Behavior Landscape Analysis
Utah State Board of Education

Public Consulting Group

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ACKNOWLEDGEMENTS

ABOUT PUBLIC CONSULTING GROUP LLC

Public Consulting Group LLC (PCG) is a management consulting firm that offers technical assistance, strategic planning, professional development, financial management, systems development, and other management advisory services to public sector clients. Established in 1986, PCG has consistently delivered on its motto of "Solutions that Matter." Our education practice is committed to helping schools, school districts, and state education agencies strengthen their performance, streamline their operations, and improve their programs and instruction so that all students have what they need to succeed.

ABOUT MOSAKOWSKI INSTITUTE

PCG partnered with the Mosakowski Institute for Public Enterprise at Clark University, whose mission is to innovate in the creation and delivery of evidence-based behavioral health tools and services that are responsive to the needs of youth and families in a way that advances research, policy and practice in the field of youth mental health.

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EDUCATION IN UTAH

Utah serves approximately 668,000 students and nearly 40,000 educators across over 1,000 schools, within 157 district and charter local education agencies (LEAs).[1,2] Of those LEAs, 41 are school districts and 116 are charters. Over the past four years, Utah has seen their public-school enrollment decline by 1.2% while charter school enrollment has increased by 2%.[3]

Over the past ten years, Utah's student population has seen drastic changes in terms of its demographic composition.

- Since 2014, the percentage of students identifying as English learners has nearly doubled, rising from 5.6% to 9.2%.[4]
- The percentage of students with disabilities has increased from 10.9% to 13.2% over that same period.[5]
- Since the COVID-19 pandemic, student needs and engagement with school have changed as well, with 23.8% of students being chronically absent during the 2023-2024 school year, compared to just 14.3% of students during the 2018-2019 school year.[6]

THE STATE OF BEHAVIOR AND MENTAL HEALTH IN UTAH

Throughout the United States, youth are experiencing a mental health crisis, with high levels of self-reported sadness, hopelessness, and suicidality.[7] Students in Utah are facing similar challenges.

- According to the 2023 Prevention Needs Assessment, 27% of Utah students in grades 8, 10, and 12 experienced serious mental illness.

- Additionally, 7.3% reported having attempted suicide in the past year and 18.9% reported having seriously considered attempting suicide in the past year. In 2022, suicide was the leading cause of death for Utahns ages 10 to 17.[8]

Schools across the country have simultaneously witnessed increased challenges related to student behavior. In a May 2024 NCES survey, 80% percent of public school leaders reported that they "agree" or "strongly agree" with the statement, "The COVID-19 pandemic and its lingering effects continue to negatively impact the behavioral development of students at my school."[9] Student behavior is also a significant concern in Utah. In its most recent strategic plan, USBE identified safe and healthy schools, comprehensive of mental health, as one of the top four goals for the system, reflecting how critical this type of support is to student success. Across all LEAs, improving behavioral outcomes and increasing mental

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[1] Utah State Board of Education. (2024). *2024 Annual Report.*
 https://www.schools.utah.gov/superintendentannualreport/_superintendentannualreport_/2024AnnualReport.pdf

[2] Utah State Board of Education. (2024). *School List 2023.* https://www.schools.utah.gov/datastatistics/reports

[3] Utah State Board of Education (2024). *Enrollment by Local Education Agency (LEA) October 2020 – Projected October 2025.* https://schools.utah.gov/datastatistics/_datastatisticsfiles_/_reports_/_enrollmentmembership_/2025EnrollmentLEA.xlsx

[4] Utah State Board of Education (2024). *Fall Enrollment by Grade Level and Demographics, October 1, 2024 School Year 2024-2025.*
https://schools.utah.gov/datastatistics/_datastatisticsfiles_/_reports_/_enrollmentmembership_/2025FallEnrollmentGradeLevelDemographics.xlsx

[5] *Ibid.*

[6] Utah State Board of Education (2024). *Chronically Absent Rate, School Year 2024.*
https://schools.utah.gov/datastatistics/_datastatisticsfiles_/_reports_/_enrollmentmembership_/2024ChronicallyAbsentRate.

[7] Centers for Disease Control and Prevention. (2024, May 1). Mental health. https://www.cdc.gov/healthyyouth/mental-health/index.htm

[8] Utah Department of Health and Human Services. (2024, March 5). Complete Health Indicator Report of Suicide.
https://ibis.health.utah.gov/ibisph-view/indicator/complete_profile/SuicDth.html

[9] National Center for Education Statistics. (2024, July 18). *About One-Quarter of Public Schools Reported That Lack of Focus or Inattention From Students Had a Severe Negative Impact on Learning in 2023-24.* https://nces.ed.gov/whatsnew/press_releases/7_18_2024.asp

health support comprise the largest category of goals.[10] During the 2022-2023 school year, 34% of LEAs reported accomplishing those goals while another 45% made progress toward achieving them.

II.   METHODOLOGY

OUR APPROACH
PCG's assessment was designed to understand Utah schools' needs related to student behavior and inform relevant recommendations for how USBE can best support LEAs in addressing these needs. PCG's assessment included four data collection tasks:

- **Task A: Policy Review.** PCG conducted a state-level assessment of policies and regulations governing behavior and mental health support.
- **Task B: Survey of Local Education Agencies**. PCG developed and distributed a data collection tool to Utah LEAs, gathering qualitative and quantitative data to develop an understanding of the state of behavioral and mental health supports across the state.
- **Task C: Focus Group of Local Education Agencies.** PCG led thematic focus groups of a representative sample of LEAs to gather in-depth qualitative data that augmented the survey data collected in Task B.
- **Task D: Landscape Survey of Community Organizations.** PCG performed an assessment of community organizations that support LEAs with the behavioral and/or mental health needs of students.

POLICY REVIEW
PCG compiled a comprehensive list of policies and regulations that pertain to student behavior and mental health, in partnership with the Utah State Board of Education. Policies were identified by performing a keyword search for "behavior," "behavioral health", "behavioral services", "behavioral supports", "discipline," "disability", and "mental health" across the websites for various state agencies, including but not limited to the Utah State Board of Education, the Office of Administrative Rules, and the Department of Child and Family Services. PCG has provided USBE with a Behavioral Policy and Regulation Review summary that includes a list of each policy reviewed, and for each, a summary of the key requirements and relevant subpopulations/sectors, as well as a link to the policy itself for reference.

SURVEY OF LOCAL EDUCATION AGENCIES
PCG conducted a survey of Utah LEAs using a web-based data collection tool on the Alchemer platform. The data collection tool questions were developed by PCG in collaboration with the Mosakowski Institute and USBE. The tool was distributed to school leaders by USBE and was open for 4 weeks from October 28 – November 22, 2024. The tool asked LEAs to report both qualitative and quantitative data related to the following:

- **Human Resources**: Staffing at the local education agency (LEA) level and school level who support behavior and mental health practices. Questions included staff titles, FTE count, and average compensation.

- **Policies and Practices**: Policies, practices, and interventions related to behavior support that are currently in use.

- **Funding**: LEAs' annual expenditures and funding related to behavior and mental health, and restrictions on this funding.

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[10] Utah State Board of Education. *Annual Report 2025*.
https://schools.utah.gov/superintendentannualreport/2025USBEAnnualReport.pdf

- **External Partnerships**: Community organizations that LEAs contract or partner with to support student behavior and mental health needs, along with an assessment of their accessibility and effectiveness.

- **Overall Assessment**: LEAs' perceived top resources and needs related to supporting student's behavior and mental health.

Given the range of topics addressed in the data collection tool, LEAs were asked to solicit input from, at a minimum, a Human Resources lead and a leader responsible for student behavior at the LEA-level (i.e. Director of Student Services). LEA leaders were encouraged to consult with other school-level leaders and/or behavior staff to better understand how school-level staff time at the is spent on behavior support. PCG received 63 responses, including 56 complete responses, with another 7 partial responses. PCG included partial responses in the survey for LEAs who completed at least one section. LEAs with partial responses were given the opportunity to opt their responses out, any who did not opt out were retained and used in the analysis. A summary of the response rate to the data collection tool is provided in Figure 1 and Figure 2.

FIGURE 1: SURVEY RESPONSES BY LEA TYPE, SIZE, AND URBANITY

	LEA Type	Total Responses	Percentage of Utah LEAs in subgroup
LEA Type	Charter	32	27.5%
	District	31	75.6%
Urbanity	Urban	39	35.8%
	Rural	24	51.1%
Size	Large	13	86.7%
	Medium	23	47.9%
	Small	27	29.0%
Total Sample		**63**	**40.4%**

FIGURE 2: SURVEY RESPONSES BY REGION

Region	Percent of Respondents	Percent of all Utah LEAs
Central	3%	5%
Northeastern	14%	10%
Northern	5%	11%
Southeast	5%	7%
Southwest	8%	5%
Wasatch Front	65%	62%
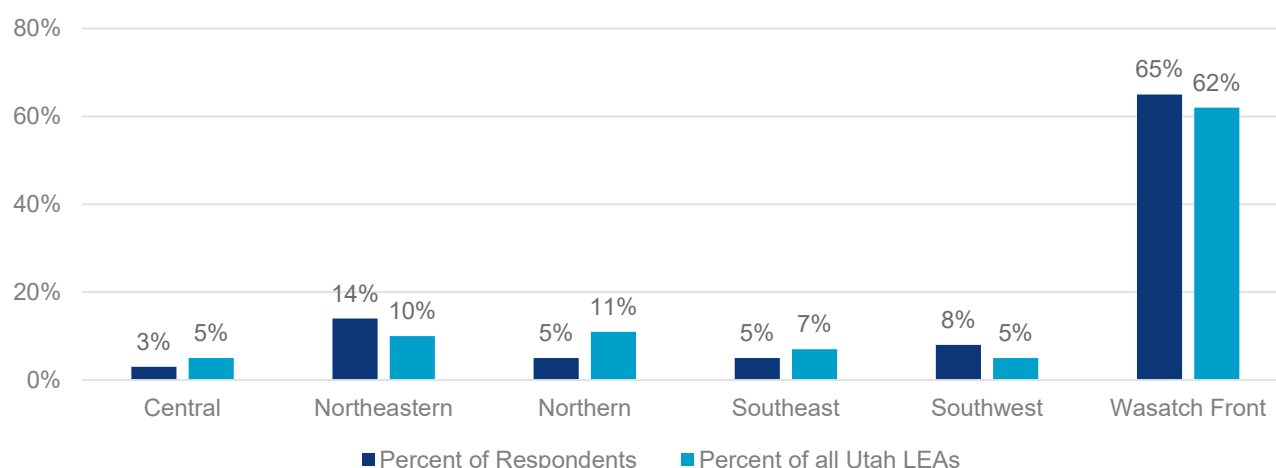
A list of all LEAs that participated in the data collection tool is included in Appendix I.

FOCUS GROUPS WITH LOCAL EDUCATION AGENCIES

During the week of December 8, 2024, PCG facilitated a series of virtual focus groups with LEA and school leaders. Participants included associate superintendents, school leaders, special education directors, and directors of student services. Across five focus groups, PCG met with 20 participants. A full list of LEAs that participated in focus groups is included in Appendix II.

All focus groups were conducted as confidential meetings. Focus group questions were developed by PCG in collaboration with the Mosakowski Institute and USBE. PCG staff took detailed notes during each focus group, which were then systematically analyzed using *Atlas.ti*, a qualitative data coding tool. Notes from every focus group and interview were uploaded into *Atlas.ti* and then using deductive coding, PCG categorized quotations from focus groups into 67 thematic codes. Appendix III includes a list of all codes and a tabulation of how frequently each code appears in the data. All data are reported on an aggregate level, maintaining the anonymity of participants.

III. FINDINGS

This report summarizes the experiences and key concerns of local education agencies as they relate to student behavior and mental health. Through this behavior landscape analysis, PCG learned that many Utah LEAs find student behavior and mental health to be a primary concern.

In the survey, LEAs shared:

- *"Student behavior has impacted every single aspect of our LEA. An extremely large amount of our time and resources are spent addressing behavior concerns. We see a trend of increasing behavioral needs in both quantity of children and severity. This is exhausting our teachers and our resources."*

- *"Student behavior has significantly impacted our district by disrupting instructional time within classrooms. This distraction is one of the primary sources of discontent among our staff, contributing to decreased morale and professional satisfaction. Over the past few years, there has been a drastic increase in behavior management concerns, which has also led to an uptick in parent complaints regarding aggressive behavior from other students. These challenges are critical factors in our difficulties with staff retention, as managing disruptive behavior can lead to burnout and turnover. Addressing these issues is essential to creating a supportive and effective teaching and learning environment that retains quality educators."*

- *"Increased student behaviors have impacted student progress throughout the LEA by interfering with the students learning and the learning of others by causing distractions and reducing instructional time in the classroom secondary to dealing with the behavior."*

LEAs' key concerns within the area of student behavior and mental health are:

- **Increased Student Needs.** LEAs report a significant rise in both the frequency and intensity of student behavioral and mental health challenges, straining existing resources.

- **Limited Support.** LEAs struggle to access needed specialized support for students, which they attribute to staffing shortages, limited training, and challenges connecting with external providers.

- **School-Family Partnerships.** LEAs see a need to bring families into the process of supporting behavior and mental health, but find that building and maintaining effective school-family partnerships is challenging.

- **Administrative Burden.** LEAs find that legislative and administrative requirements, often unfunded, divert valuable time and resources from direct student support.

- **Costs.** LEAs find that the rising cost of supporting students has not been met with corresponding increases in funding, with LEAs struggling to make the most of their available funding.

POLICIES AND PRACTICES

State Policies

PCG conducted a review of the Utah Code and state legislation and identified 72 statutes pertaining to student behavior and/or student mental health. Of the 72 statutes, 43 (61%) were passed or updated in 2024. The most common topics covered by the behavior and mental health legislation include bullying, discipline, parent communication, safety, special education, substance use, and suicide prevention. Together, these topics comprise 42 of all behavior and mental health statutes (58%), and 28 of the 43 statutes (65%) passed or updated in 2024. Figure 3 shows the total behavior and mental health legislation count over time, as well as the count by topic.

FIGURE 3: LEGISLATION PERTAINING TO BEHAVIOR AND/OR MENTAL HEALTH BY YEAR (2018-2024)
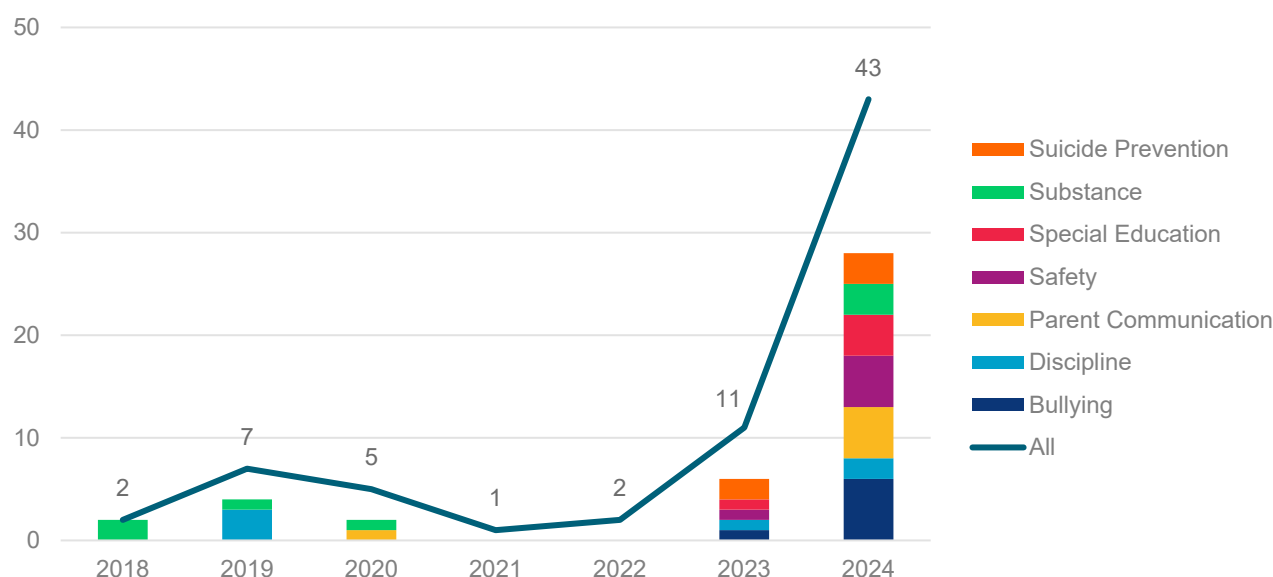
Data derived from policy review conducted by PCG, October 2024.

