

**CS 7.05 — Implementing an
Interconnected Systems
Framework, the Project About
School Safety**

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Acknowledgements

- Elaine Miller
- Colleen Halliday-Boykins
- Charleston County School District, Erin Scherder, Jennifer Coker.....
- Charleston/Dorchester Department of Mental Health, Barbara Wagner....
- Marion County Public Schools, Dama Abshier....
- The Centers
- Lucille Eber, Susan Barrett, George Sugai, Sharon Hoover
- And many others....

Thanks to Funder and Disclaimer

- **This project was supported by Award No. 2015-CK-BX-0018 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice**

Objectives

- Describe the Project About School Safety (PASS) study
- Examine the preliminary results of the randomized controlled trial
- Discuss successes and lessons learned, as well as implications for the field

Outline

- Expanded School Mental Health (SMH)
- Positive Behavioral Interventions and Supports (PBIS)
- Interconnected Systems Framework for SMH and PBIS
- Project About School Safety Study
- Descriptive and Outcome Analyses
- Successes and Challenges
- Family Engagement/Leadership

“Expanded” School Mental Health

- Full continuum of effective mental health promotion and intervention for students in general and special education
- Reflecting a “*shared agenda*” involving school-family-community system partnerships
- Collaborating community professionals (not *outsiders*) *augment* the work of school-employed staff

Positive Behavior Intervention and Support (www.pbis.org)

- In around 26,000 schools
- Decision making framework to guide selection and implementation of best practices for improving academic and behavioral functioning
 - Data based decision making
 - Measurable outcomes
 - Evidence-based practices
 - Systems to support effective implementation



Mapping PBIS and SMH

Fall 2014

Emotional & Behavioral Disorders in Youth

Page 87

State of the Carolinas: Implementing School Mental Health and Positive Behavioral Interventions and Supports

by Joni W. Splett, Kurt D. Michael, Christina Minard, Robert Stevens, Louise Johnson, Heather Reynolds, Katharina Farber, and Mark D. Weist*

The Carolinas have a rich and diverse history. South Carolina was the first colony to declare independence from British rule during the American Revolution and the first state to declare secession from the Union at the start of the Civil War. The population of South Carolina is nearly 4.8 million. It is the 24th most populous state in the United States and has a diverse citizenry, including 64% Caucasian, 28% African-American, and 5% Hispanic residents (U.S. Census Bureau, 2012). Children and youth under the age of 18 make up 22.8% (1.08 mil-

a large number (25.8%) of North Carolina's children live in poverty (Annie E. Casey Foundation & O'Hare, 2013).

Equally unfortunate, a high percentage of children attending public schools in the Carolinas perform below state standards. For example, in South Carolina, the number of children who perform below state standards in reading (17% in 3rd grade; 32% in 8th) and math (30% in 3rd grade; 30% in 8th) is substantial, and in North Carolina, the situation is considerably worse, with below standard scores in reading at 65% in

