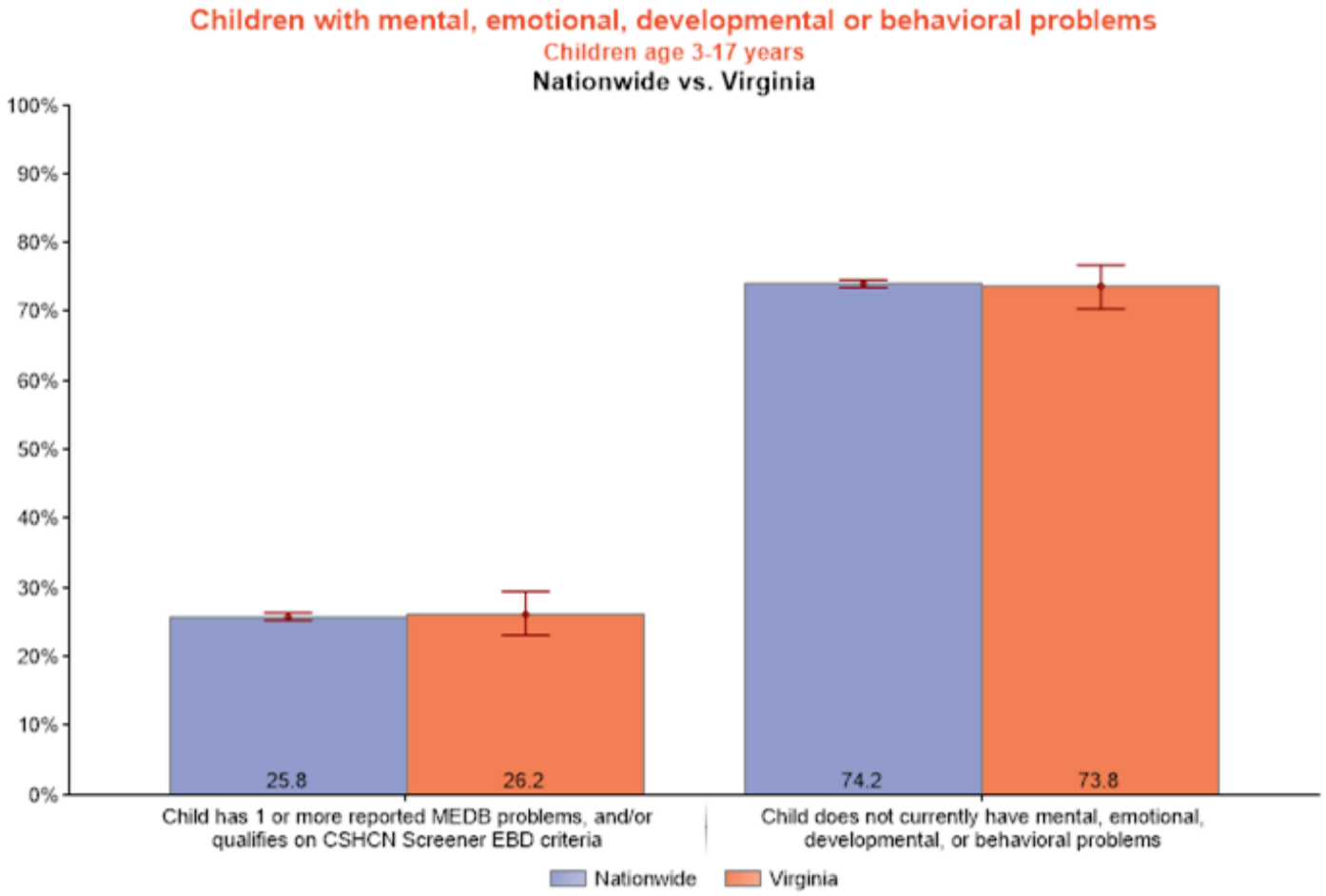


Joanna Pitts, BSN, RN, NCSN, CNOR
School Health Nurse Consultant
Virginia Department of Health

VIRGINIA ASSOCIATION OF SCHOOL NURSES

Virginia Association of School Nurses

Jennifer Bliven, BSN, RN, RNC-OB, NCSN, MBA, MPA



[National Survey of Children's Health 2022-2023: Children with mental, emotional, developmental or behavioral problems, Nationwide vs. Virginia]

Data Source: National Survey of Children's Health, Health Resources and Services Administration, Maternal and Child Health Bureau. https://mchb.hrsa.gov/data/national-surveys

Citation: Child and Adolescent Health Measurement Initiative. 2022-2023 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [mm/dd/yy] from [www.childhealthdata.org].