PCG reviewed state-level legislation nationwide with a focus on mental health; bullying and conflict resolution; discipline; suspension and expulsion; suicide prevention; and social emotional learning. On average, each state has 27 statutes covering these topic areas. By comparison, **Utah has 49 statutes, the 8th most of all states** in these areas.[11]

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[11] Education Commission of the States (ECS) State Policy Database. https://www.ecs.org/state-education-policy-tracking-new/ Retrieved February 3, 2025.

FIGURE 4: STATES WITH HIGHEST NUMBER OF STATUTES FOCUSED ON IDENTIFIED TOPIC AREAS
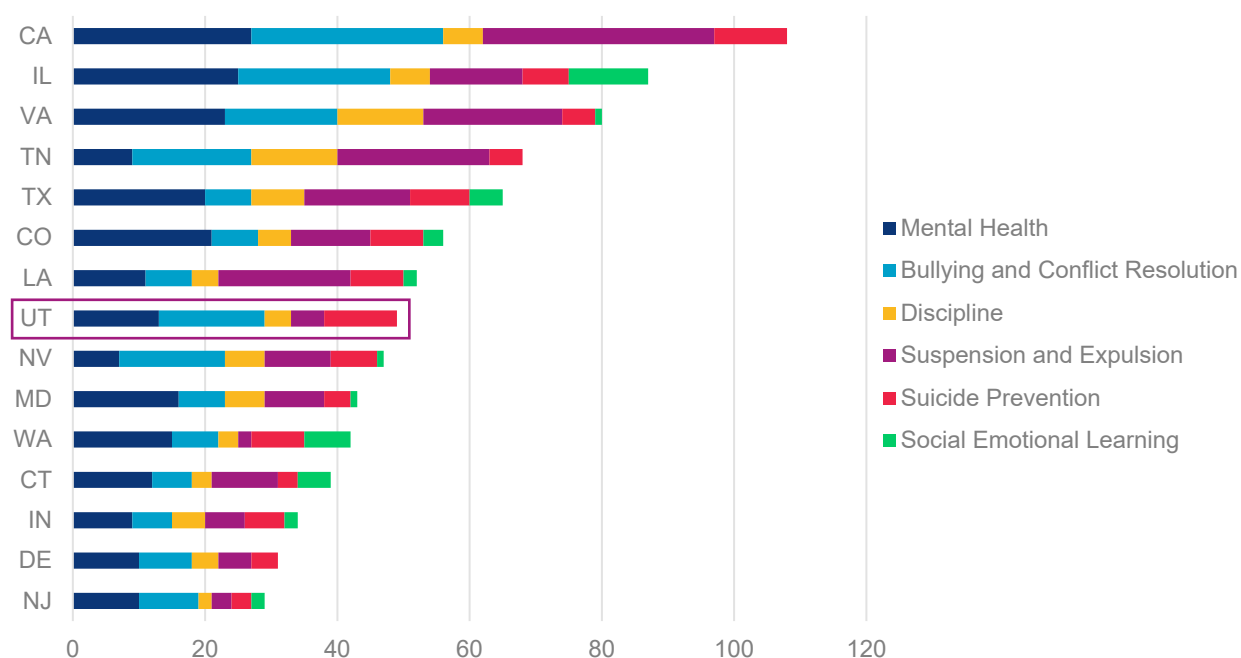
Data derived from Education Commission of the States (ECS) State Policy Database.

Utah's statutes serve to shape LEA practices in a wide range of areas, including, for example, bullying policies, classroom management, and restorative practices. Figure 5 lists examples of these statutes which have mandated new requirements for LEAs within the last two years.

FIGURE 5: SAMPLE OF NEW LEGISLATIVE REQUIREMENTS PERTAINING TO BEHAVIOR AND/OR MENTAL HEALTH, 2023-2024

Legislation Title	New Requirement
53G-8-802. State Safety and Support Program	LEAs must implement evidence-based behavior threat assessment.
53G-8-701.5 School Safety Needs Assessment	LEAs must implement school safety needs assessment and relevant staffing.
53G-9-604 Parental Notification of Certain Incidents and Threats Required	LEAs must adopt new suicide prevention communication materials.
R277-613. LEA Policies and Training Regarding Bullying, Cyber-bullying, Hazing, Retaliation, and Abusive Conduct	LEAs must update their bullying policies to align with updated policy requirements.
R277-609. Standards for LEA Discipline Plans and Emergency Safety Interventions	LEAs must comply with the Least Restricted Behavioral Interventions Technical Assistance Manual. LEAs must develop, implement, and monitor a comprehensive plan for student and classroom management, school discipline, and restorative practices.

In focus groups and in the data collection tool, **LEAs expressed that they experience mandates from the legislature as a significant administrative burden**. LEAs shared that significant staff time is required to understand legislative changes and to develop and implement policies that align with new or updated statutes. LEAs noted that statutory changes are often made without accompanying funding to support the necessary investment of staff resources.

Another common theme shared by survey respondents and focus group participants is that Utah LEAs have great diversity in their size, student demographics, geography, community resources, structure (including traditional districts, specialized schools, and charter), and resource availability (including funding, staffing, and community organizations). Because of this diversity, there is a resounding perception that **"one size does not fit all" as it regards behavior and mental health policy**. LEAs of various types, sizes, and locations perceive that legislative mandates and grants focused on behavior and mental health are at times **overly prescriptive and limit LEA's abilities to implement the strategies that best fit the LEA and the students they serve**.

State Practice Resources

Beyond the legislative statutes, Utah also guides specific LEA actions through USBE-promoted practices.[12] These include:

- **Least-Restrictive Behavioral Interventions (LRBI).** USBE has published a robust guide that seeks to educate readers on student behavior, evidence-based behavior practices, and tools to assess, address, and evaluate student behavior change. The guide includes turnkey implementation tools that can be used at the school-level.
- **Multi-Tiered Systems of Support (MTSS).** USBE disseminates resources, including implementation tools, online training courses, and web resources to support LEAs in sustainably implementing MTSS practices.
- **Positive Behavioral Interventions and Support (PBIS).** USBE promotes external resources related to PBIS through links on its website.

In focus groups and in the data collection tool, multiple LEAs referenced utilizing **LRBI** practice guidance produced by USBE. LEAs described finding USBE's LRBI resources to be useful, relevant and high-quality.

USBE has also published a comprehensive **School Behavioral Health Toolkit.[13]** The Toolkit includes a framework by which LEAs can assess their behavioral health needs, build capacity, plan, implement, and evaluate, and it addresses a range of LEA needs, including funding, partnerships, family and community engagement, data-driven practice, and systemic integration. PCG found the Toolkit to be thorough and relevant to the experiences expressed by LEAs in the data collection tool and in focus groups. However, LEAs did not mention the Toolkit, which was published in May 2024.

In discussing their behavior and mental health needs, LEAs noted a desire for additional guidance and resources that address pressing challenges, including most commonly:

- Behavior in early elementary (preK-2)
- Aggressive behaviors
- Family engagement, support, and expectation management

The following needs were also noted by smaller numbers of LEAs:

- Tiered intervention

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[12] Utah State Board of Education Behavior Support Program. *USBE Resources*.
https://schools.utah.gov/studentservices/_studentservicesprograms/behaviorsupport.
[13] Utah State Board of Education. *Utah's School Behavioral Health Toolkit*. (May 2024).
https://www.schools.utah.gov/schoolsafetyandstudentservices/pdfs/MentalHealthUtahsBehavioralHealthToolkit.pdf

- Social-emotional learning
- Needs of refugees and multilingual students

LEA Policies and Practices

In PCG's data collection tool, LEAs were asked to list policies, frameworks and procedures that exist at the LEA, school, or classroom-level related to behavior support. The most common policies, frameworks and procedures focused on behavior expectations, restorative justice or restorative practice, social-emotional learning, Positive Behavioral Interventions and Supports (PBIS), Multi-Tiered Systems of Support (MTSS), and bullying. Examples of how LEAs reported applying these policies, frameworks, and practices are included in Figure 6.

FIGURE 6: LEA APPLICATIONS OF COMMON POLICIES, FRAMEWORKS, AND PROCEDURES

Policy, framework, or procedure focus	Examples of LEA applications
Behavior expectations	- The SAIL model (Safe, Accountable, Inclusive, and a Leader), which is often used within a PBIS framework - Integration of behavior expectations into multiple domains of the school experience, including the school's mission, vision, character lessons, daily routines, incentives, and assemblies - Behavior matrices and flowcharts - Uniform expectations for how teachers and staff communicate behavior expectations
Restorative justice or restorative practice	- Restorative justice practices embedded in discipline policy - Restorative circles - Accountability projects - Administration commitment to restorative practices before other forms of discipline
Social-emotional learning (SEL)	- School-created curriculum, including whole class and group instruction on: - Emotional regulation (including zones of regulation) - Mindfulness - Performance character traits - Social skills - External curriculum - Everyday Speech - Leader in Me - Move this World - ReThinkEd - SEW (Social Emotional Wellness) - SPOT Social Emotional Learning Resource - Thrive Time - We Are Friends - We all Belong - Wonders Program - Character education - Integration of SEL into classroom instruction (including, for example, identifying respectful behavior within group work)

Policy, framework, or procedure focus	Examples of LEA applications
Positive Behavioral Interventions and Supports (PBIS)	• PBIS integration across all schools • LEA-level policy requiring each school to develop their own positive behavior plan • Love and Logic behavior program • PBIS instructor observations and leadership observations

Multi-Tiered Systems of Support (MTSS)	• Tiered support for academics
	• Tiered support for student behavior
	• Identification of students based on needed supports, including:
	    ○ Academic at-risk learners
	    ○ Social-emotional learner
	    ○ Advanced learner
	    ○ English language learners
	• Referral processes for tier 2 and tier 3 supports

Bullying	• Bullying curriculum
	• External curriculum
	    ○ Tough Kids Bully Blocker
	    ○ Classroom Meetings that Matter Most

School Climate	• Invitational Education • Common culture and climate targets shared among staff • Refocus and wellness rooms

The data shared through the data collection tool indicates that LEAs have a **wide range of tools to address behavior**, and many of them report some level of success, especially as it relates to efforts related to behavior expectations, PBIS, and MTSS. At the same time, there were a number of **evidence-based and/or legally mandated practices that LEAs seldom mentioned**, including LRBI (cited nine times, compared to restorative justice or restorative practices, which was cited 31 times), and trauma-informed practices (cited five times). This may indicate a **gap in the adoption** of practices.

Additionally, although LEAs report utilizing a variety of interventions and strategies to address needs related to student behavior and mental health, they noted gaps in their ability to **monitor the adoption and effectiveness of these interventions and strategies** across the LEA's network of schools. One data collection tool respondent shared, "We need a mechanism for measuring rates of implementation [across schools] and the effectiveness of that implementation." When asked to list the LEA's top needs related to behavior and mental health support, another respondent shared, "A system that tracks the data that helps us do the progress monitoring."

As LEAs discussed their internal behavior and mental health practices in focus groups, participants demonstrated interest in hearing from each other about effective practices, indicating a potential opportunity for USBE to develop **expanded structures for LEAs to share experiences and information**.

STAFFING
Staffing by the Numbers
Across the data collection, staffing was by far the most frequently cited topic, with 193 quotations.

As reflected by the prominence of staffing theme among the LEAs' responses to the data collection tool and contributions in focus groups, school staff play a key role in supporting students' behavioral and mental health. According to the Association for Supervision and Curriculum Development teachers are on the front lines of the mental health crisis as they are able to both notice changes in individual students' behavior over time and compare that against their peers.[14]

When focusing on staff who are typically *formally assigned* to support behavioral and mental health, there are national recommendations for student-to-psychologist, -counselor, and -social worker ratios issued by the corresponding associations, the National Association of School Psychologists, the American School Counselor Association, and the School Social Work Association of America. These recommended ratios exist to ensure that students are receiving the support they need. For counselors, smaller ratios support increases in student outcomes as measured by standardized tests, attendance, grades, and graduation rates. These ratios are also linked to decreased disciplinary infractions.[15] These national best-practice ratios, along with Utah's ratios, are shown in Figure 7.

FIGURE 7: NATIONAL RECOMMENDED STUDENT TO BEHAVIOR STAFF RATIOS COMPARED TO UTAH

Employee	National Recommended Ratio	Utah Ratio
School Psychologists	500:1[16]	1,971:1[17]
School Counselors	250:1[18]	499:1[19]
School Social Workers	250:1[20]	663:1[21]

Utah **does not meet the recommended ratio** for any of these staff roles. As of February 2025, **Utah ranked 41st among the 50 states for student-to-school psychologist ratio** at 1,971:1. The National Association of School Psychologists also classifies it as "worsening", which can be seen in the NCES data from the 2020-2021 school year where Utah had a ratio of 890:1 students per FTE psychologist.[22] **Utah also ranks 44th of the 50 states on student-to-school counselor** ratio. [23]

In PCG's data collection tool, LEAs were asked to provide information on the behavior staff that they employ. Figure 8 summarizes the information provided by LEAs, including the staff roles, the percentage of LEAs with an employee in this role, the average student-to-staff ratio, and the average annual cost per staff.

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[14] Keels, M. (2023, May 16). *A Role for Every Staff Member in Promoting Student Mental Health.* ASCD. https://ascd.org/blogs/a-role-for-every-staff-member-in-promoting-student-mental-health

[15] American School Counselor Association. *School Counselor Roles & Ratios.* https://www.schoolcounselor.org/about-school-counseling/school-counselor-roles-ratios

[16] National Association of School Psychologists. (2025, February). *Staff Shortages Data Dashboard.* https://www.nasponline.org/about-school-psychology/state-shortages-data-dashboard.

[17] Ibid.

[18] American School Counselor Association. *Student-to-School-Counselor Ratio 2022-2023.* https://www.schoolcounselor.org/getmedia/a988972b-1faa-4b5f-8b9e-a73b5ac44476/ratios-22-23-alpha.pdf.

[19] Ibid.

[20] School Social Work Association of America. *National SSW Model.* https://www.sswaa.org/ssw-model.

[21] Merck, A. (2019. April 1). *47 States Don't Meet the Recommended Student-to-Counselor Ratio.* Salud America!. https://salud-america.org/47-states-dont-meet-the-recommended-student-to-counselor-ratio/

[22] National Center for Education Statistics. *Percentage of K-12 schools by presence of counselors, psychologists, and social workers on staff, school type, and selected school characteristics: 2020-2021.* https://nces.ed.gov/surveys/ntps/estable/table/ntps/ntps2021_70502_t12n.

[23] American School Counselor Association. *Student-to-School-Counselor Ratio 2022-2023.* https://www.schoolcounselor.org/getmedia/a988972b-1faa-4b5f-8b9e-a73b5ac44476/ratios-22-23-alpha.pdf.

FIGURE 8: FTES IN ROLES DESIGNATED TO SUPPORT BEHAVIOR AND MENTAL HEALTH

Role	LEA Size	Percent of LEAs with FTE	Average Student to FTE ratio	Average annual cost per FTE
School Counselor	All LEAs	83%	486:1	$115,517
	Large	100%	493:1	$107,250
	Medium	100%	447:1	$142,255
	Small	59%	441:1	$83,467
School Social Worker	All LEAs	62%	1814:1	$96,169
	Large	92%	1986:1	$102,383
	Medium	65%	1181:1	$118,417
	Small	44%	1085:1	$62,146
School Psychologist	All LEAs	46%	1661:1	$92,451
	Large	92%	1536:1	$111,892
	Medium	48%	3564:1	$100,311
	Small	22%	3135:1	$39,160
Behavior Paraprofessional/ Paraeducator	All LEAs	46%	1325:1	$39,851
	Large	77%	1593:1	$31,888
	Medium	48%	714:1	$33,584
	Small	30%	400:1	$58,422
Behavior Specialist	All LEAs	38%	6193:1	$78,415
	Large	85%	6535:1	$99,996
	Medium	30%	6434:1	$79,676
	Small	22%	1841:1	$37,589
Mental Health Specialist	All LEAs	29%	7386:1	$98,785
	Large	69%	7960:1	$106,233
	Medium	30%	4366:1	$109,576
	Small	7%	32245:1	$27,500
BCBA	All LEAs	27%	10298:1	$91,876
	Large	69%	10234:1	$105,822
	Medium	13%	15281:1	$95,182

Role	LEA Size	Percent of LEAs with FTE	Average Student to FTE ratio	Average annual cost per FTE
	Small	19%	4104:1	$58,017
Behavior Aide	All LEAs	25%	739:1	$29,423
	Large	54%	701:1	$27,864
	Medium	26%	1125:1	$29,976
	Small	11%	1091:1	$31,954
Mental Health Intern (School Psychology intern, School Counselor intern, School Social Work intern)	All LEAs	25%	11448:1	$28,497
	Large	38%	23282:1	$46,969
	Medium	39%	2495:1	$53,776
	Small	7%	4514:1	$6,000

Data derived from LEA survey conducted by PCG, November 2024.