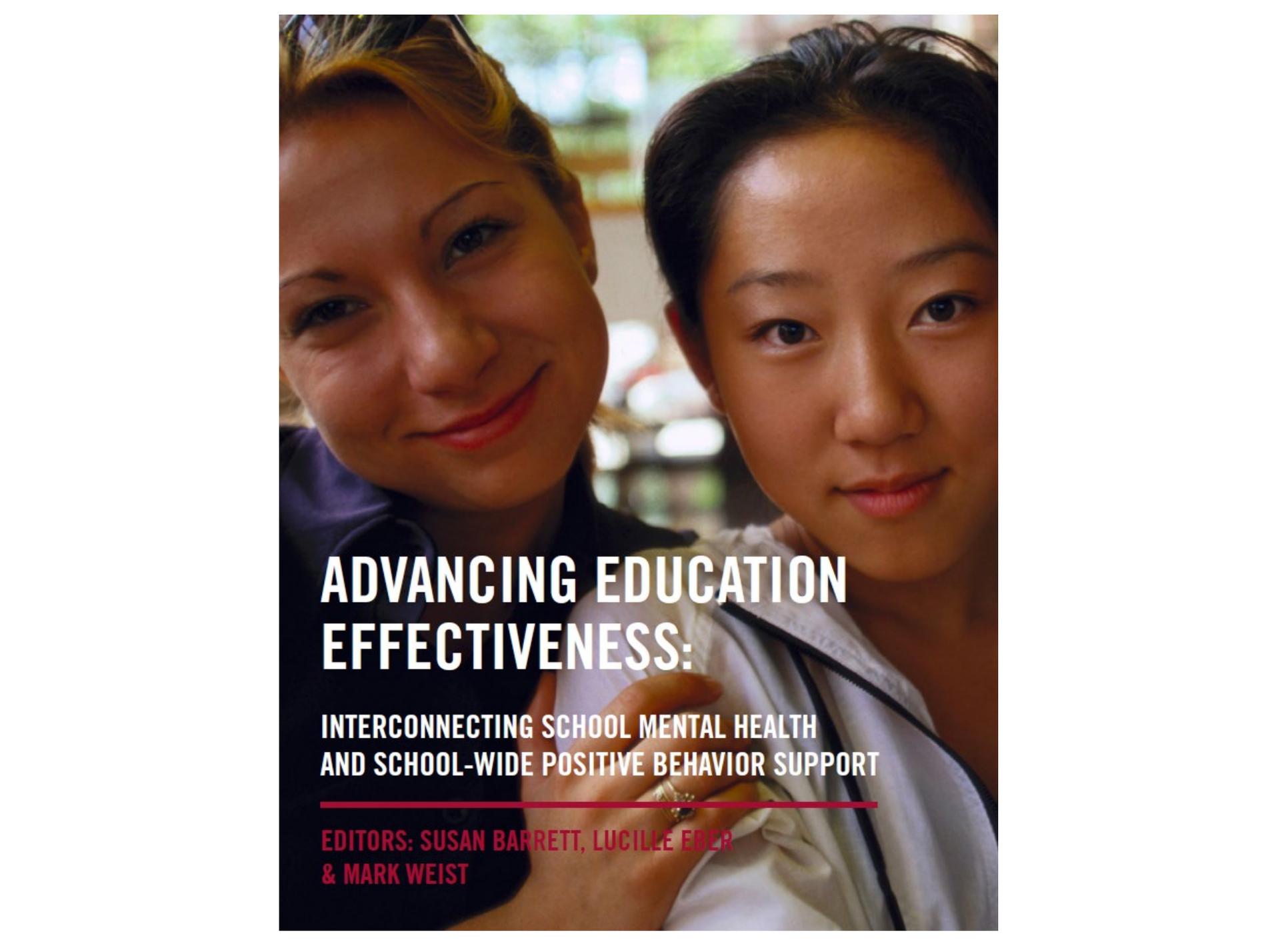
of Mental Health (SCDMH) has one of the strongest expanded school mental health (SMH) service programs nationally, and the grassroots effort to disseminate and support implementation of Positive Behavioral Interventions and Supports (PBIS) is benefiting from recent interest, renewed energy, and federal momentum.

The Interconnected Systems Framework

The trends in the Carolinas mirror national trends in children's educational and men-

Key Rationale

- PBIS and SMH systems are operating separately
- Results in ad hoc, disorganized delivery of SMH and contributes to lack of depth in programs at Tiers 2 and 3 for PBIS
- By joining together synergies are unleashed and the likelihood of achieving depth and quality in programs at all three tiers is greatly enhanced



ADVANCING EDUCATION EFFECTIVENESS:

