

EDUCATION

THE UTAH STATE BOARD OF EDUCATION
Report to the Education Interim Committee

Student Health and Counseling Program Report

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Student Health and Counseling Program Report

EXECUTIVE SUMMARY

The Student Health and Counseling program was created by legislation during the 2019 General Session, HB373, to deliver targeted school-based mental health support. Its scope includes clinical services and trauma-informed care, provided through hiring or contracting qualifying personnel or offering telehealth options. The program is regulated under Utah Code 53F-2-415 and State Board Rule R277-622. The legislature has appropriated \$24,000,000 for the program in 2025, however, prior to that the allocation was \$26,000,00.00.

This program helps facilitate initiatives in educational environments, encompassing both prevention and promotion measures, as well as initiatives for mental health service delivery and referral pathways to community mental health partners. “Qualifying personnel” refers to licensed school counselors or other counselors, school psychologists or other psychologists, school social workers or other social workers, or school nurses who collaborate with educators and a student's parent on:

- Early identification and intervention addressing a student's academic and mental health needs; and
- Removing barriers to learning and supporting development of skills and behaviors necessary for the student's academic achievement.

The funding provided through this program is intended to support a wide range of mental health initiatives within schools. Qualifying personnel have varying scopes of practice and deliver different mental health supports and services according to their professional training. Some professionals are trained to provide therapeutic services, while others provide other mental health supports. Qualifying personnel such as school counselors, social workers, psychologists, and nurses work to identify and address students' mental health needs, with an emphasis on prevention, early intervention, and connecting students to appropriate resources. The program emphasizes fostering a supportive educational environment and building systems of care, not just the direct delivery of clinical therapy.

MENTAL HEALTH IMPLEMENTATION PLAN

To qualify for funds under this section, a Local Education Agency (LEA) shall submit to the state board a three-year plan that includes:

- Measurable goals approved by the LEA governing board on improving student safety, engagement, school climate, or academic achievement.
- How the LEA intends to meet the goals through qualifying personnel services.

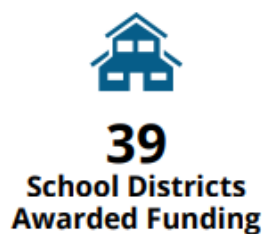
A critical aspect of this program is ensuring that each LEA’s goals are closely aligned with the specific requirements and intent of the grant. Funding is dedicated to hiring or contracting with qualifying personnel whose services directly contribute to measurable improvements in student safety, engagement, school climate, and academic achievement. Grant goals include provisions for mental health support, as well as targeted outcomes tailored to individual LEAs, such as increased attendance, enhanced academic performance, and a reduction in safety-related incidents.

Originally, LEAs were required to match the state allocation using local or unrestricted state money. In the 2020 General Session, House Bill (HB) 373 removed the matching requirement for any LEAs who applied for the grant after April 1, 2020. Because LEAs had their plans approved for three years, some LEAs continued to match funds until the end of FY22. The matching requirement was removed completely from Statute in the 2023 General Session with HB 411.

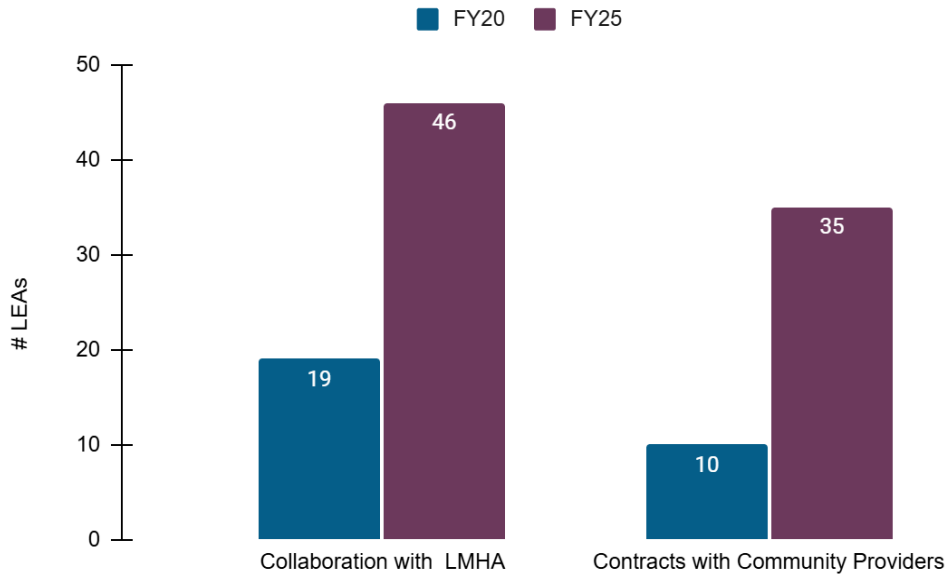
MENTAL HEALTH PERFORMANCE METRICS

This grant has allowed many LEAs to increase collaboration and contracts with community partners. While data prior to the grant about how many LEAs were collaborating with their Local Mental Health Authority or contracting with community mental health partners is not available, the graph below illustrates that there is evidence from the program’s inception till present date that there has been an increase in collaboration and contracts. It is important to note that we also had an increase in LEAs participating in this grant from 2020 to 2025. Some LEAs have indicated that they have reached out to their LMHA and have been told they do not have the capacity to support them.