83% of LEAs in our survey employ school counselors. School social workers are the second most common employee, but the percentage of LEAs who employ them is significantly lower, at 62%. **Ninety-five percent of LEAs employ at least one school counselor or social worker**. The only three in the sample that did not were small charters. Figure 8 shows that **54% of LEAs do not have a full-time school psychologist**. LEA staffing varies greatly by LEA size. While their student to FTE ratios tend to be higher, large LEAs tend to be more likely to have at least one FTE in each role than medium and small LEAs. This difference is starkest in the school counselor role where 92% of large LEAs have at least one school psychologist employed while only 22% of small LEAs do. Understaffing school psychologists can lead to unmanageable caseloads, inability to provide prevention and early intervention services, and a reduction in access to mental and behavioral health services for students.[24]

Beyond the roles listed in Figure 8, a smaller number of LEAs cited the following roles that support behavior and mental health within their schools:

- Home and Hospital staff
- Refocus staff
- Special education teachers
- Youth academy teachers

Each of these roles was cited by at least two LEAs.

The impact and need for these behavior staff was emphasized in the data collection tool. When asked to list the **top three resources or practices that their district has found successful related to behavior and mental health support**, **most LEA leaders listed staffing resources** among their top three**.** Answers included having social workers, mental health counselors, dedicated behavior staff in schools, and having trained behavior staff. These data emphasize the importance of specialized behavior staff in supporting student behavior and mental health within the LEAs.

On the other hand, **over half of LEA leaders cited staffing as a top need related to behavior and mental health support.** Thirty LEA leaders (53%) listed some aspect of staffing in their top three needs.

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[24] National Association of School Psychologists. 2019. *Key Messaging and Talking Points to Remedy the Shortages in School Psychology*.

These included the need for additional staff to support behavior, the availability of qualified candidates, and funds to hire specialized staff like school social workers or psychologists.

In general, LEAs report feeling understaffed when it comes to behavior personnel. Underlying many of the challenges experienced in staffing across Utah is the perception among respondents that there is an increasing number of students that need intensive supports each year. In the survey and focus groups, LEAs describe that behavior staff are spread thin, specialists are often shared across schools or regions and are asked to do a difficult job with limited personnel and training.

- **General lack of personnel and lack of trained personnel.** LEA leaders report that it is difficult to recruit people in general, and specifically difficult to recruit individuals for roles that support special education. LEA leaders perceive that many of the educators who are new to the field are not leaving educator preparation programs with the necessary skills to support behavior at all levels, including both general skills like classroom management, and skills more specific to behavior such as behavior management or tiered intervention skills.

- **Cost of personnel is high.** LEA leaders report that cost is a major factor in their struggles with attracting and retaining qualified and effective staff given that there are more lucrative employment options available for specialized mental health and behavior professionals. For example, in the data collection tool, LEA leaders reported the annual average cost of a school psychologist at $92,451 while the average psychologist in Utah earns nearly 20% more at $110,630.[25] LEA leaders perceive the cost of full-time, licensed personnel to be high and note that ESSER funding that helped fund some behavior staff has run out. LEAs describe needing funding to both attract and retain staff. This is further addressed in the Funding section.

Inflexibility related to staff deployment and services allocations. In focus group data, LEA leaders reported challenges with restrictions on the deployment of staff whose roles are funded through IDEA or specific federal grants. Leaders noted a desire to more dynamically allocate those staff, including to provide tiered interventions to general education students; however, because of the restrictions associated with the funding sources, LEAs do not have the flexibility to reallocate those staff resources to the degree that they see necessary.

As reported in the data collection tool, LEAs see a 90% retention rate for staff supporting behavior. Nonetheless, there is still a perception among LEA leaders that it is difficult to retain staff, especially high-quality staff that handle behavior. **One promising practice that emerged across some LEAs is the focus on building their staffing pipeline.** These LEAs see the benefits to training and upskilling paraprofessionals and other current staff who know the student population. They believe that staff that start in a school and are trained by that school will be more likely to both remain at the LEA and better serve its population.

Beyond staff who are primarily focused on behavior and mental health (e.g., social workers, school counselors, school psychologists, behavior aides, etc.), PCG asked LEAs to provide information about other staff within their schools and LEAs who provide behavior and mental health support. Figure 9, Figure 10, and Figure 11 summarize the data provided by LEAs in the data collection tool. LEAs were asked to list:

- Staff who are **formally assigned to support behavior in addition to their primary role** (e.g., assistant principal, special education teacher)
- Staff who are **not formally assigned to support behavior, but who provided behavior support nonetheless**

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[25]Bureau of Labor Statistics. *May 2023 Strate Occupational Employment and Wage Estimates – Utah*. https://www.bls.gov/oes/2023/may/oes_ut.htm. Retrieved February 3, 2025.

Figure 9 shows the distribution of FTEs supporting behavior across LEAs in the data collection tool by primary role (e.g., school psychologists, school counselors, BCBAs), formally assigned in addition to their primary role (e.g., special education teacher, principal, assistant principal), and not formally assigned as part of their role (e.g., teachers, secretaries).

FIGURE 9: FTEs SUPPORTING BEHAVIOR

- Primary role
- Formally in addition to primary role
- Not formally assigned

26%
32%
42%
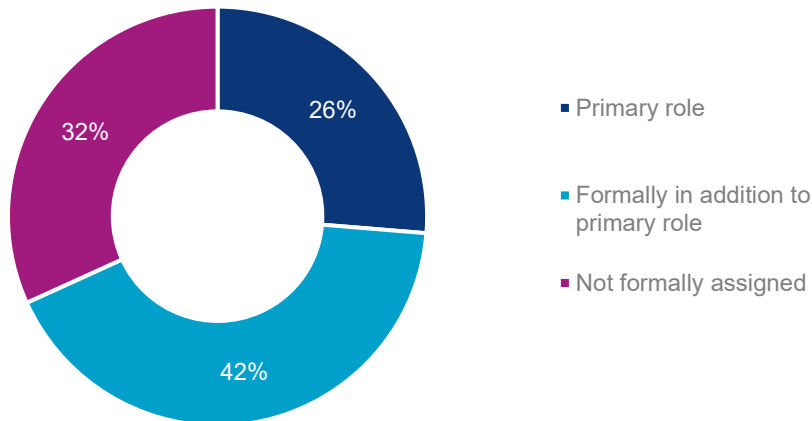
Data derived from LEA survey conducted by PCG, November 2024.

The **largest portion of FTEs supporting behavior are those who have behavior support formally assigned in addition to their primary role, but it is not their primary role**. FTEs that do not have behavior support as part of their role but who still support behavior make up almost a third of the FTEs. And just over a quarter of the FTEs supporting behavior have it assigned as their primary role.

Figure 10 summarizes the data for staff who are **formally assigned to support behavior** in addition to their primary role.

FIGURE 10: ROLES FORMALLY ASSIGNED TO SUPPORT BEHAVIOR IN ADDITION TO THEIR PRIMARY ROLE

	Staff formally assigned to support behavior in addition to their primary role	
Most Commonly Listed Roles	• Special Education Teacher (39 LEAs) • Principal (33 LEAs) • Vice/Assistant Principal (29 LEAs)	
Time spent supporting behavior	0-10%	8%
	11-25%	28%
	26-50%	24%
	51-75%	16%
	76-100%	24%
Percent reported as receiving formal training on behavior	80%	

Data derived from LEA survey conducted by PCG, November 2024.

Types of staff include roles such as special education teacher, principal, and vice or assistant principal. These staff are often expensive with one FTE employee costing, on average, $102,204. In all, **64% of these FTEs spend over a quarter of their time supporting behavior** and 80% of them receive formal training on behavior support.

Figure 11 summarizes the same data for staff who are **not formally assigned to support behavior** but still do.

FIGURE 11: ROLES NOT FORMALLY ASSIGNED TO SUPPORT BEHAVIOR BUT WHO DO NONETHELESS

		Staff not formally assigned to support behavior, but who provide support nonetheless
Most Commonly Listed Roles		• Special Education Teacher (11 LEAs) • Secretaries (5 LEAs) • Teachers (5 LEAs)
Time spent supporting behavior	0-10%	10%
	11-25%	55%
	26-50%	32%
	51-75%	3%
	76-100%	0%
Percent Formally Trained		26%

Data derived from LEA survey conducted by PCG, November 2024.

The top three roles that are not officially assigned to support behavior within schools but who still do are special education teachers, secretaries, and teachers in general. **Only 26% of these employees receive formal training on behavior support despite 90% of them spending more than 10% of their time supporting behavior.**

FIGURE 12: FTE EMPLOYEES SUPPORTING BEHAVIOR WITHOUT TRAINING
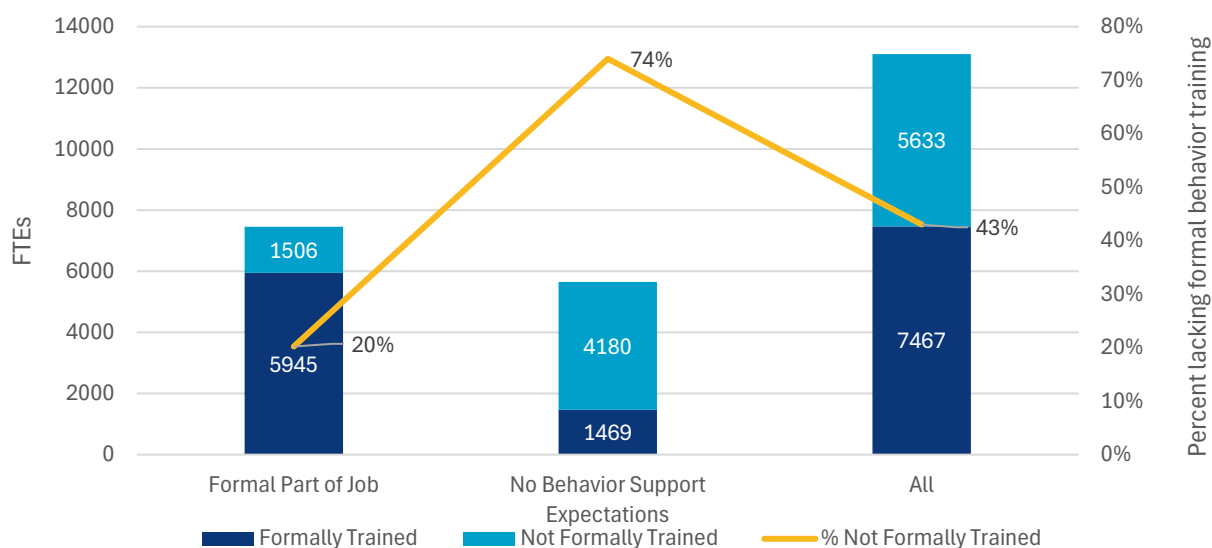
Data derived from LEA survey conducted by PCG, November 2024.

Figure 12 illustrates that:

- **20% of employees with behavior support as a formal part of their job do not have formal training in supporting behavior**. This represents 1,506 FTE employees from the 63 LEAs in the sample.
- **74% of employees who are not formally assigned to support behavior, but who do nonetheless do not have formal training in doing so.** This represents 4,180 FTE employees from the 63 LEAs in the sample.
- When combined, **43% of FTE employees who support behavior either as a part of their primary role or not are not formally trained in supporting behavior.** This represents 5,633 employees from the 63 LEAs in the sample.

This data was echoed in the focus groups where participants reported concerns that staff, including classroom teachers, are not adequately trained to support the behaviors they are seeing in their classrooms and schools. Participants indicated a perception that educators receive generalized professional development on topics to support their students' learning, but that the content of the professional development sessions lacks the specificity necessary to equip teachers to address what participants widely perceive as more severe behaviors they are seeing from students. Participants express a belief that, without adequate training, teachers resort to using ineffective practices.

Professional Learning

Professional learning emerged as a common theme in the data, with 107 quotations.

LEAs access professional learning from multiple avenues, including from USBE, from outside organizations, and internally. Figure 13 and Figure 14 show where LEAs access their professional learning along with their perceived effectiveness of professional learning received from each source.

FIGURE 13: PROFESSIONAL LEARNING UTILIZATION BY SOURCE

	58%	77%	95%
	From USBE	From Outside Organizations	Provided Internally Through the School or LEA
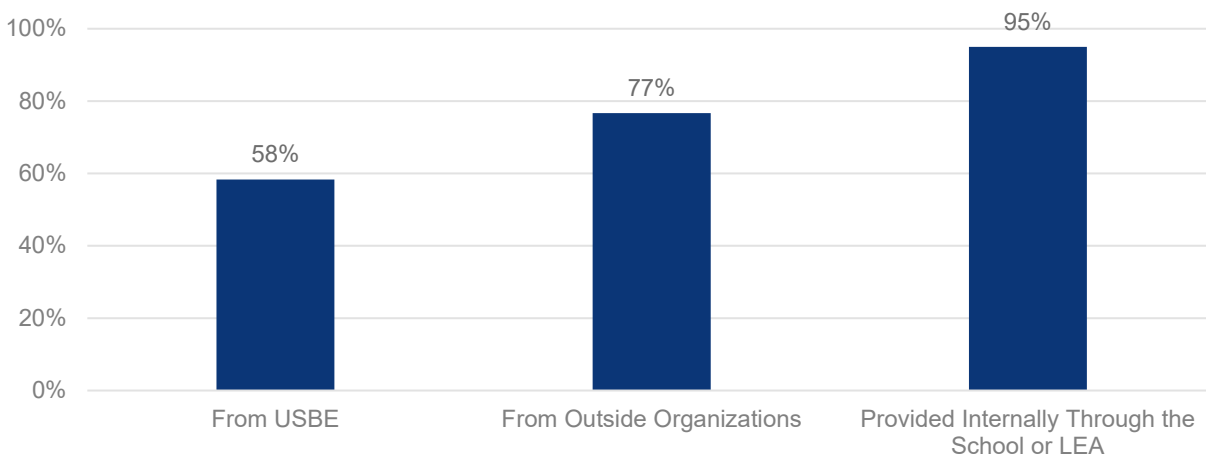
Data derived from LEA survey conducted by PCG, November 2024.

FIGURE 14: PROFESSIONAL LEARNING PERCEIVED EFFECTIVENESS BY SOURCE
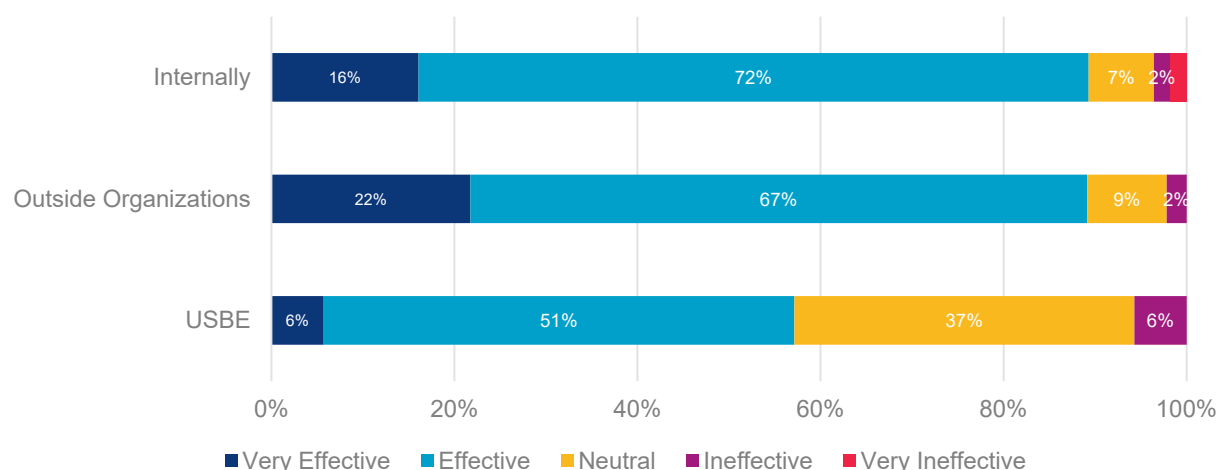
Data derived from LEA survey conducted by PCG, November 2024.