INTERCONNECTING SCHOOL MENTAL HEALTH
AND SCHOOL-WIDE POSITIVE BEHAVIOR SUPPORT

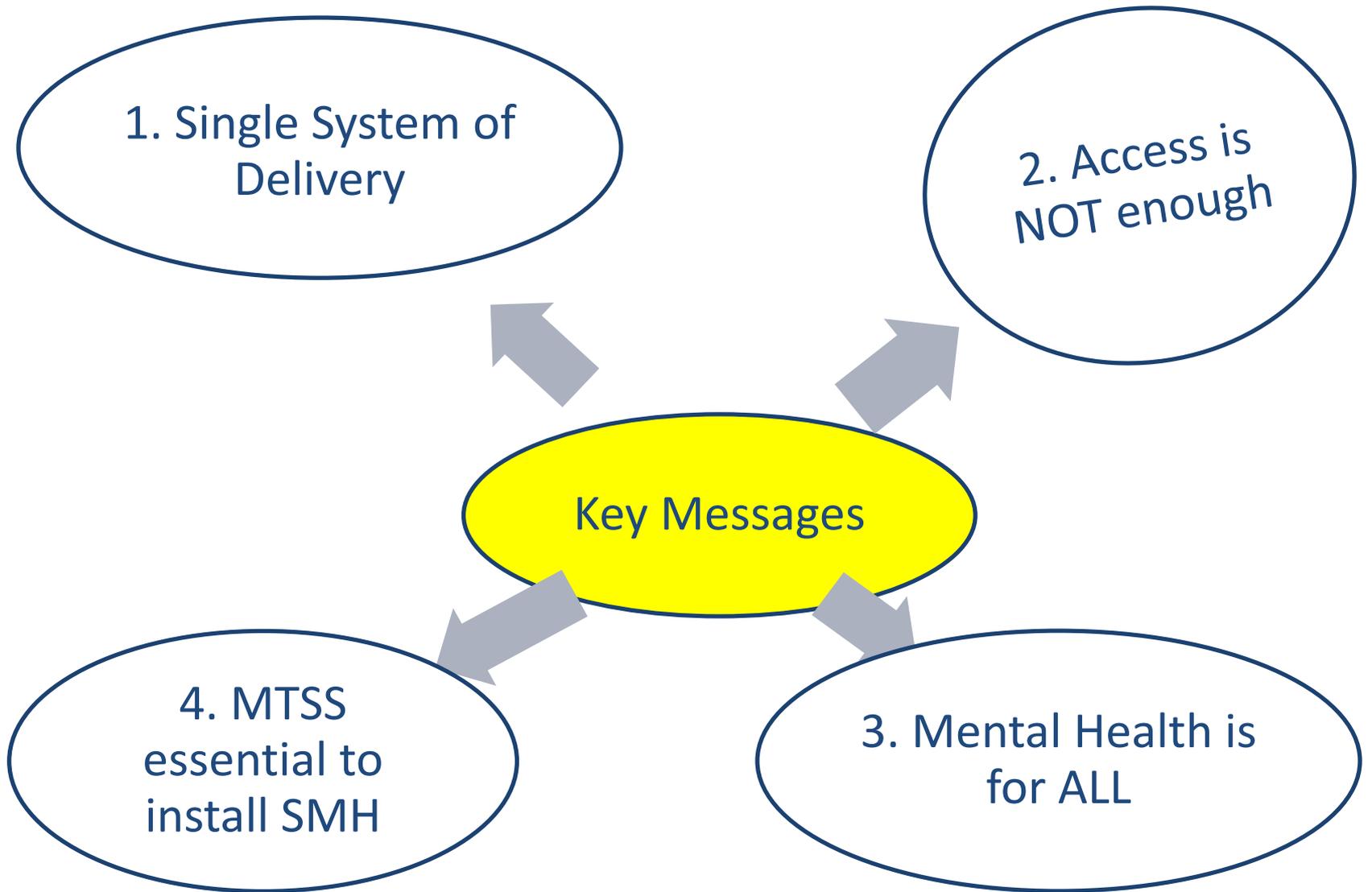
EDITORS: SUSAN BARRETT, LUCILLE EBER
& MARK WEIST

An Interconnected Systems Framework (ISF) Defined

- A Structure and process for education and mental health systems to interact in most effective and efficient way.
- guided by key stakeholders in education and mental health/community systems, youth/family
- who have the authority to reallocate resources, change role and function of staff, and change policy.