VDH VIRGINIA DEPARTMENT OF HEALTH

How Did We Get Started?

Elevating the Role of School Nurses in School-Based Mental and Behavioral Health

A Consensus Document (NASN, 2023)

June 2023

NASN National Association of School Nurses

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Who Participated?

17

school nurses from across the US

18

nationally recognized organizations

- American Academy of Pediatrics
- National Education Association

4

representatives from Virginia

- Angela Knupp, BSN, RN
- Karen Mask, RN, BSN, MPH
- Joanna Pitts, BSN, RN, NCSN, CNOR
- Heather Pugh, BSN, RN

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School Nurse's
Mental Health Toolkit

Practical Strategies for Helping Students

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Anxiety

Signs of Anxiety

Academic signs:

- Frequent trips to the nurse.
- Leaving school early or arriving late.
- Skipping school activities (e.g., gym, lunch, or recess).
- Excessive absenteeism.
- Sleeping in class.

Student might report:

- Physical complaints (stomach aches, headaches, chest pain, racing heart, trouble breathing, feeling dizzy).
- Excessive worry or fears.
- Trouble concentrating.
- Feeling afraid as if something awful might happen.
- Trouble sleeping.

Signs others might see:

- Restlessness.
- Irritability or acting out.
- Using marijuana or other drugs to ease distress.
- Change in participation in normal activities.
- Not wanting to engage with friends or activities.

Gather information without judgment. Be curious.

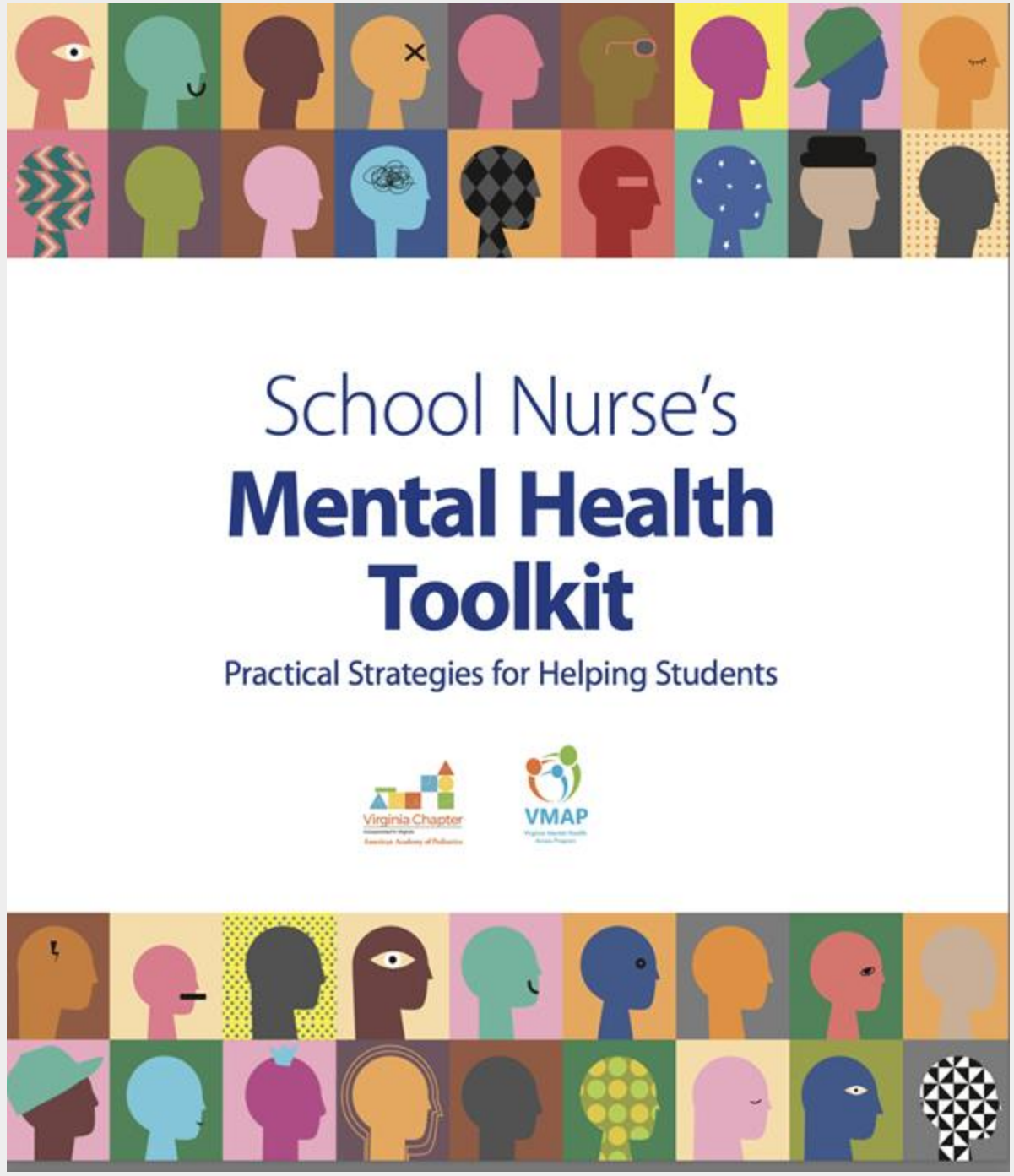
- Do you know why you're feeling worried?
- What challenges are you having at home or school?
- How are your worries affecting your sleep and concentration?
- How do your worries make it hard to do what you normally do?
- How often does this happen?