Nearly all LEAs offer their own professional learning (Figure 13) **and the majority of these perceive their internal professional learning to be effective** (Figure 14). While the state-offered professional learning is not as widely used and is generally viewed as neutral more often than other sources of professional learning, the state offers a **wide range** of professional learning opportunities. The USBE website includes numerous professional development and implementation resources for stakeholders such as administrators, classroom teachers, instructional coaches, teacher leaders, and teacher mentors. It also includes Utah's five Effective Teaching Standards that describe the knowledge, skills and dispositions that are the hallmark of effective instruction.

Within these standards, the Classroom Climate (Figure 15) standard touches on behavior in elements such as classroom safety and the respectful learning environment, but there is nothing explicitly addressing student behavior and mental health.[26]

FIGURE 15: UTAH EFFECTIVE TEACHING STANDARDS: CLASSROOM CLIMATE

Standard 4: Classroom Climate

Effective teachers create academic, physical, social, and emotional conditions, with emphasis on academic performance by:

Element 1: Respectful Learning Environment
Modeling and fostering respectful communication with students while appreciating differences of opinion and facilitating respectful classroom discussion.

Element 2: Classroom Safety
Involving students in establishing clear guidelines for behavior that support a developmentally appropriate and safe learning environment while consistently following through with clear expectations, procedures, norms and protocols.

Element 3: Classroom Organization
Strategically organizing and structuring the physical classroom environment for optimal student learning.

Element 4: Growth-Oriented Classroom Climate
Cultivating a classroom culture that encourages rigorous learning, perseverance and promotes critical thinking.

*IMAGE RETRIEVED FROM **USBE** WEBSITE.*

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[26] Utah State Board of Education. (2023, August). *Utah Effective Teaching Standards*. https://schools.utah.gov/curr/educatordevelopment/classroomteachers/UtahEffectiveTeachingStandards.pdf.

USBE provides additional resources more focused on behavior within the behavior support program. This includes USBE technical assistance resources and behavior health toolkits, as described in the Policies and Practices section. USBE also publishes monthly newsletters that are all publicly available. The most recent newsletter from February 2025 includes three behavior topics: MTSS, Cultural Responsiveness, and Trauma Informed Practices. It also includes resources and upcoming trainings related to behavior services:

1. Section 504 Webinar on Accommodations and Related Services in the General Education Setting
2. Prevention and Protective Factors Trainings
3. Prevention Restorative Practices: Foundational Training (offered twice)
4. Prevention Restorative Practices: Restorative Circles Training (offered twice)
5. Youth Mental Health First Aid Training[27]

An additional training highlighted in these newsletters is Mandt De-Escalation Training (for both new certification and re-certification).

When asked what LEAs' top needs were in regard to behavior and mental health supports, the second most common citation after Staffing **was Professional Learning, with 47% of LEAs listing it among their top three needs**. The main themes that emerged from the data collection tool and focus groups from LEA leaders in regard to professional learning and training include lack of funding, time, and relevance.

During the focus groups, LEAs cited that student behavior consumes a significant amount of staff time. **Leaders stated that staff need additional training in order to effectively support behavior within their classrooms and schools.** LEAs noted that barriers to training include:

- Financial resources to pay for online training and to hire trainers
- Costs and logistical challenges of covering classes while teachers attend trainings, most of which (including those offered by USBE) take place during the school day

Many LEA leaders also believe that USBE-provided training is at times removed from the current realities of the student behavior landscape, including the severity and specificity of student behavior and the limitations of staff, time, and resources experienced by schools. Some professional learning that they would like to see expanded or added include:

- Behavior training for all teachers that addresses aggressive behaviors they are seeing in the classroom
- Mental health training
- Social-emotional learning training for all staff
- De-escalation and conflict resolution training
- Classroom management training
- Trauma training for all teachers, administration, and support staff
- Professional development for families to help support their students' behavior needs

COMMUNITY PARTNERSHIPS

In the data collection tool, LEAs were asked about community organizations that they leverage to support student behavior and mental health needs. 48 LEAs responded to this section.

Responding LEAs reported 147 partnerships, including both paid and unpaid partnerships, with 93 different organizations. The most utilized organizations (listed by 3 or more LEAs) are shown in Figure 16, and a full list of community organizations listed is included in Appendix IV.

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[27] Utah State Board of Education. (2025, February 14). *Behavior Support Newsletter*.
https://schools.utah.gov/studentservices/_studentservicesprograms/_behaviordocs/Behavior%20Support%20Newsletter%20Feb%2002025%2002212025.pdf

Figure 16: Most Commonly Utilized Community Organizations

Partner Organization	Paid Partnerships	Unpaid Partnerships	Total
University of Utah	4	4	8
Blind Mule	5		5
Bear River Mental Health	4		4
Cook Center	2	2	4
JJS Youth Services	1	3	4
MCOT		4	4
SpEd Co	4		4
Utah Parent Center	2	2	4
Sandstone	3		3
Southwest Behavioral Services	1	2	3
The Family Place	1	2	3
Utah Behavioral	3		3
Valley Behavior Health	2	1	3
Wasatch Behavioral Health	3		3

As it relates to the quality of LEA's partnership experiences, **45% of all LEA respondents agreed or strongly agreed with the statement "Over the past 3 years, our district has successfully partnered with community organizations that provide behavior support."** As reflected in Figure 17, there is significant variance in LEAs' experiences partnering with community organizations.

FIGURE 17: OVERALL EXPERIENCE WITH COMMUNITY PARTNERS: LEA RESPONSES TO STATEMENT "OVER THE PAST THREE YEARS, OUR DISTRICT HAS SUCCESSFULLY PARTNERED WITH COMMUNITY ORGANIZATIONS THAT PROVIDE BEHAVIOR SUPPORT."
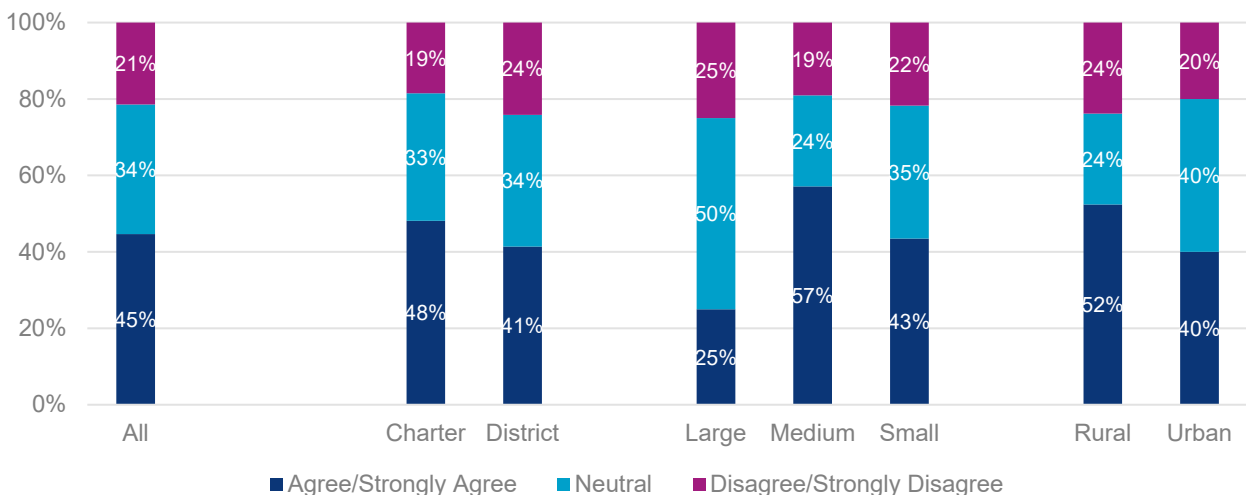
Data derived from LEA survey conducted by PCG, November 2024.

The largest disparity exists across LEA size, with **only 25% of large LEAs reporting successful partnerships, compared with 57% of medium and 43% of small LEAs**. **Rural LEAs more often reported successful partnerships (52%) compared with urban LEAs (40%)**.

However, rural LEAs responded less positively to the statement, "There are community organizations geographically accessible in my area to effectively meet our student behavior support needs," with 33% of rural LEA respondents agreeing or strongly agreeing, compared to 51% of urban LEAs (Figure 18). In the survey, LEAs shared:

- "*Being more rural than most districts, the lack of access to higher-level facilities, support, or resources has made it very difficult to address the needs of the students in our district.*"

- "*Being rural and remote means there is a lack of readily available community sources to help needy families.*"

This data indicates that **rural LEAs have more limited access to organizations locally but have found greater levels of success** in the partnerships that they have been able to establish.

FIGURE 18: LOCAL ACCESSIBILITY OF COMMUNITY ORGANIZATIONS – LEA RESPONSES TO STATEMENT: "THERE ARE COMMUNITY ORGANIZATIONS GEOGRAPHICALLY ACCESSIBLE IN MY AREA TO EFFECTIVELY MEET OUR STUDENT BEHAVIOR SUPPORT NEEDS."
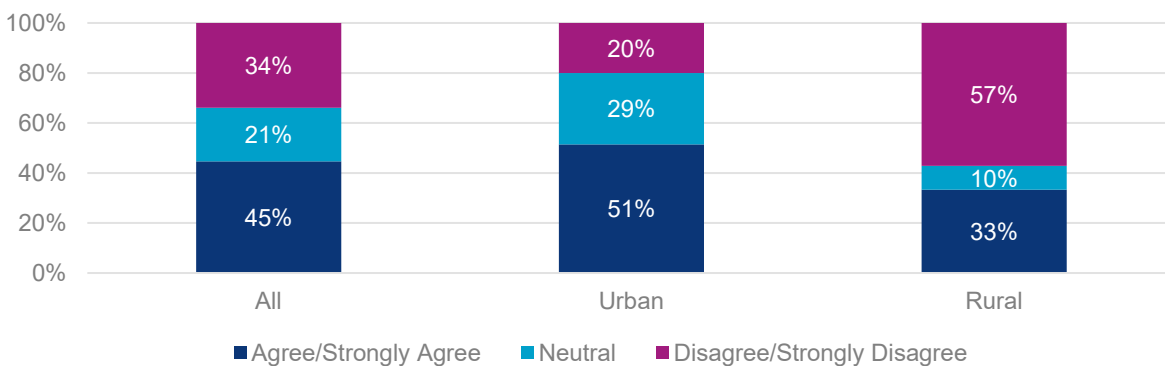
Data derived from LEA survey conducted by PCG, November 2024.

LEAs were also asked about timeliness and relevance of services available through community organizations. Overall, **39% of LEA respondents agreed or strongly agreed with the statement, "When I need specific student behavior support services, I am able to access those services from these organizations in a timely manner"** (Figure 19). In focus groups, LEAs note long, and growing, waitlists for needed services. LEAs also mention a lack of availability of services for students who are uninsured or who have private insurance, as opposed to those who have Medicaid. As in the statement about local accessibility of community organizations, **large LEAs responded less favorably** (25% agreed or strongly agreed) than medium and small LEAs (43% of each agreed or strongly agreed). In focus groups, **LEAs noted significant challenges in finding partners that can meet the volume of student needs**, which presents a particular challenge for large LEAs. Charters, which tend to serve fewer students than districts, had more favorable experiences (56%) with timeliness and relevance when compared with districts (24%). Urban districts had more favorable experiences (46%) than rural (29%).

FIGURE 19: TIMELINESS AND RELEVANCE OF COMMUNITY SERVICES: LEA RESPONSES TO STATEMENT, "WHEN I NEED SPECIFIC STUDENT BEHAVIOR SUPPORT SERVICES, I AM ABLE TO ACCESS THOSE SERVICES FROM THESE ORGANIZATIONS IN A TIMELY MANNER."
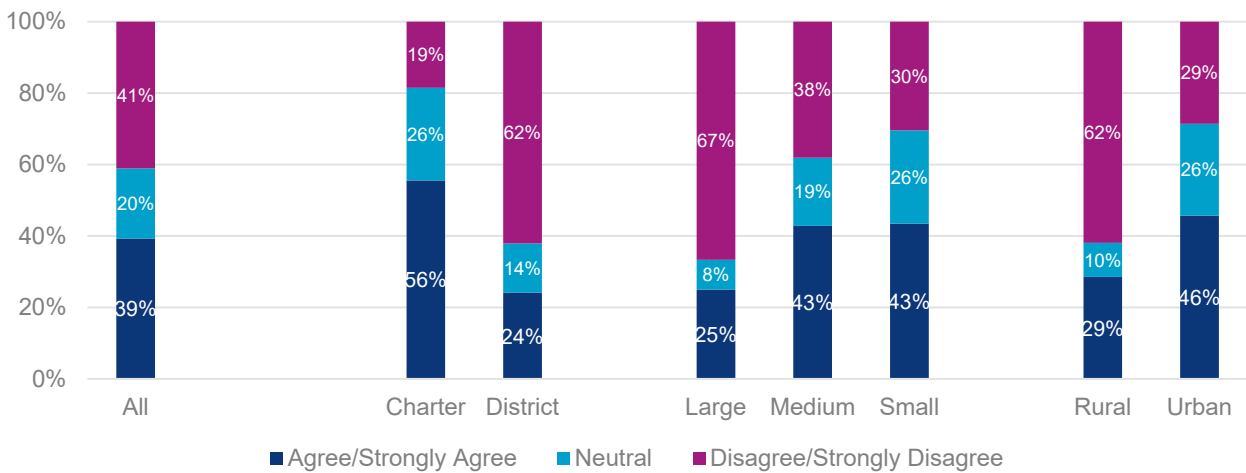
Data derived from LEA survey conducted by PCG, November 2024.

Additionally, LEAs consistently expressed a need for services to meet the most acute or severe student needs. Specifically, LEAs note a need for community services that have the capacity to support needs related to:

- Violent and aggressive behavior, including among early elementary students
- Self-harm and suicidal behavior
- Self-contained students

While there were numerous gaps and opportunities named related to community partnerships, there were several partnerships that were described by LEAs as successful, which can serve as exemplars within the state:

- **University of Utah:** Eight respondent LEAs located in Wasatch Front (4), Central Utah (1), Northeastern Utah (1), Southeast Utah (1), and Southwest Utah (1) describe existing partnerships with the University of Utah, including the University's School-Based Collaborative and its Technology in Training, Education, and Consultation Lab (U-TTEC) Well-Being Teams. These partnerships include paid contracts and unpaid partnerships. All seven respondents (100%) reported satisfaction with the outcomes of the services provided. LEA partnerships with the University of Utah include behavioral assessments, mental health screenings, crisis intervention services, family engagement and education, group and individual counseling, case management, and professional development.

- **Blind Mule Behavioral Services:** Five respondent LEAs, all located in Wasatch Front, report partnering with Blind Mule, a service provider that focused on school-based behavior support.[28] Of the five LEAs that have partnered with Blind Mule, four (80%) reported satisfaction with the outcomes of the services provided by the organization (the fifth LEA did not answer this survey item). LEAs reported using Blind Mule to conduct behavior assessments; crisis intervention; social skills groups; and professional learning for special education and administrative staff, including in de-escalation strategies.

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[28] Blind Mule Behavioral Services. *Behavior Support Services.* Retrieved December 12, 2024 from https://www.blindmule.org/behavior-support-services.