Grant Funding FY 24

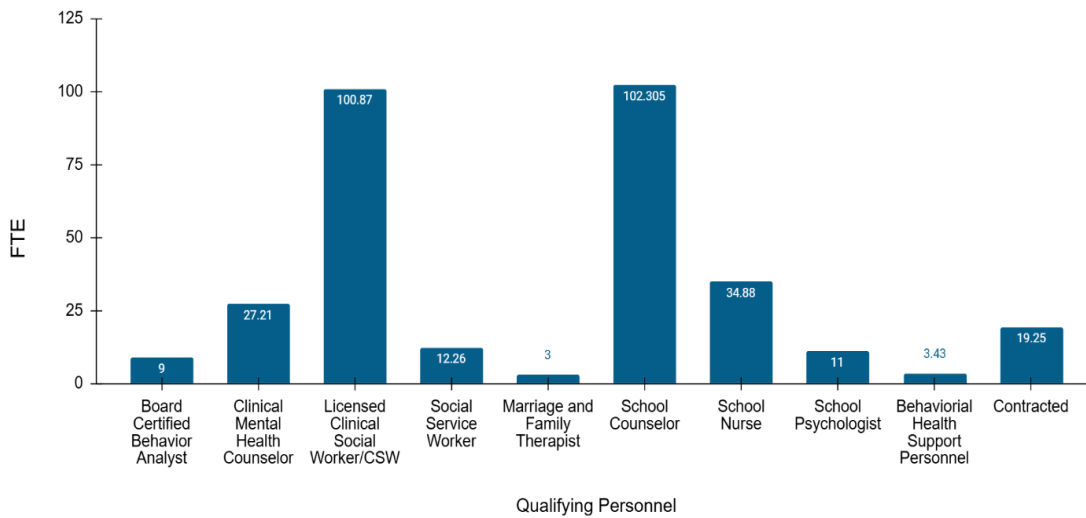


LEAs Increase in Collaboration and Contracts

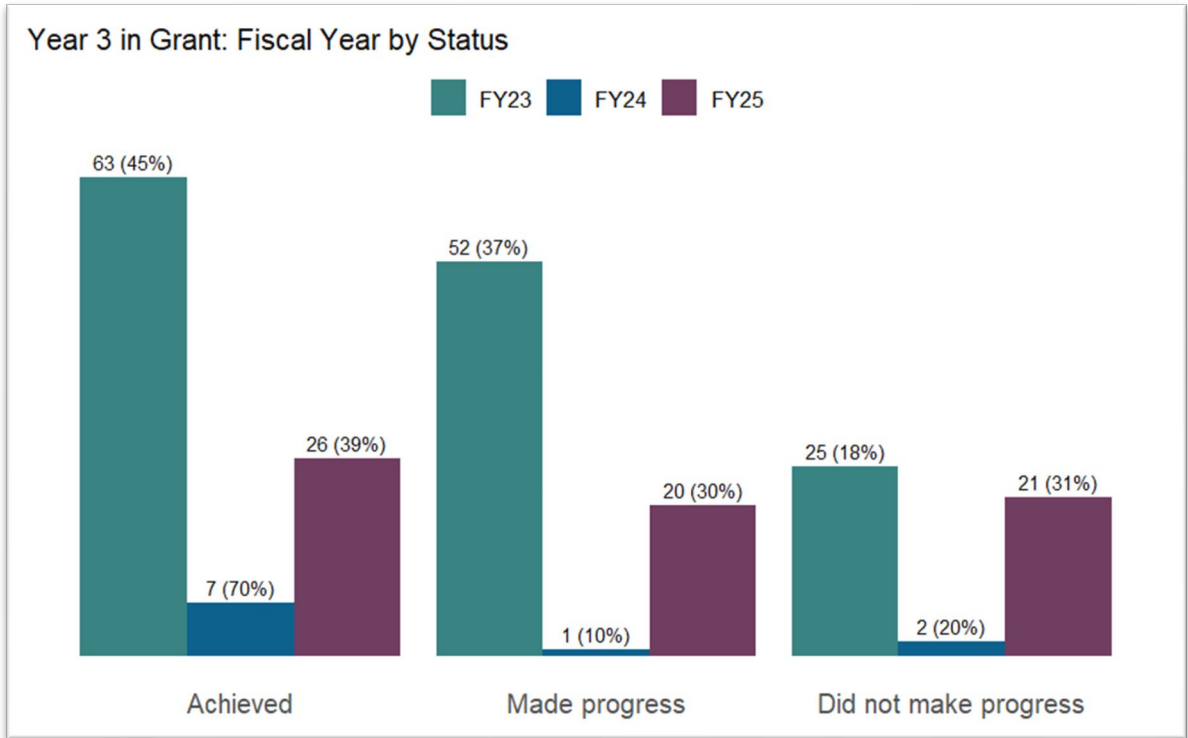


The graph below illustrates the type of personnel LEAs hired and the number of FTE in each category of qualifying personnel. Contracted personnel are not separated by type, but it is important to be aware that all contracted personnel is verified to fall under the qualifying personnel requirements.

FY 2024 Qualifying Personnel Hired or Contracted FTE

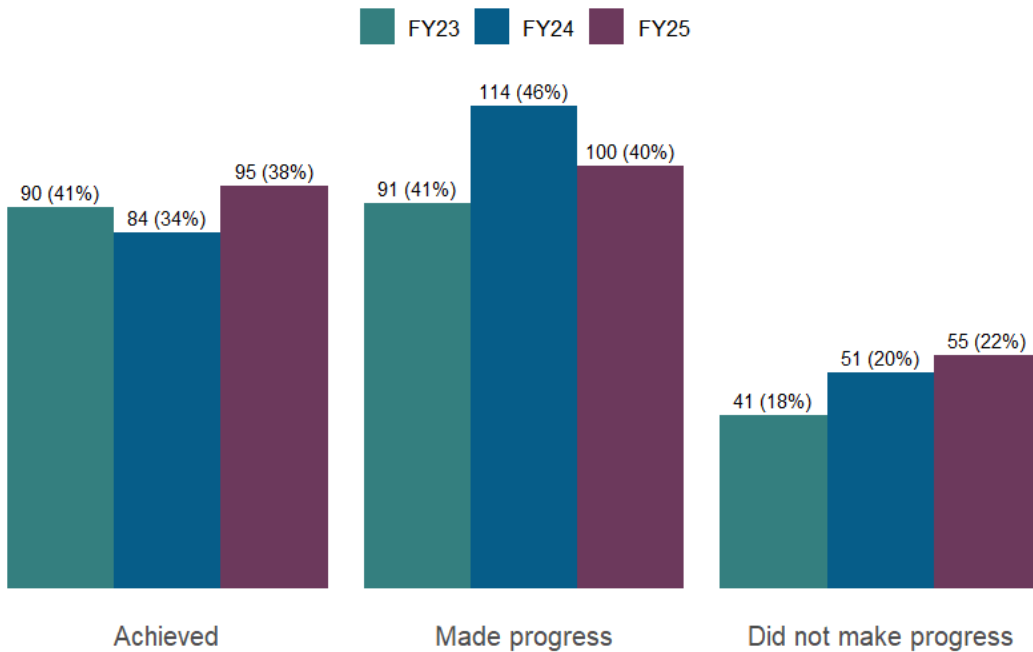


LEAs are grouped into three-year cohorts, with new applications accepted annually. Each LEA is at a different stage in its cycle based on its initial application year. The graph below shows how many LEAs achieved their goals by the end of their three-year plan.



The graph below displays the reported progress for all LEAs, regardless of their current cohort. It includes progress data from both second- and third-year LEAs, whether they are in the middle or at the end of their three-year cycle.

Fiscal Year by Status



This program has allowed LEAs to increase their qualifying personnel. However, with rising inflation and hiring costs, the number of qualified staff may start to decrease.

The Student Health and Counseling Program likely contributed to improving school-based mental health professional ratios, but it is not the only funding source affecting these ratios.

FY19 Ratios	FY25 Ratios
School Counselors (grades 7-12) 1:377	School Counselors (grades 7-12) 1:288
School Social Workers 1:3926	School Social Workers 1:3002
School Psychologists 1:2234	School Psychologists 1:2206
School Nurses 1:3595	School Nurses 1:2318

SUMMARY

The Student Health and Counseling program has played a significant role in strengthening LEA partnerships with community mental health providers and increasing the number of qualifying personnel in schools. While the evolution of funding requirements has eased local burdens and empowered sustainable progress, ongoing challenges such as inflation and workforce capacity may impact continued growth. Continued monitoring and adaptive support will be essential to ensure the program’s long-term effectiveness in supporting student well-being.