- Explain anxiety. Let the student know that everyone gets anxious. Anxiety is helpful when there is a real danger or true alarm. Sometimes, we get a false alarm and overestimate the threat.

Where to find the toolkit

Virginia schools can order a copy of the toolkit for their health clinic or download a digital copy from the VDH School Health webpage: VDH.Virginia.gov/school-age-health-and-forms/school-health-guidelines-and-resources/.

Download a digital copy and learn more about the Virginia Chapter of the American Academy of Pediatrics: VirginiaPediatrics.org/school-nurse-toolkit/



Coping and Relaxation Strategies

Muscle Relaxation Technique

Progressive Muscle Relaxation or "Body Scan"

When we are anxious our bodies respond with muscle tension. Progressive muscle relaxation reduces muscle tension and associated anxiety.

- Tense muscles first – from head to toe – and then release. This allows easier letting go of muscle tension all over the body.
- This can be done without others noticing, even while in class.
- Squeeze fists as tight as you can (under desk or in pockets) for 10 seconds, then release.
- Squeeze knees together as tight as you can (under desk) for 10 seconds, then release.

For video demo, visit Strong4Life.com/en/emotional-wellness/coping/practicing-progressive-muscle-relaxation or scan the code.

For video demo for older children, visit YouTube.com/watch?v=8Xp2UzG7UYY or scan the code.

Muscle Relaxation for Young Children

Resources

Always call 911 for any emergency or when safety is at risk.

988 SUICIDE & CRISIS LIFELINE

Help them connect.
Always follow your school's crisis protocols.
Call or text 24/7.
988 for the Suicide & Crisis Lifeline.

To text 988 in Spanish, type "Ayuda" to connect with a Spanish-speaking counselor. For people who speak other languages, call 988 for translation in 240+ languages. This is available 24/7 through voice calling only.

Resources

Suicide

The Steve Fund Crisis Text Line: Text HOME to 741741; and text STEVE to 741741 if a young person of color, for a trained crisis counselor, 24/7.