- **Special Education Consulting Services (SPEDCO):** Four respondent LEAs, all located in Wasatch Front, report partnering with SPEDCO, a consulting firm with a focus on implementation of effective instructional programs, compliance with state and federal requirements, identification of students with disabilities, and retention of Special Education staff.[29] Three of the four respondents (75%) reported satisfaction with the outcomes of SPEDCO's services, with the fourth responding neutrally. LEAs note using SPEDCO for assessments and screenings, psychoeducation, referrals, professional development, and consultation.

- **Utah Parent Center (UPC):** Four respondent LEAs located in Wasatch Front (2), Northern Utah (1), and Northeastern Utah (1) report partnering with Utah Parent Center, a non-profit that provides support, trainings and workshops for parents of children and youth with disabilities. Three of the four respondents (75%) reported satisfaction with the outcomes of UPC's services, with the fourth responding neutrally. LEAs report using UPC for Applied Behavior Analysis (ABA) services, assessments, crisis intervention, family engagement and education, parent support groups, and individual and group support.

FUNDING

Overview of Education Finance in Utah

In FY 2024, the state of Utah had an education budget of $7.7 billion.[30] The majority of these funds (59%) came from the state.[31] Like many other states, Utah uses a foundation funding model that allocates funds based on average daily membership (ADM).[32] For the state's primary funding formula, the Minimum School Program (MSP), ADM is used in conjunction with Weighted Pupil Units (WPU) to account for the disparate costs of funding particular student groups and programs, such as special education or career and technical education.[33] The vast majority (86%) of state funds are allocated through the Minimum School Program (MSP). The MSP includes both state and local sources of funding, with the state providing 76% of MSP funds.[34] In FY 2023, The state also provided another $77 million to LEAs in the form of both formula and competitive grants.[35]

In FY 2022, the most recent year with national data for all 50 states and Washington D.C., **Utah had the lowest per pupil spending in the country at $9,552, as well the lowest per pupil spending on student support services at $518 per pupil**.[36] Utah's per pupil education revenue as a percentage of the state's total personal income, which is a way to measure states' investment in education relative to their wealth, is 38th nationally (see Figure 20).

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[29] SPEDCO. *About Us.* Retrieved December 12, 2024 from https://www.spedcosolutions.com/about-1.
[30] Utah State Board of Education. *Annual Report 2025.*
https://schools.utah.gov/superintendentannualreport/2025USBEAnnualReport.pdf
[31] Ibid
[32] Education Commission of the States. *50 State Comparison.* https://files.eric.ed.gov/fulltext/ED615997.pdf
[33] Utah State Legislature. *Minimum School Program: Overview of Weighted Pupil Unit Formulas*.
https://le.utah.gov/interim/2015/pdf/00000358.pdf
[34] Utah State Board of Education. *Annual Report 2025*.
https://schools.utah.gov/superintendentannualreport/2025USBEAnnualReport.pdf
[35] Utah State Board of Education. *Financial Reporting – Revenue for Fiscal Year 2024*.
https://schools.utah.gov/financialoperations/reporting
[36] United States Census Bureau. *2022 Public Elementary-Secondary Education Finance Data*.
https://www.census.gov/data/tables/2022/econ/school-finances/secondary-education-finance.html

Measure	Total	National Rank
Per pupil expenditure	$9,552	51st
Per pupil expenditure – student support services only	$518	51st
Per pupil revenue as percentage of total state personal income	3.74%	38th
State share of education revenue (excluding federal sources)	55%	14th

Data retrieved from United States Census Bureau, "2022 Public Elementary-Secondary Education Finance Data". National data includes the 50 states and Washington D.C.

The proportion of state funding varies across Utah LEAs, with districts receiving 49% of their funds from the state while charter schools receive 88% of their funds from the state.[37] This puts Utah in the top third of states in terms of the percentage of funds that LEAs receive from the state; in other words, **Utah LEAs rely on state funding much more than LEAs in most other states**.

FIGURE 21: FY 2024 LEA REVENUE BY SOURCE
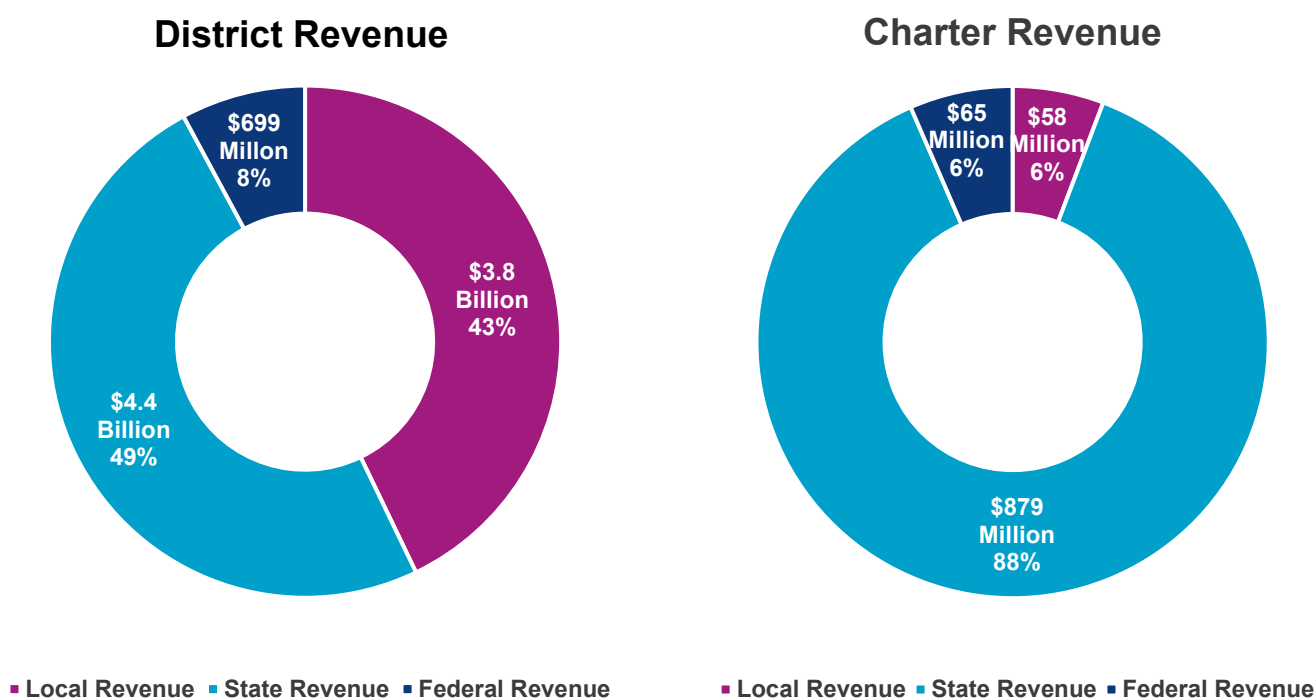
Data retrieved from Utah State Board of Education, "Revenue for Fiscal Year 2024".

Overview of Behavior Funding in Utah

The state provides funds specifically for student behavior support through both **formula and competitive grants**. In order to receive formula funds, LEAs must submit a plan to USBE detailing how they plan to use the funding, and in some cases match this restricted state funding with either local or unrestricted state funding. One example of a formula funding stream specifically for student behavior is the 'Student Health

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[37] Utah State Board of Education. *Financial Reporting – Revenue for Fiscal Year 2024*.
https://schools.utah.gov/financialoperations/reporting

and Counseling Support Program', which provides LEAs with "targeted school-based mental health support, including clinical services and trauma-informed care".[38] There are also fixed rate grants administered by USBE that provide LEAs with a set amount of funds per school. This includes several grant programs focused specifically on student behavior and mental health, including the Suicide Prevention grant ($1,000 per school) and the Positive Behaviors grant ($4,000 per school). USBE also administers competive grants which provide LEAs with dedicated funds to support student behavior, including the School Based Mental Health grant ($1 million in total funds), the Student Health and Counseling Support grant (roughly $750,000 in total funds), and the Prevention Block grant (roughly $4.1 million total funds).[39]

In FY 2024, federal funds accounted for 8% of LEAs revenue, inclusive of federal COVID-relief funds (primarily ESSER). **Utah LEAs received $862 million in the three rounds of ESSER funding – an average of $5.6 million per LEA** - which was required to be spent by September 30, 2024.[40]

Funding Sources

As part of PCG's data collection tool, LEAs reported the sources of funding they used on student behavior-related expenditures in FY 2024, including staffing, contracts with external organizations, mental health programs or initiatives (e.g. school wide programs like PBIS or SEL), training for staff on behavior management or mental health strategies, and resources and materials for mental health services. While LEAs are required to report the sources of all of their funds, they are not required to report the sources of funds used on particular kinds of expenses (in this case, student behavior and mental health support). PCG was able to collect this data from 47 LEAs across the state, tracing the amount spent on behavior and mental health expenditures back to the source of funding to determine which sources were most prevalent (Figure 22).

FIGURE 22: BEHAVIOR AND MENTAL HEALTH FUNDING BY SOURCE
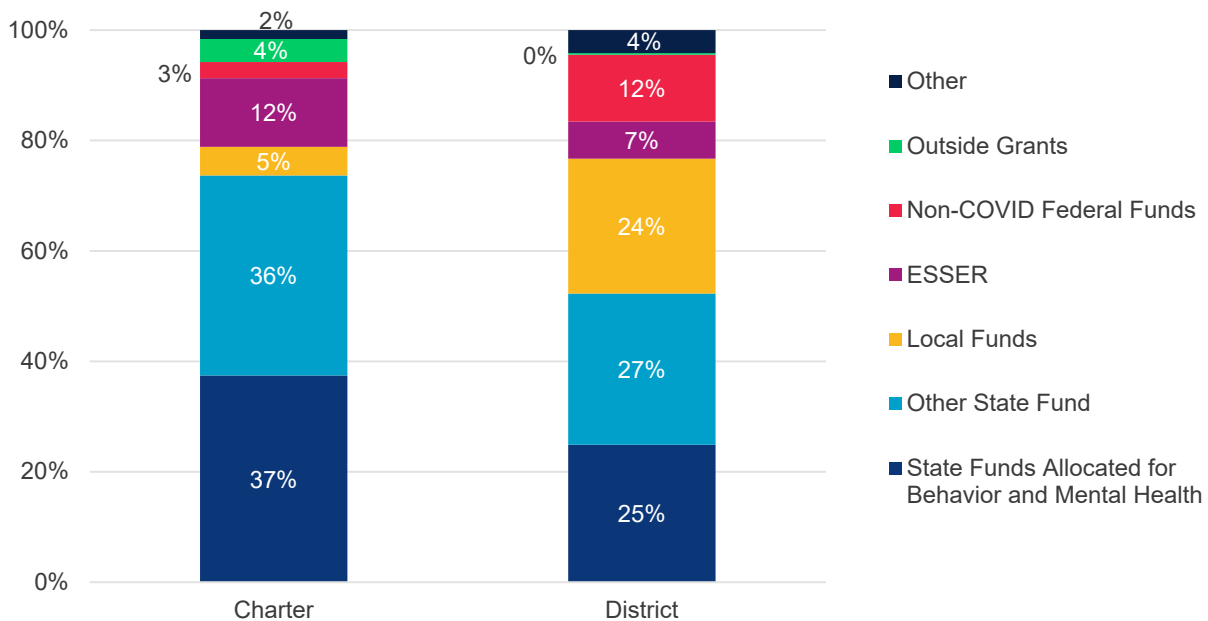
Data derived from LEA survey conducted by PCG, November 2024.

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[38] Utah State Legislature. *Minimum School Program: Overview of Weighted Pupil Unit Formulas*.
https://le.utah.gov/interim/2015/pdf/00000358.pdf
[39] Utah State Board of Education. *Annual Report 2025*.
https://schools.utah.gov/superintendentannualreport/2025USBEAnnualReport.pdf
[40] Utah State Board of Education. *ESSER Reserve Approved Projects*.
https://schools.utah.gov/coronavirus/_corona_virus_/_caresactfunding_/ESSERReserveApprovedProjects.pdf

In part due to the infusion of ESSER funds, districts in Utah relied much less on local funding sources for behavior expenditures than other expenses, with local funds supporting only 24% of their behavior expenditures despite being 44% of their total revenue. Federal funds were over-represented in both district and charter school's behavior funding sources, suggesting that **federal funds (including both ESSER and other non-COVID-relief funds) have been a particularly important funding stream for expenses related to student behavior and mental health**. Of the 47 LEAs that provided data on the sources of their behavior funding, 10 of them reported over 10% of their total behavior expenditures were funded by ESSER. Charter schools, however, used an even greater proportion of ESSER funding on behavior expendtitures than districts. Charters were able to supplement state and federal funding with funds from outside grants, which made up 4% of their student behavior related funding in FY 2024.

In focus groups, school leaders described COVID-relief funding (primarily ESSER) as having a large impact on student outcomes by allowing LEAs to hire additional staff and provide high-cost services to students. With ESSER funds expiring in fall of 2024, LEAs expressed concerns over the continuity of the staff and services that this funding has afforded them. LEAs reported that they have already had to make difficult decisions about which programs and staff to keep, and that the **expiration of COVID funds may come at the expense of both staff and high-cost services for their highest-need populations**.

In order to understand the relative distribution of funding across LEAs, PCG analyzed the reported sources of funding per pupil across different segments of LEAs; charter and district, small (1,000 students or fewer), medium (1,001-10,000 students) and large (10,000 or greater) LEAs, and LEAs located in urban and rural areas for the 42 LEAs that provided this data (please note: 5 LEAs were excluded due to discrepancies in their reported funding and expenditures).

FIGURE 23: AVERAGE PER PUPIL BEHAVIOR FUNDING BY SOURCE – LEA TYPE
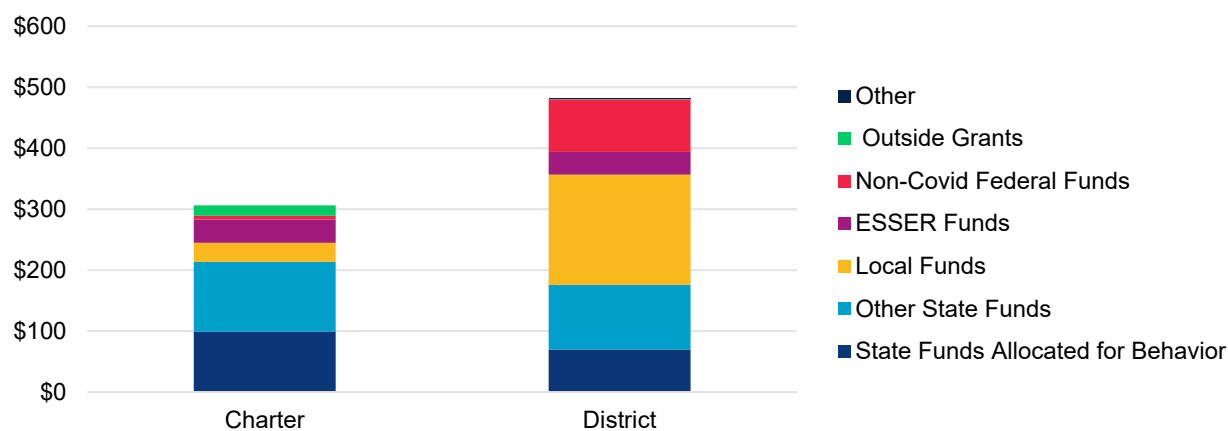
Data derived from LEA survey conducted by PCG, November 2024.

While the total amount of funding for districts was higher than it was for charters ($481 and $306, respectively), charter schools received more state funding specifically allocated for student behavior ($99 to $69). The largest drivers in the difference between charter and districts were local funds and non-COVID federal relief funds, as districts saw significantly more of both sources of revenue than charter schools.

FIGURE 24: AVERAGE PER PUPIL BEHAVIOR FUNDING BY SOURCE – LEA SIZE
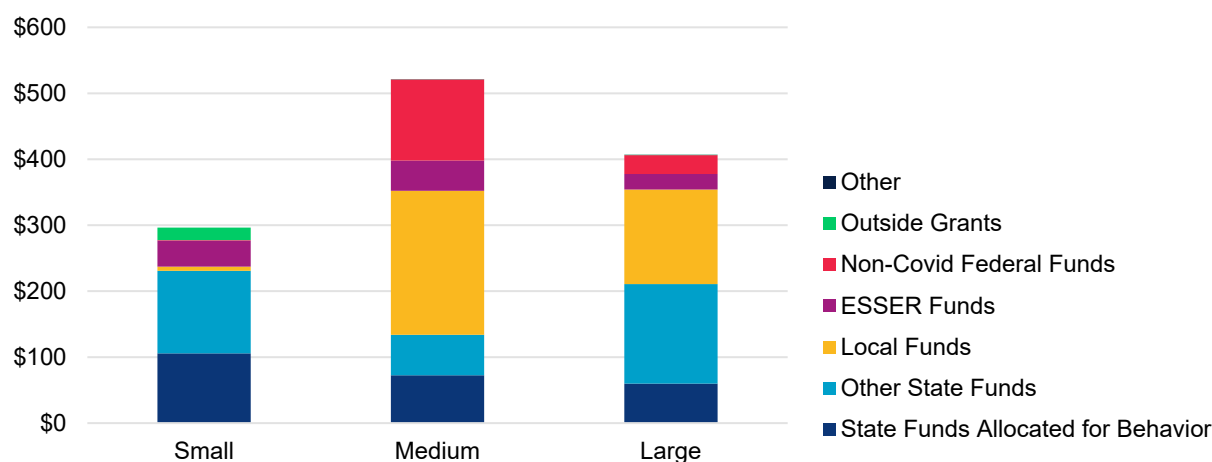
Data derived from LEA survey conducted by PCG, November 2024.

Across LEAs of different sizes, medium sized LEAs (1,001-10,000 students) saw the greatest revenue per pupil, largely driven by local funds and non-COVID federal funds. While small (1,000 students or less) and large LEAs (more than 10,000 students) saw less *total* revenue, they both received more state funding than medium sized LEAs, suggesting that state funding mechanisms are helping to make up the difference in local revenue for these LEAs.

FIGURE 25: AVERAGE PER PUPIL BEHAVIOR FUNDING BY SOURCE BY LEA LOCATION
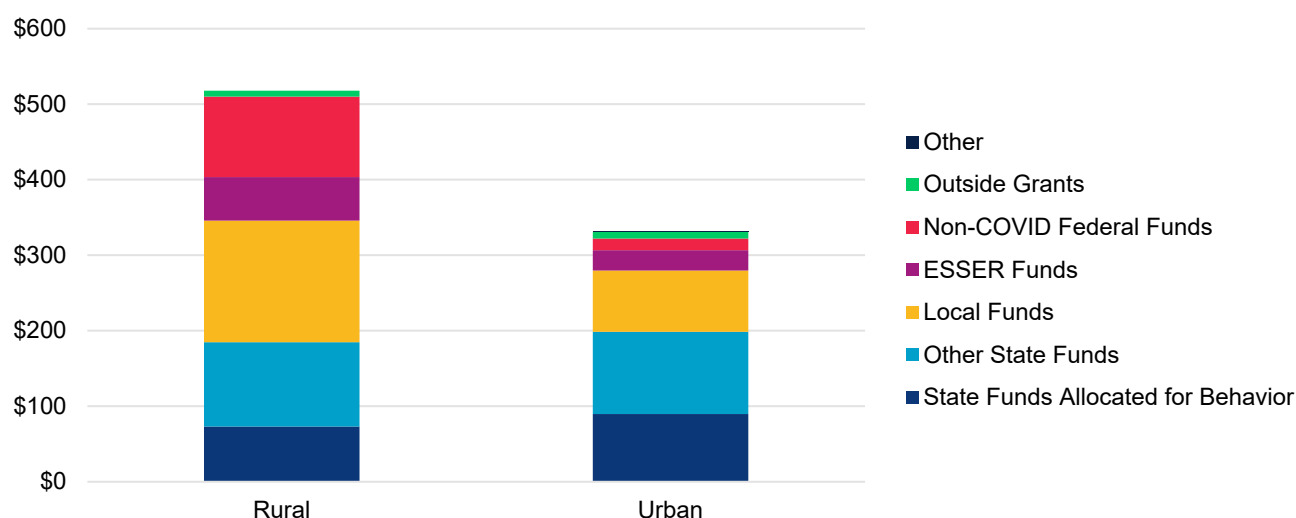
Data derived from LEA survey conducted by PCG, November 2024.

Rural LEAs reported more total revenue than urban districts. Both rural and urban LEAs received a similar amount of state funding per pupil. The difference in funding sources for rural districts may reflect the need to *expend* more funds and thus more activity to secure other sources of funding. This theme that is discussed further in the *Behavior and Mental Health Expenses* section.

Funding Restrictions and Reporting Requirements

Aside from funding shortages, school leaders described the **restrictions on and reporting requirements for state funds** as being the greatest challenge that they faced in terms of funding student behavior-related

staff and programs. In describing the impact of reporting requirements for state and federal funds, one school leader said: "I spend 95% of my time for just 5% of my budget." While LEAs appreciated the state's investment into student wellbeing by way of grant funding, school leaders expressed frustration with the quantity of *low dollar* grants offered by the state. This is particularly true of competitive grants, which require not only the upfront investment of writing and applying for the grant, but also the ongoing staff time and resources spent on meeting and reporting on the requirements thereof. Particularly for small dollar grant opportunities, school leaders reported that the time spent applying for and reporting on fundind made them question whether their efforts were worth their time.

School leaders said that their capacities would be greatly expanded through **larger, consolidated grant opportunities that reduce the reporting requirements and afford them broader flexibility** in the use of funds. School leaders cited the At-Risk Student Program as an example of an effective state funding stream, stating that the state's consolidation of smaller grants into a larger pool of funds has created efficiencies and flexibility at the LEA level. Another example of consolidated grant funding is the Prevention Block grant. In FY 2024, when given the option to either apply for the Prevention Block grant (which consolidated several grants into one source) or the Substance Abuse Prevention grant, every LEA applied for the Prevention Block grant.[41] Figure 26 describes several of the state's most prominent funding sources for LEAs related to behavior and mental health support.

FIGURE 26: STATE-PROVIDED GRANTS FOR STUDENT BEHAVIOR AND MENTAL HEALTH

Grant	Description	Funding
School Based Mental Health Qualifying Grant Program (53F-2-415)	Provides funding to LEAs to targeted school-based mental health support, including clinical services and trauma-informed care.	In FY25, USBE awarded $26 million in funding across 41 school districts, 74 charter schools, and 4 regional education service agencies.
Mental Health Screening Programs (53F-2-522)	Provides Formula grant funding to support LEAs in screening students for anxiety, depression, and suicide ideation.	In FY25, USBE awarded $1 million in funding across 27 districts and 32 charters.
Positive Behaviors Plan (53G-10-407)	Provides uniform funding to LEAs in support of their creation of a positive behavior plan meant to address the root causes of student substance use, including peer pressure and mental health.	In FY25, USBE awarded 1,036 schools with $4,000 each, totaling $4.1 million in funding.
Suicide Prevention Programs (53G-9-702)	Provides uniform funding for schools to implement suicide prevention programming.	In FY 2025, USBE awarded 1,036 schools with $1,000 each, totaling just over $1 million in funding.
Partnerships for Student Success (53F-5-401)	Provides funding to facilitate public-private partnerships to address kindergarten readiness, grade three and eight mathematics and reading proficiency, high school graduation, postsecondary eduactional attainment,	In FY 2024, USBE distributed over $2.8 million in funding to 27 LEAs.

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[41] Utah State Board of Education. *Annual Report 2025*.
https://schools.utah.gov/superintendentannualreport/2025USBEAnnualReport.pdf

Grant	Description	Funding
	physical and mental health, and development of caree skills and readiness. Partnering organizations must match at least two times the grant allocation, with half coming from the participating LEA.	
Prevention Block Grant	Allows for LEAs to braid grant funding attached to the Suicide Prevention, Positive Behaviors Plan, and Susbtance Abuse Prevention grants to create programs that target shared risk factors.	In FY 2024, USBE distributed nearly $3.6 million in funding across 34 LEAs.

Note. Data retrieved from the Utah State Board of Education Annual Report 2025.

LEAs also cited the **restrictions on funding as being a barrier** to providing support to students with behavioral and mental health needs. LEAs reported that restricted funds have the effect of both (1) minimizing the ability of districts to determine what their priorities are in terms of funding and (2) creating situations where funds are forced to be used on expenses that are not as pressing to the LEA. In a focus group, one school leader gave the example of grant funding that they won to provide period products to students; given that the funds were restricted, they were forced to buy more period products than the LEA could reasonably store. This school leader said that while they appreciated the funding, they wish that there was greater flexibility to also fund other pressing student needs. Multiple participants in the focus group reiterated this experience.

In PCG's data collection tool, LEAs reported how much of their funding was restricted by source. PCG was able to collect summative data across all LEAs as to the total amount of restricted funds across all responding LEAs for each funding source (Figure 27).

FIGURE 27: PERCENTAGE OF RESTRICTED FUNDS BY SOURCE
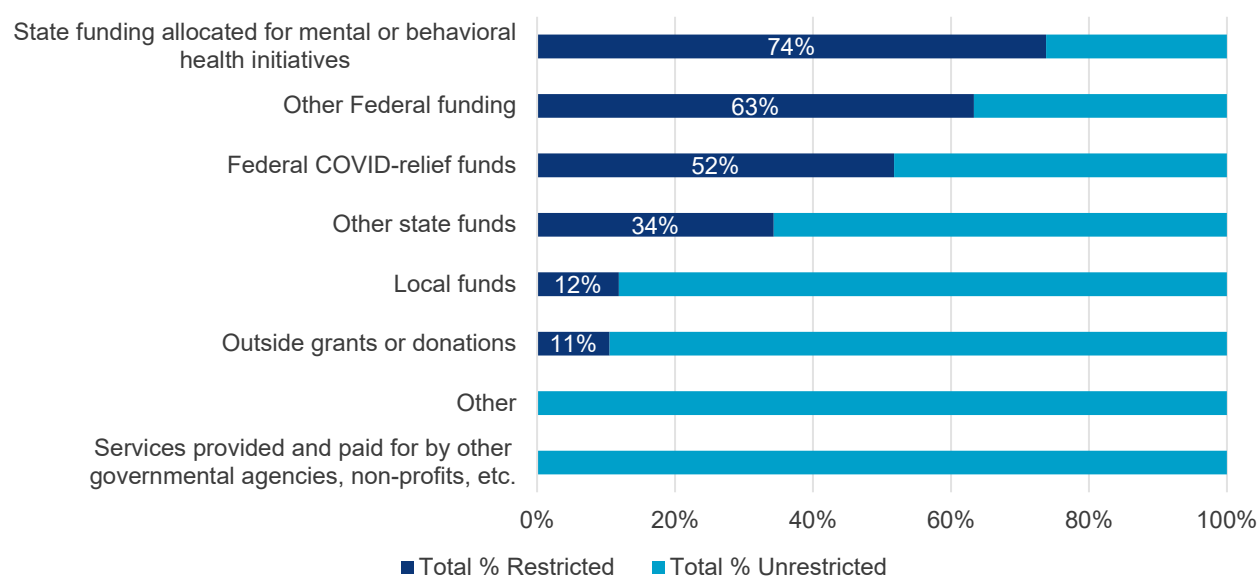
Data derived from LEA survey conducted by PCG, November 2024.

LEAs reported that **state funds designated for behavior and mental health were the most restricted, followed by federal funds and ESSER funds**, with local funds and outside grants being the least

restricted. LEAs reported that restricted funds made it difficult to allocate funding to high-need areas, making LEAs finite unrestricted funds an invaluable resource. LEAs reported that often their restricted funds are insufficient to cover the costs of student behavior. Additionally, the rigid application of funding restrictions can have the impact of preventing staff who may otherwise benefit from professional development related to student behavior from accessing it. LEAs reported that as the behavior needs of their general education student population grow, their staff have asked for professional development to help support those students. Given state and federal restrictions on special education funding, LEAs have faced difficulties in providing a high level of training to general education teachers, as they are able to do for special education teachers.

Behavior and Mental Health Expenses

Nationally, staff salaries and benefits are the largest cost driver for LEAs, accounting for nearly 80% of all expenditures.[42] Utah is no different, with staff salaries and benefits making up 82% of statewide expenditures.[43] PCG asked LEAs to provide the total amount that they spent on staff who primarily support student behavior, including roles such as mental health specialists, school psychologists, social workers, school counselors, behavior paraprofessionals, behavior aides, and behavior specialists.

FIGURE 28: AVERAGE COST OF BEHAVIOR STAFF BY LEA SUBGROUP

LEA Type	Average Cost of Behavior Staff	Average Cost of Behavior Staff Per Pupil
District	$8,189,838	$556
Charter	$323,717	$497
LEA Size		
Small	$194,331	$510
Medium	$1,633,681	$581
Large	$16,498,307	$466
Rural/Urban		
Rural	$2,209,386	$591
Urban	$5,773,076	$483
Total	**$4,323,439**	**$527**

Note. One specialized LEA was removed from this reporting due to serving a high-need population and therefore spending considerably more than other LEAs.

Staffing expenses for behavior support roles varied across different segments of LEAs. Small and medium LEAs spent $44 and $115 more per pupil than large LEAs, while rural LEAs spent $108 per pupil more than urban LEAs.

School leaders from smaller, rural LEAs noted the challenges they face in meeting the needs of students given their limited local and staffing resources. Additionally, rural LEAs may have less opportunities to partner with community organizations and contract out services, meaning that they must provide services in house. In describing the challenges of rural schools in funding behavior supports, one school leader said:

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[42] National Center for Education Statistics. *Public School Revenue Sources*. https://nces.ed.gov/programs/coe/indicator/cma/public-school-revenue
[43] United States Census Bureau. *2022 Public Elementary-Secondary Education Finance Data*. https://www.census.gov/data/tables/2022/econ/school-finances/secondary-education-finance.html

 "Like many small and rural school districts without the economies of scale that larger school districts have, the investment of financial, human, and time resources needed to support student behavior and mental health is proportionately higher. We are unable to create the same variety of programming to support our students' needs."

As discussed in the previous section, behavior support staff are not the only staff who are expected to support students in managing their behaviors and mental health. The data collection tool distributed by PCG asked LEAs to identify other staff who work on supporting student behaviors, their compensation, and an estimate of the percentage of time that they spend on behavior support. Using this data, PCG was able to determine how much LEAs spent in FY 2024 on student behavior-related expenses inclusive of staff time for positions that may not be traditionally considered 'student support' roles. Some of the positions that LEAs identified as providing behavior support included classroom teachers, principals, special education teachers and directors, student resource officers, bus drivers, deans of students, and speech language pathologists. When looking at the cost of paying these staff *just for the time they are providing student behavior support,* districts spent an average of at least $1.87 million. Given that these staff's primary role is not to provide specialized behavioral supports to students, the rising need for student behavior support not only (1) diminishes staff capacity to serve in their primary position but also (2) costs LEAs a considerable amount given that many of these roles include higher-paid, specialized staff providing this support.   PCG also collected data on LEAs total behavior expenditures (not inclusive of non-behavior staff time). Utah LEAs reported spending an average of $2.7 million on student behavior related expenses in FY 2024, ranging from under $40,000 to over $25 million. Responding LEAs spent an average of $391 per pupil.

FIGURE 29: BEHAVIOR-RELATED STUDENT EXPENDITURES BY SEGMENT

LEA Type	Average Student Behavior Expenditures	Average Per Pupil Student Behavior Expenditures
District	$5,884,046	$404
Charter	$290,746	$379
LEA Size		
Small	$192,788	$378
Medium	$1,402,099	$380
Large	$12,880,681	$458
Rural/Urban		
Rural	$1,889,990	$406
Urban	$3,048,247	$384
Total	**$2,706,035**	**$391**

Note. In order to preserve data quality, LEAs with an outlier per-pupil behavior spend of under $50 and above $3,000 were removed.

Unlike the data on per pupil staffing expenditures, LEAs self-reported behavior spending does not vary considerably across different segments. Most notably, the gap in spending between smaller, rural LEAs and larger, urban LEAs shrinks, suggesting that rural LEAs may not be spending as much on non-staff expenses, such as programs and outside serviices. This could be due to the limited availability of external providers in rural areas – this theme is explored more thoroughly in the 'Community Partnerships' section. Figure 30, Figure 31, and Figure 32 display the distribution of per pupil behavior expenditures, excluding the two LEAs that spent upwards of $3,000 per student.