Suicide Hotline: 1 (800) 273-TALK (8255)

Self-harm

Young Minds UK - Self-Help Guide for Teens Who Self-Harm video
YoungMinds.org.uk/young-person/my-feelings/self-harm/#Whatisselfharm

Nip in the Bud - Learning about Children's Mental Health through Film self-harm resources and videos
Nipinthebud.org/films-parents-category/self-harm/

The Cornell Research Program on Self-Injury and Recovery -
The Non-Suicidal Self-Injury Assessment Tool - Selfinjury.bctr.cornell.edu/perch/resources/fnssi.pdf
Developing and Implementing School Protocol for Non-Suicidal Self-Injury in School - Selfinjury.bctr.cornell.edu/documents/schools.pdf

Educators and Self-Injury: Manual for understanding and aiding students who self-injure.
EducatorsandSelfInjury.com/self%20injury-protocol/

Depression

MindDoc: Mental Health Support- App Download CBT Mood tracker, journal, symptom screener for anxiety and depression. Can also be used with sleep disorders, eating disorders, postpartum depression, and various phobias. 10-question assessment directs user to learning modules. Ages 12+, free with in-app purchases, available for download in the Apple App Store and the Google Play Store.

Self Help Toons - SelfHelpToons.com Free animated self-help video courses about therapy and mental health.

Boston's Children's Hospital Guided Self-Management Tools for Depression in Children Ages 6-12. Scan the code.

The ABCs of CBT: Thoughts, Feelings, and Behavior Triangle Cognitive behavior therapy video.
YouTube.com/watch?v=Stw9P38ePYI

Anger

They Are The Future: Anger Thermometer Worksheet Pack - Free printable anger thermometer and parent guide
Theyarethefuture.co.uk/wp-content/uploads/2023/03/Free-Printable-Anger-Thermometer-Worksheets.pdf

Cookie Monster Practices Self Regulation by Life Kit Parenting and NPR - Video about practicing self control.
YouTube.com/watch?v=j0YDE8_jsHk

Mental Health Center for Kids: Videos on anger management for kids.
Anger Iceberg Activity - YouTube.com/watch?v=AQfQCOY_Im0
Strategies to Calm Down When Your Temper Rises - YouTube.com/watch?v=bxpDf45TPA

Sesame Workshop Handling Angry Feelings for Kids Anger management video. SesameWorkshop.org/resources/handling-angry-feelings/

Panic/Anxiety

Rootd: Panic Attacks & Anxiety - App Download Panic Attack and Anxiety Relief tool. Free with in-app purchases. Available for download in the Apple App Store and the Google Play Store.

Kids Helpline Brain Basics: Panic attack informational video series for kids. YouTube.com/watch?v=geoiskj4aUE

Mindshift CBT- Anxiety Relief App Download Anxiety and stress tools that include fear ladders, goal-setting tool; CBT to reduce worry, stress, panic. From Anxiety Canada. Ages 12+, available for free download in the Apple App Store and the Google Play Store.

Anxiety Canada - AnxietyCanada.com
Free downloadable resources and tools for anxiety.

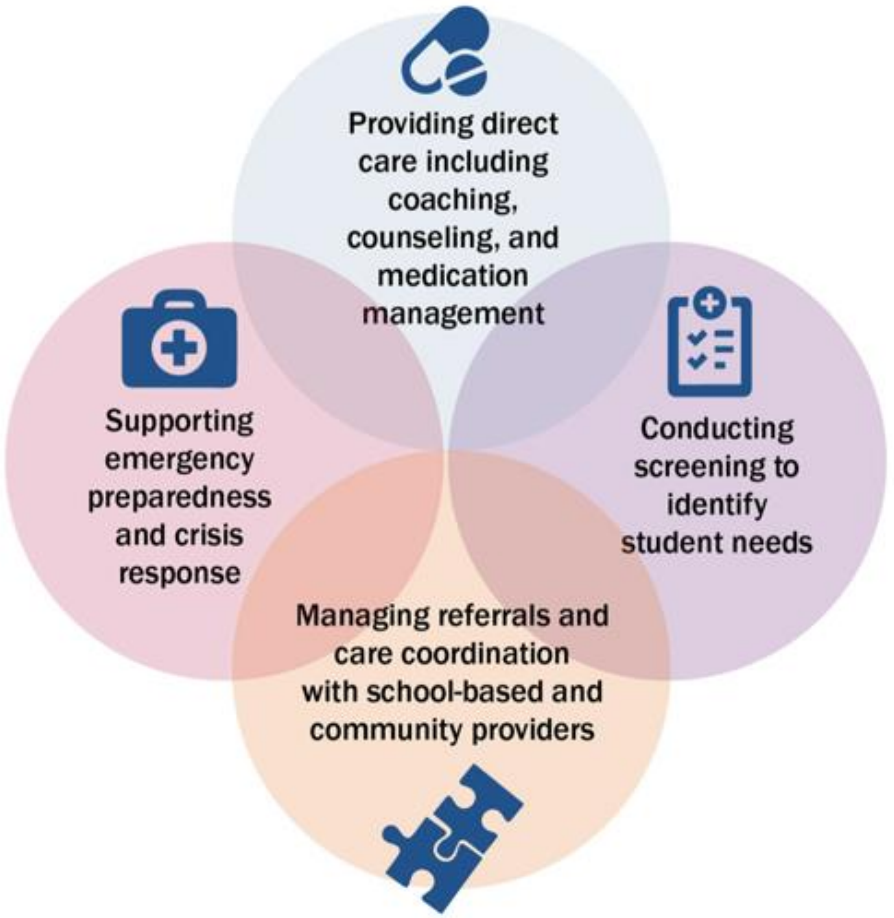
Fight Flight Freeze - A Guide to Anxiety for Kids video: Scan the code.
Fight Flight Freeze - A Guide to Anxiety for Teens video. Scan the code.

Boston Children's Hospital - Managing Anxiety in Childhood and Adolescence: Information and resource guide for parents and caregivers.
ChildrensHospital.org/sites/default/files/2023-04/bchnp-managing-anxiety-booklet.pdf

Child Mind Institute - ChildMind.org/topics/anxiety/ Resources for caregivers to support kids with anxiety.

“I am so thankful for the support of school nurses and the new mental health toolkit, as we engage in the importance of student physical and mental health.”

Dr. Lisa Coons
State Superintendent
Virginia Department of Education



Infographic courtesy of NASN

THANK YOU!

Case Study

University-Sponsored SBHC in Urban Midwest

Clinician's Office

Calm Room

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University-Sponsored SBHC Background

- **University-Sponsored** - Funded by federal and state grants and private foundation grants
- **Opened** in 2001
- **Located:** Urban Midwest (one location)
- **Services Provided** - Comprehensive Medical, Mental/Behavioral Health and Nutrition Services
    - Behavioral health services include individual and group therapy; psychiatric evaluation, consultation, and medication management.
    - Minor consent law in the state allows students to receive mental and behavioral services without parental/guardian consent for up to eight, 90-minute sessions.

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Model (comprehensive)	Staffing	Credentialing
Tier 1: • Health Education • Universal screening (PHQ9, S2BI) • Crisis response/ postvention - *supported by both medical and behavioral health* **Tier 2:** • Small groups • Calm room • Alternative suspension programming **Tier 3**: • Individual and group therapy (short and long-term) • Psychiatric evaluations • Medication management • Crisis intervention	**Medical Team:** • 2 Family Nurse Practitioner • 2 Physicians • 1 Registered Dietician • 1 Project Director • 1 Medical Assistant/office manager **MH/BH Team** • 1 LCSW/Manager of BH • 2 LSWs • 1 Child & Adolescent Psychiatrist Collaboration between medical and MH/BH teams for medication management (E.g. Morning huddles between LSWs and NPs)	**Medical Services:** • Nurse Practitioners required collaborating physicians credentialed through the university hospital. **MH/BH SBHC Services:** • Manager of Behavioral Health supervised LSWs. • Licensed through the state • MD-Psychiatrist credentialed through hospital system

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Innovative Approaches and Services

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Calm Room	• Safe, alternative space to the cafeteria for all students • Run by school and SBHC social workers & public health students
Suicide Prevention	• Signs of Suicide (SOS) training for staff • In-person mental health stigma reduction & awareness presentation for students • Suicide Prevention Week & Month School-Wide Activities
Alternative to Suspension Afterschool Program	• 3-days of anger management, conflict resolution, social-emotional learning • Received lots of individual therapy requests after – **Built trust with students**
In-School Suspension Program: Social-Emotional Learning	• Student reflection form to build in SEL learning • SBHC MH/BH staff provided info to students - stress management, life skills, healthy relationships - **Built trust with students**