FIGURE 30: PER PUPIL BEHAVIOR EXPENDITURES BY LEA TYPE
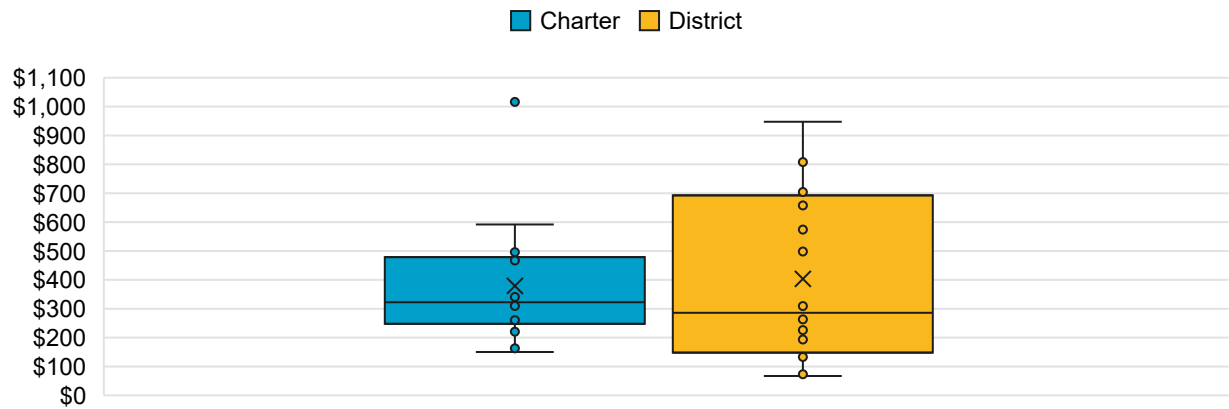
Data derived from LEA survey conducted by PCG, November 2024.

FIGURE 31: PER PUPIL BEHAVIOR EXPENDITURES BY LEA SIZE
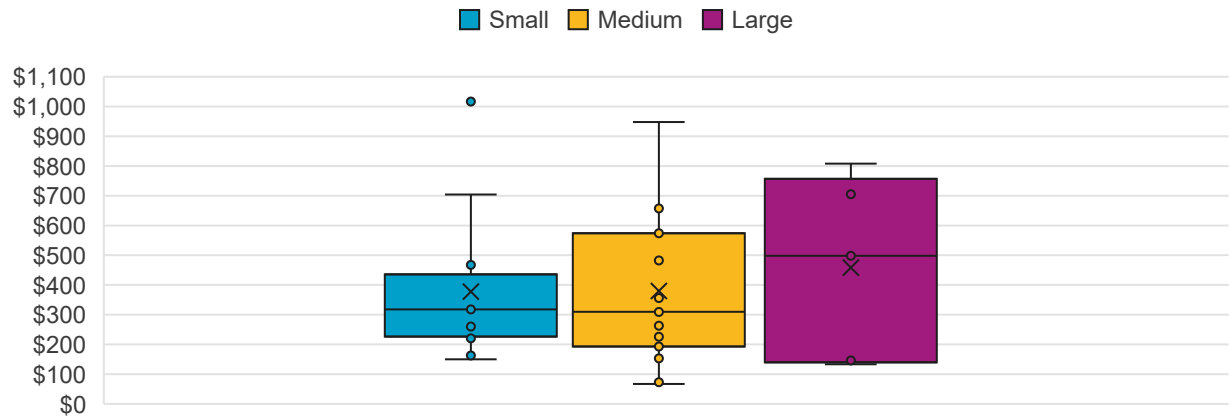
Data derived from LEA survey conducted by PCG, November 2024.

FIGURE 32: PER PUPIL BEHAVIOR EXPENDITURE BY LEA LOCATION
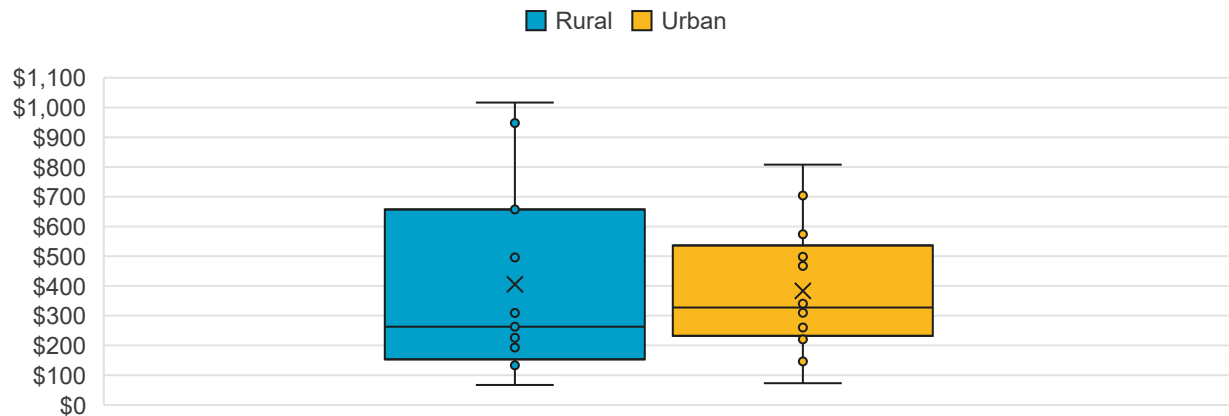
Data derived from LEA survey conducted by PCG, November 2024.

Given that there is is relative parity in both funding and behavior expenditures across different segments of LEAs, this suggests that funding shortages are uniform across the state, meaning that *all* LEAs would

benefit from additional assistance. Throughout the project, LEAs emphasized that insufficient funding is a significant challenge. In the data collection tool distributed by PCG, funding was the third most common top need across all LEAs. Given that funding underpins many of the staffing and policy implementation challenges that LEAs face, addressing the statewide funding gaps for behavior and mental health is of paramount importance.

SUMMARY OF STRENGTHS AND CHALLENGES

Policies and Practices

Strengths

- **Adoption of Effective Practices, in Places**. While the information shared through the LEA data collection tool indicates that there are gaps in LEA development and implementation of policies, frameworks, and practices, there are promising strengths throughout the state that can be built on and further scaled. Specifically, many LEA respondents report having a **PBIS framework** and an **MTSS** framework in place. PBIS and MTSS, which are promoted by USBE, are associated with positive changes in student behavior and reduced student suspensions.[44,45,46]

- **High-Impact Practice Guidance.** In focus groups and in the data collection tool, multiple LEAs referenced utilizing **LRBI** practice guidance produced by USBE. LEAs described finding USBE's LRBI resources to be **useful, relevant, and high-quality**.

Challenges

- **Inconsistent Adoption of Evidence-Based Practices.** The data shared by LEAs indicates potential gaps in adoption of evidence-based and/or legislatively mandated practices, such as trauma-informed practice and LRBI.

- **Resources Required for Policy Implementation.** LEAs noted that legislative mandates create a significant administrative burden, requiring staff time and resources that LEAs describe as already very limited.

- **Gaps in Practice Guidance and Resources.** LEAs noted a need for additional guidance and resources that address pressing challenges, including: intense behavior in early elementary (preK-2); aggressive or violent behaviors; and family engagement, support, and expectation management.

- **Lack of Monitoring and Measurement.** LEAs described gaps in their ability to monitor the adoption and effectiveness of their behavior and mental health interventions and strategies across the LEA's network of schools.

- **Diversity of Needs among LEAs.** LEAs of various types, sizes, and locations perceive that legislative mandates and grants focused on behavior and mental health are overly narrow and

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[44] James, A. G., Noltemeyer, A., Ritchie, R., & Palmer, K. (2019). Longitudinal disciplinary and achievement outcomes associated with school-wide PBIS implementation level. Psychology in the Schools, 56(9), 1512–1521. https://doi.org/10.1002/pits.22282

[45] Nitz, J., Brack, F., Hertel, S., Krull, J., Stephan, H., Hennemann, T., & Hanisch, C. (2023). Multi-tiered systems of support with focus on behavioral modification in elementary schools: A systematic review. *Heliyon*, 9(6), e17506. https://doi.org/10.1016/j.heliyon.2023.e17506

[46] Scott, T. M., Gage, N. A., Hirn, R. G., Lingo, A. S., & Burt, J. (2019). An examination of the association between MTSS implementation fidelity measures and student outcomes. Preventing School Failure, 63(4), 308–316.

prescriptive (a "one size fits all" approach) and limit LEA's abilities to implement the strategies that best fit the LEA and the students they serve.

Staffing

Strengths

Most LEA leaders list staffing as one of the top three resources or practices that their district has found successful related to behavior and mental health support. Three quarters of survey respondents listed staffing as one or more of the top three successes in supporting behavior and mental health at their LEA.

- **Promising practices focused on building staffing pipeline.** With the perceived challenge of retaining qualified behavioral staff, some LEAs have realized the benefits of growing their own staff. These LEAs see the benefits to training and upskilling paraprofessionals and other current staff who know the population. They believe that staff that start in a school and are trained by that school will be more likely to remain at the school and better serve the population at that school.

- **Staffing Retention**. LEA leaders reported a 90% one-year retention rate for employees supporting behavior in the data collection tool.

- **LEA's internal professional learning is perceived to be effective.** Most LEAs offer their own professional learning and the majority of LEA leaders that do offer it believe it is effective. While the state-offered professional learning is not as widely used and generally rated as neutral in its effectiveness more often than other sources of professional learning, the state does offer a wide range of professional learning opportunities that relate specifically to supporting behavior within schools throughout the year.

Challenges

- **General lack of personnel and lack of trained personnel.** Utah does not meet the recommended ratios for school psychologists, school social workers, and school counselors. In addition, LEA leaders find that it is difficult to recruit people in general, and specifically difficult to recruit individuals for roles that support special education. LEA leaders perceive that many of the educators who are new to the field are not leaving educator preparation programs with the necessary skills to support behavior at all levels.

- **Cost of personnel is high.** LEA leaders report that cost is a major factor in LEA struggles with attracting and retaining qualified and effective staff given that there are more lucrative employment options available for specialized mental health and behavior professionals. LEAs need funding to both attract and retain staff.

- **Inflexibility related to staff deployment.** In focus group data, LEA leaders reported that staff tied to special education or federal programs do not have the flexibility to see students as much as LEAs expect since these programs take up their time and personnel in these roles cannot be shared with general education and thus cannot support those students. These LEA leaders also report that general education staff often do not have the skills and training necessary to support behaviors that they see in their classrooms.

- **Professional Learning.** While there are areas of strength in the current professional learning landscape as described above, there are also opportunities for it to better serve the needs of the LEAs and Students in Utah.

o **Funding to support professional learning.** LEA leaders report needing additional training for their staff to support the perceived increasing behavior needs. They feel they need more money to get their staff access to online training, to get staff to train their teachers, and to hire substitute teachers to grant full time teachers the time to participate in formal training.

o **Relevance**. Many LEA leaders believe that USBE-provided training does not consistently meet their current needs around student behavior and does not prepare LEA staff to address the severity of behavior LEAs see today.

o **Many FTEs who support behavior as a formal or informal part of their job do not have formal training**.

Community Partnerships

Strengths

- **Opportunities with free partnerships.** In total, LEAs reported 61 unpaid partnerships serving more than 35,000 students across Utah. These partnerships include local health departments, non-profit organizations, healthcare providers, and institutions of higher education.

- **Exemplars of Successful Partnerships.** While only 45% of LEAs that participated in the data collection tool reported having successful partnerships over the last three years, there were several partnerships, including with universities, clinical service providers, and non-profit community organizations, that were described by LEAs as successful and impactful, which can serve as exemplars within the state.

Challenges

- **Services that meet acuity and severity of needs.** While partnerships with community organizations have supported LEAs in addressing some of their behavior and mental health needs, LEAs consistently expressed a need for services to meet the most acute or severe student needs. Specifically, LEAs note a need for community services that have the capacity to support needs related to self-contained students; violent and aggressive behavior, including among early elementary students; and self-harm and suicidal behavior.

- **Availability to meet demand.** Only a minority of LEAs report being able to access relevant services when they need them. In focus groups, LEAs note long, and growing, waitlists for needed services, and barriers for students without Medicaid.

- **Geographic accessibility of services.** Rural LEAs especially noted a lack of locally available resources to meet their needs.

Funding

Strengths

- **Variety of Funding Sources**. Utah has embedded student wellbeing and behavior support into its suite of funding streams and grant opportunities, including the School Based Mental Health Qualifying Grant, the Prevention Block Grant, and the At-Risk Students Program. These funds have allowed LEAs to develop programs to support students in making healthy, safe choices at home and at school.

- **Consolidation of Grants**. LEAs reported that the consolidation of grant opportunities, including most notably the Prevention Block Grant, has allowed them to streamline their reporting requirements and afforded them flexibility in terms of using funding. This is a practice that school leaders would like to see continue and expand.

Challenges

- **Funding Restrictions.** Restricted funds limit LEAs' flexibility to meet the unique needs of their students. This is most pronounced with state funds allocated for the purpose of supporting student behavior and mental health. School leaders emphasized that the local context of each LEA is different, and that they need funding to meet those needs.

- **Reporting Requirements.** While LEAs understood the need to report and track funds and spending, they reported spending a large amount of time fulfilling these requirements in service of only a small portion of their budget. LEAs have appreciated the consolidation of other grant opportunities and would like to see this practice extend to existing and future programs.

- **Lack of funding.** Utah ranks last in the United States in terms of per pupil expenditure and student behavior expenditures. Insufficient funding can render other initiatives – such as policy changes or educator pipeline programs – ineffective, as LEAs need funding to implement programs and hire staff. With the rising needs of students and expiration of federal COVID-relief funds, LEAs are in dire need of more funding.

IV. RECOMMENDATIONS

POLICIES AND PRACTICES

- **Streamline legislative and administrative requirements for LEAs.** To allow LEAs to more effectively use their limited resources towards student outcomes, USBE and the Utah state legislature should:
  - Conduct a comprehensive review of existing legislation and administrative requirements related to behavior and mental health, identifying and eliminating redundant or overly prescriptive requirements.
  - Avoid creating new mandates requiring significant administrative or programmatic changes without accompanying funding. Unfunded mandates place undue strain on already stretched district resources.
  - Before enacting new legislation or policies, conduct a thorough impact assessment to determine the potential burden on LEAs, including staffing, financial, and logistical implications. Incorporate feedback from districts during this process.

- **Increase policy flexibility and adaptability.** Recognizing the unique needs, resources and student populations of LEAs, develop policies that provide a framework or target but allow for flexibility in implementation. Additionally, USBE and the legislature can:
  - Establish clear, accessible, and timely waiver processes for LEAs seeking to deviate from specific regulations due to unique local circumstances.
  - Encourage and support pilot programs developed by LEAs to test innovative approaches to student behavior and mental health.

- **Disseminate guidance and resources focused on what LEAs most need.** Continue to expand USBE's suite of high-quality, evidence-based resources by developing resources focused on LEA's most pressing unmet needs, including:
  - Behavior in early elementary (preK-2).
  - Aggressive behaviors.
  - Family engagement, support, and expectation management.
  - Securing funding.

  To maximize relevance for LEAs, guidance and resources should be customizable to LEAs' unique circumstances.

- **Build LEAs' monitoring and assessment capacity.** The ongoing collection of data to inform practice and policy is a necessary component of a comprehensive approach to addressing student mental health and behavior needs.[47] To help build LEAs' capacity to monitor and assess the implementation and impact of their behavior and mental health strategies, USBE can provide training and technical assistance in this area, leveraging resources such as the National Center for School Mental Health's free SHAPE (School Health Assessment and Performance Evaluation) system, the monitoring and data frameworks embedded within the PBIS model, and/or the Measurement-based Care Approach. USBE can further support LEAs in this area by overseeing data collection, analysis, and reporting through a statewide database and dashboards.

STAFFING

- **Promote the practice of having a skilled point person at every school overseeing behavior and mental health services.** USBE can promote the practice of having an individual in every school to coordinate all supports related to behavioral and mental health including care, triage, professional development, ongoing support, implementation fidelity, and vetting programs. This point person could be an assistant principal, a special education director or teacher, or any other leader within the school who has the expertise in behavioral health to coordinate these supports at the school level.