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Mental and Behavioral Health Partnership with School

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School Facilities & Support Provided

- SBHC Office
- Calm Room space

PC/BH Partnership

SBHC MH/BH staff and primary care staff worked hard to:

- Communicate daily about student needs
- Implement warm handoffs
- Conduct regular case reviews
- Shared decision making

MH/BH SBHC staff joined school-related committees/teams:

- Crisis Team
- Multi-tiered System of Support (MTSS) Team
- Reintegration Team - for students returning from hospitalization or suspension

School Social Worker Partnerships

SBHC MH/BH staff and School Social Workers worked closely to:

- Ensure appropriate support & delivery of services
- Streamline referral processes
- Collaborate ongoingly on student wellbeing

Staff Health Education

Offered school staff lunch & learns on topics such as:

- Identifying mental health issues
- Healing Centered Care
- Staff Mental Health

Classroom Partnership

Mental health and social-emotional learning lessons in classes including:

- Human Development
- Health
- Driver's Education

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Questions?

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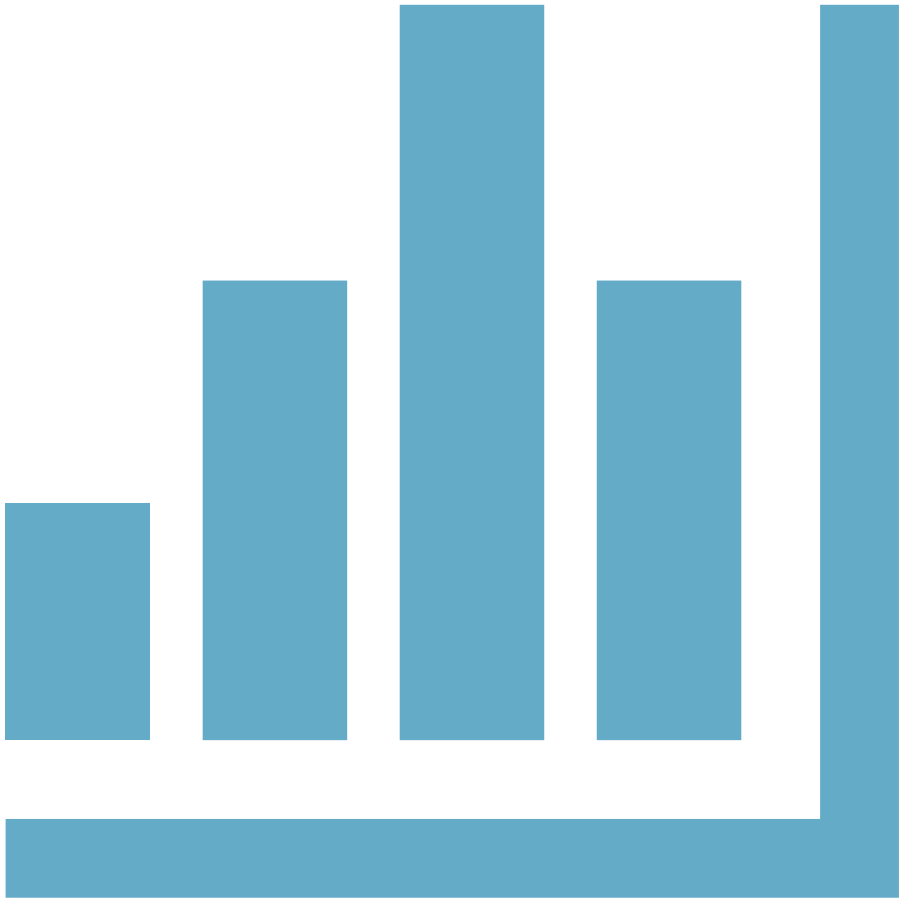
We look forward to your feedback.

Please complete our Zoom poll.