- **Invest in professional learning that is relevant, meaningful, and engaging.** USBE should continue to offer professional learning to teachers and staff across the state and invest in making it more relevant to the current experiences of stakeholders. LEA leaders felt that professional learning provided by USBE was not always relevant to the experiences of staff within the LEAs. USBE can invest in providing professional learning on topics including aggressive behaviors; mental health, including crises; social emotional learning; de-escalation and conflict resolution; and trauma. This training can be encouraged for all teachers, administrative staff, and support staff. In addition, USBE can explore potential investments in online professional learning to increase the accessibility of professional learning programming.

- **Support LEA staff development.** Some LEAs cited this as a promising practice in focus group data and feel that investing in training and upskilling their current employees helps them to build a workforce that is both more likely to be retained year over year and better able to serve the unique population of the LEA. To scale this effort, USBE can:
  - Set up structures to share these promising practices from model LEAs.
  - Create pilot programs at LEAs that are diverse in size, urbanity, and location within the state to develop programs and best practices that can be implemented throughout the state.

- **Establish new educational pathways to expand behavior staff workforce.** USBE should explore new pathways that would expand the behavior staff workforce in the state. The option above involves aiding LEAs in developing their own staff pipeline through elevating promising practices and launching pilot programs. USBE can support the growth of the behavior workforce at greater scale by partnering with a local university, such as the University of Utah, to implement a program akin to the 5-year Bachelor's Degree in Youth Mental Health Specialist major and practicum at the University of Oregon, which has effectively increased the number of school behavior professionals in Oregon. Establishing a program such as this one would allow Utah to grow its behavioral staff pipeline within the state and would equip graduates to enter the field in specialized bachelor-level positions (e.g. mental health associate, behavior support specialist,

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[47] Herman, K. C., Reinke, W. M., Thompson, A. M., M. Hawley, K., Wallis, K., Stormont, M., & Peters, C. (2020). A Public Health Approach to Reducing the Societal Prevalence and Burden of Youth Mental Health Problems: Introduction to the Special Issue. *School Psychology Review*, *50*(1), 8–16. https://doi.org/10.1080/2372966X.2020.1827682

social emotional learning interventionist) and also prepare graduates to enter relevant graduate programs (e.g. school counseling, social work).[48] While instituting a program like this requires additional buy-in, resources, and effort, the University of Oregon is open to sharing its approach and curriculum.

COMMUNITY PARTNERSHIPS

- **Invest in state-level or regional partnerships.** Statewide school-based mental health programs that focus on partnerships between community-based providers and local school systems have been shown to have positive impacts on school climate and student behavior[49]. By developing state-level or regional partnerships, USBE can scale the impact of individual community-based partnerships. Existing national models include, for example:
  - o Regional wrap-around unit, where a local team of providers serves all of the local LEAs, providing supports to students with high needs, with the goal of stabilizing their needs so that students can remain in a traditional school setting. An example of this program exists through the Santa Barbara County Special Educational Local Plan Area (SBCSELPA).[50,51]
  - o Capacity-building partnerships, often between education agencies and universities, where universities provide capacity-building support to all LEAs in a state or region, including, for example, research, measurement and monitoring, professional development, and technical assistance.

- **Expand rural options.** Support rural LEAs to expand their partnership options by investing in creative solutions such as:
  - o Working with Regional Education Service Agencies to establish collective contracts with community organizations in order to increase the purchasing power of rural LEAs.
  - o Support and fund rural investments in pilot programs focused on increasing access to services. Examples of pilot programs may include funded counselor residencies and expanded virtual mental health services or curriculum.

FUNDING

- **Reduce restrictions on funding for behavior-related expenses.** Providing unrestricted funds to LEAs improves the flexibility of funding such that LEAs can use funds to best meet their unique needs. Within the context of student behavior-related expenses, this might mean creating funding streams that allow for funds to be spent on:
  - o Professional development for general education classroom teachers and/or administrators.
  - o Activities that help facilitate a positive school culture and climate.
  - o Family engagement.

Providing more unrestricted funding or broadening the allowable expenses on existing funds would allow LEAs to allocate funds to the most impactful staff, programs, and initiatives.

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[48] The University of Oregon. *The Ballmer Institute for Children's Behavioral Health, Bachelor's Degree in Child Behavioral Health.* https://childrensbehavioralhealth.uoregon.edu/bachelors-degree-child-behavioral-health#Specialist.

[49] DiGirolamo, A. M., Desai, D., Farmer, D., McLaren, S., Whitmore, A., McKay, D., … McGiboney, G. (2020). Results From a Statewide School-Based Mental Health Program: Effects on School Climate. *School Psychology Review*, *50*(1), 81–98. https://doi.org/10.1080/2372966X.2020.1837607

[50] Santa Barbara County Special Educational Local Plan Area. *SBCSELPA Wrap Support.* https://www.sbcselpa.org/mental-health/wrap-around-services/

[51] Association of California School Administrators. *Sustaining Tiered Mental Health Options and Collaborations.* (December 2022). https://leadership.acsa.org/sustaining-tiered-mental-health-options-and-collaborations

- **Consolidate grant offerings related to student behavior and mental health.** LEAs report spending a significant amount of time meeting reporting requirements for a small portion of their budget. Consolidating grant opportunities increases efficiency for LEAs and maximizes the impact of funding.

- **Provide more funding for behavior and mental health support.** With ESSER funds expiring in fall of 2024, LEAs have lost between 7%-12% of the funding source for behavior and mental health support. With many LEAs reporting that ESSER funds played a pivotal role in the hiring of behavior support and mental health staff, it will be beneficial for LEAs receive additional support to retain these staff.

V. APPENDIX

I. SURVEY RESPONDENTS

The following LEAs responded to the survey:

- Academy for Math, Engineering & Science
- Advantage Arts Academy
- Alpine
- American Leadership Academy
- Athlos Academy
- Box Elder School District
- Cache District
- Canyon Rim Academy
- Canyons District
- Daggett School District
- Davis School District
- Dual Immersion Academy
- Early Light Academy at Daybreak
- Emery District
- Endeavor Hall
- Esperanza Elementary
- Freedom Preparatory Academy
- Garfield School District
- Good Foundations Academy
- Grand County School District
- Granite School District
- Iron County School District
- Itineris Early College High
- Jordan District
- Kane District
- Lakeview Academy
- Leadership Academy of Utah (LAU)
- Logan City District
- Merit College Preparatory Academy
- Millard School District
- Morgan County School District
- Murray City School District
- Nebo District
- No. UT. Acad. for Math Engineering & Science (NUAMES)
- North Star Academy
- North Summit
- Odyssey Charter School
- Ogden District
- Park City District
- Promontory School of Expeditionary Learning
- Reagan Academy
- Rich District
- Salt Lake Arts Academy
- Salt Lake City School District
- San Juan School District
- Sevier School District
- Soldier Hollow Charter School
- South Sanpete School District
- South Summit School District
- St. George Academy
- Summit Academy
- Syracuse Arts Academy
- The Ranches Academy
- Thomas Edison Charter School
- Tooele District
- Utah County Academy of Sciences
- Utah International Charter School
- Utah Schools for Deaf & Blind
- Venture Academy
- Voyage Academy
- Wasatch County School District
- Weber School District
- Winter Sports School

II.   FOCUS GROUP PARTICIPANTS

The following LEAs participated in a focus group:

- Advantage Arts Academy
- Alpine District
- Box Elder District
- Canyons School District
- Davis District
- Iron County School District
- Jordan School District
- Lakeview Academy
- Promontory School of Expeditionary Learning
- Reagan Academy
- Salt Lake Arts Academy
- San Juan School District
- Sevier School District
- Spectrum Academy
- Utah School for the Deaf & Blind

III.   QUALITATIVE CODES

The list of all codes created during the deductive qualitative data coding process are included below. Codes are ordered by the number of instances that they appear in the data. The list also includes the number of instances the codes appear in answers to the following two survey questions:

- **Top Needs:** Overall, what are your LEA's top 3 needs related to behavior and mental health support?
- **Top Successes:** Please list up to three resources or practices that your LEA has found successful related to behavior and mental health support.

Code	Total Instances	Top Needs	Top Successes
Staffing	193	3	3
Policies and Practices	159	2	0
Funding	116	33	7
Professional Learning	107	36	25
Parents and Families	73	19	9
Community Partnerships	72	10	12
Specialized professionals	64	17	30
Mental Health	52	19	20
SEL	52	8	10
Acuity/Severity of Needs	51	14	1
MTSS/RTI	49	5	5
Behavior Expectations	47	2	5
Restorative Justice or Restorative Practice	44	0	6
PBIS	40	0	10
Culture and Climate	37	1	10
Relevant Services	36	28	4
Local Services	33	2	0
Regulation and Legislation	26	2	0
Effectiveness	24	2	1
Strategies and Guidance	21	13	2
Student Age	20	4	1
Hiring	19	4	1
Team Approach	19	1	6
Academic	17	0	1
Burn out	17	1	0
Attrition	16	4	0
USBE	16	2	4
Rural	15	2	1
Time	15	4	1
Communication	14	2	0
Deescalation	14	2	2
Special education	14	2	3
Trauma Informed / Trauma	14	1	2
Discipline	13	0	1
Safety	12	6	0
Attendance	11	2	0
Bullying	11	1	0
Administration	10	2	1
Insurance	10	1	0
Referral	10	0	0

Code	Total Instances	Top Needs	Top Successes
Technology	10	2	0
Early Identification	9	0	2
LRBI	9	0	2
BIP	8	0	2
Staff:Student Ratio	8	65	53
Wellness Rooms	8	0	5
Prevention	7	2	1
Sexual Behaviors	7	1	0
Value Additive	7	0	0
Implementation	6	4	1
Relationships	6	0	5
Services within School Day	6	0	4
Suspension or Expulsion	6	0	0
Counseling	5	0	0
Facilities	5	1	2
Substance Use	5	0	2
Linguistic Accessibility	4	0	0
Accommodations	3	0	0
Basic needs	3	0	0
Disability	3	0	0
Physical Intervention	3	0	0
Wraparound	3	0	0
After School Program	2	0	2
Conflict Management	2	1	0
Gender identity	2	0	0
Intern	2	0	0
Domestic Violence	1	0	0
Eligibility	1	0	0
Incentives	1	1	0
Role clarity	1	1	0

IV.   MATRIX OF COMMUNITY ORGANIZATIONS

Community Partner	Partner LEA Region(s)	Partnership Type	
		Paid	Unpaid
0-8 Care Coordination	Wasatch Front		Unpaid
ABA Services	Wasatch Front		Unpaid
Asian Association of Utah	Wasatch Front		Unpaid
Aspen Ridge	Wasatch Front	Paid	
Bear River Health Department	Northeast		Unpaid
Bear River Mental Health	Northern, Northeast, Wasatch Front	Paid	
Bears Ears Child and Family Counseling	Wasatch Front	Paid	
Blind Mule	Wasatch Front	Paid	
Boys and Girls Club of Northern Utah	Northeast		Unpaid
Calcut Consulting, LLC	Wasatch Front	Paid	
CAPSA (Citizens Against Physical & Sexual Abuse)	Northeast		Unpaid
Central Utah Counseling Center	Central	Paid	Unpaid
Central Utah Education Services	Central	Paid	
Central Utah Health Department	Central		Unpaid
Charter School Therapy	Wasatch Front	Paid	
Children in Motion	Wasatch Front	Paid	
Children's Justice Center	Central		Unpaid
Children's Hospital Salt Lake City	Wasatch Front	Paid	
Complete Evaluations	Wasatch Front	Paid	
Connected 2 Therapy	Wasatch Front	Paid	
Cook Center	Central, Northern, Northeast, Wasatch Front	Paid	Unpaid
Daggett County Substance Abuse Committee	Northern		Unpaid
Dambara Family Services	Southwest	Paid	
Davis Behavioral Health	Wasatch Front	Paid	
Daybreak Telehealth/Parent classes	Wasatch Front	Paid	
Dr. Ben Belnap	Northern	Paid	
Early Learning Essentials Utah	Northern		Unpaid
Educational Therapy Professionals	Northern	Paid	
Excel Psychology	Wasatch Front	Paid	
Families First	Central		Unpaid
Family Place	Wasatch Front		Unpaid
Four Corners Mental Health	Southeast	Paid	
Galen Downing	Wasatch Front	Paid	
Greenhouse	Wasatch Front		Unpaid
Harmony Positive Behavior Supports, LLC	Southeast	Paid	
Hopeful Beginnings	Wasatch Front	Paid	
Huntsman Mental Health/SafeUT	Wasatch Front		Unpaid

Community Partner	Partner LEA Region(s)	Partnership Type	
		Paid	Unpaid
ICC (Intensive Care Coordination)	Wasatch Front		Unpaid
Intensive Care	Central, Wasatch Front		Unpaid
JJS Youth Services	Central, Wasatch Front	Paid	Unpaid
Kid Star Day Treatment	Northern		Unpaid
Kristy Ludwig, Ph.D.	Wasatch Front	Paid	
Larry Chatterton - Motivational Interviewing	Wasatch Front	Paid	
Latino Behavioral Health	Northern, Wasatch Front		Unpaid
LIC: Bear River Mental Health	Wasatch Front		Unpaid
Lighthouse Therapy	Northern	Paid	
Live Like Sam	Northern		Unpaid
Manning Consulting	Northeast		Unpaid
MCOT (Mobile Crisis Outreach Team)	Northern, Wasatch Front		Unpaid
Mental Health Access Program Contracted Partners	Wasatch Front	Paid	
Multicultural Counseling Center	Wasatch Front	Paid	
New Hope Academy	Wasatch Front	Paid	
NUES (Northeastern Utah Educational Services)	Northern	Paid	Unpaid
Odyssey House	Wasatch Front	Paid	
Panorama	Wasatch Front		Unpaid
Parent Guidance.org / Cook Center for Human Connection	Wasatch Front	Paid	
Park City Peace House	Northern		Unpaid
Pathways	Wasatch Front		Unpaid
Project Connections	Wasatch Front	Paid	
Rubicon Counseling	Wasatch Front	Paid	
Salt Lake Behavioral Health	Wasatch Front	Paid	
Salt Lake County Youth Services	Wasatch Front	Paid	Unpaid
San Juan Counseling	Southeast	Paid	
Sandstone	Wasatch Front	Paid	
Sego Lily Center of the Abused Deaf	Wasatch Front		Unpaid
Southwest Behavioral Services	Southwest	Paid	Unpaid
Southwest Educational Development Center	Southwest	Paid	
SpEd Co	Wasatch Front	Paid	
Speech Language Services	Wasatch Front	Paid	
Stronger Families	Wasatch Front		Unpaid
Summit County Behavioral Health	Northern	Paid	
Sunset Counseling	Wasatch Front	Paid	
The Family Place	Northern, Northeast	Paid	Unpaid
Thrive	Northern		Unpaid
Tooele Valley Counseling	Wasatch Front	Paid	
United Way	Wasatch Front		Unpaid

Community Partner	Partner LEA Region(s)	Partnership Type	
		Paid	Unpaid
University of Utah	Central, Northern, Southeast, Southwest, Wasatch Front	Paid	Unpaid
Utah Behavioral	Southwest, Wasatch Front	Paid	
Utah County Health Department	Wasatch Front	Paid	
Utah Navajo Health Systems	Southeast	Paid	
Utah Parent Center	Northern, Northeast, Wasatch Front	Paid	Unpaid
Utah School Mental Health Collaborative	Northeast		Unpaid
Utah State University	Northeast, Wasatch Front	Paid	
Utah Valley University	Wasatch Front		Unpaid
UTBS (Utah Behavior Services)	Wasatch Front		Unpaid
Valley Behavior Health	Wasatch Front	Paid	Unpaid
Volunteers of America	Wasatch Front	Paid	
VR (Vocational Rehabilitation – Utah State Office of Rehabilitation)	Wasatch Front		Unpaid
Wasatch Behavioral Health	Wasatch Front	Paid	
Wasatch Canyons - Primary Children's	Wasatch Front		Unpaid
Wasatch Community Care Coalition	Northern		Unpaid
Wasatch Mental Health	Northern		Unpaid
Wendy Hull	Wasatch Front	Paid	