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Visit SBHA's Website For More Resources

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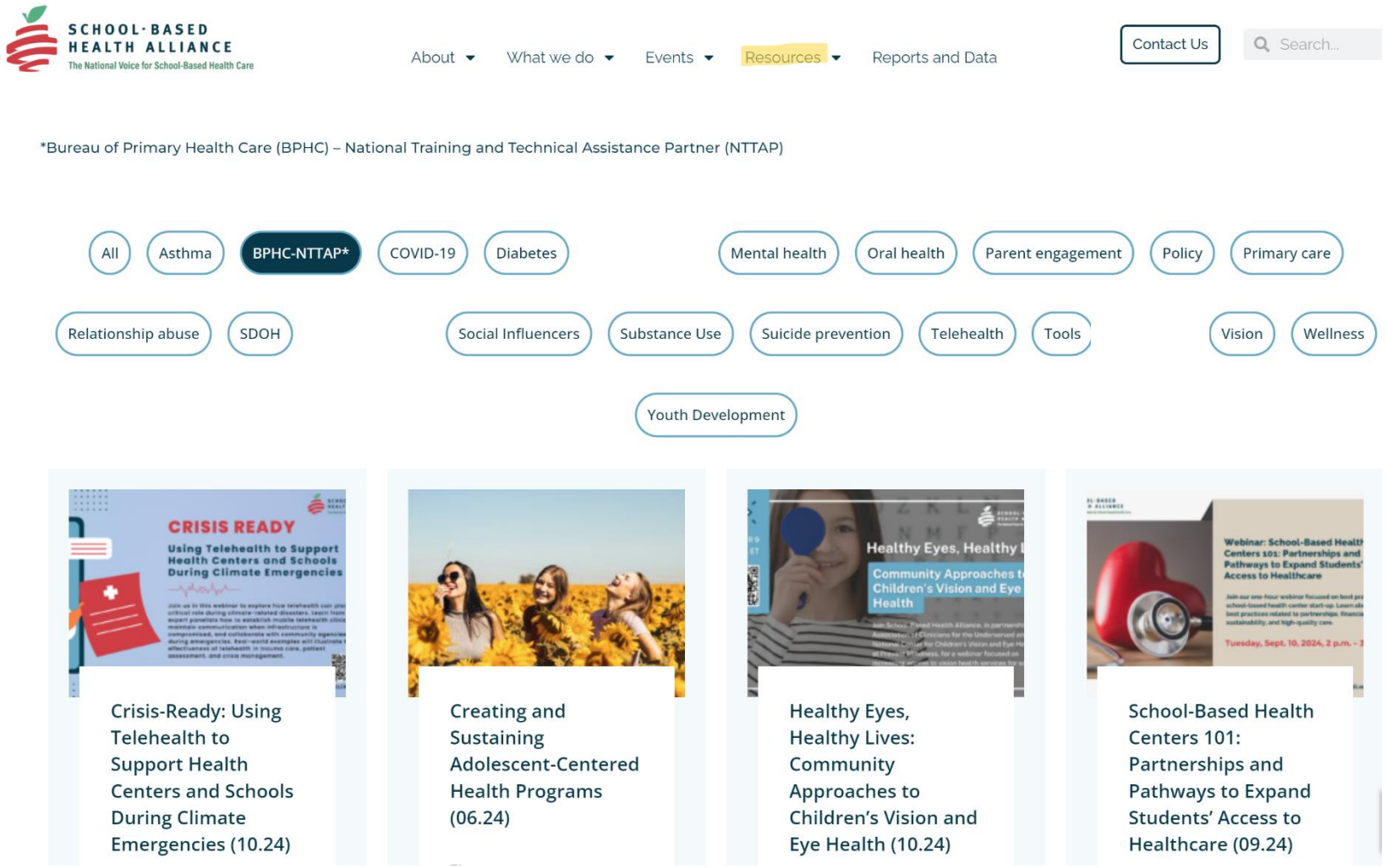

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Resources

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E-Library

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SCHOOL-BASED HEALTH ALLIANCE
The National Voice for School-Based Health Care

2025 National School-Based Health Care Conference

June 29 - July 1, 2025

Westin Washington, DC Downtown Hotel (formerly the Renaissance Downtown Hotel) in Washington, D.C

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