ISF Defined 2

- A strong, committed and functional team guides the work, using data at three tiers of intervention
- Sub-teams having “conversations” and conducting planning at each tier
- Evidence-based practices and programs are integrated at each tier, with implementation support and coaching
- SYMMETRY IN PROCESSES AT STATE, DISTRICT AND BUILDING LEVELS



P  **SSS**

Project About School Safety

NIJ Comprehensive School Safety Initiative

- **Interconnecting PBIS and School Mental Health to Improve School Safety: A Randomized Trial**
 - 2016-2019, National Institute of Justice (#2015-CK-BX-0018)
 - PI Mark Weist, Co-PI Joni Splett, Co-I Colleen Halliday-Boykins, Lead Research Manager Elaine Miller
- **Study Aims:**
 - Evaluate impact of the ISF on school discipline rates, teacher and student perceptions of school climate and safety and social, emotional, behavioral and academic functioning of students
 - Evaluate the impact of the ISF on the functioning of teams, student access to services, and quality and cost-effectiveness



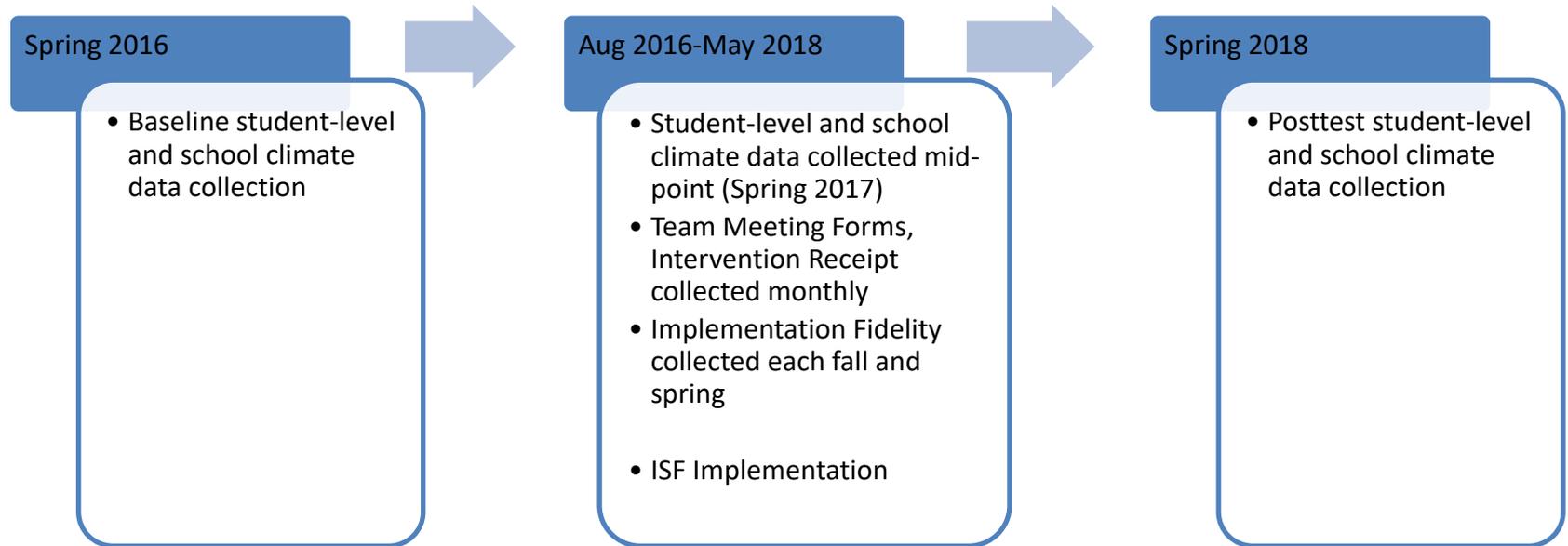
Study Design



- 24 Participating Elementary Schools
 - Charleston County, SC (12)
 - Marion County, FL (12)
 - Prior to study all were implementing PBIS; none were implementing SMH
- Each school is randomized to one of three conditions
 - PBIS Only
 - PBIS + SMH (business as usual)
 - Interconnected Systems Framework (ISF)
- Intervention (ISF) in place for 2 academic years
- All students in the building are participants unless they opt of study



Study Timeline



PASS Goals and Objectives

- Broadly,
 - Improved teaming, screening and access
 - Improved intervention service delivery at all tiers
 - Improved student outcomes
- The following reviews (1) each goal, (2) implementation components to achieve it, and (3) preliminary outcomes

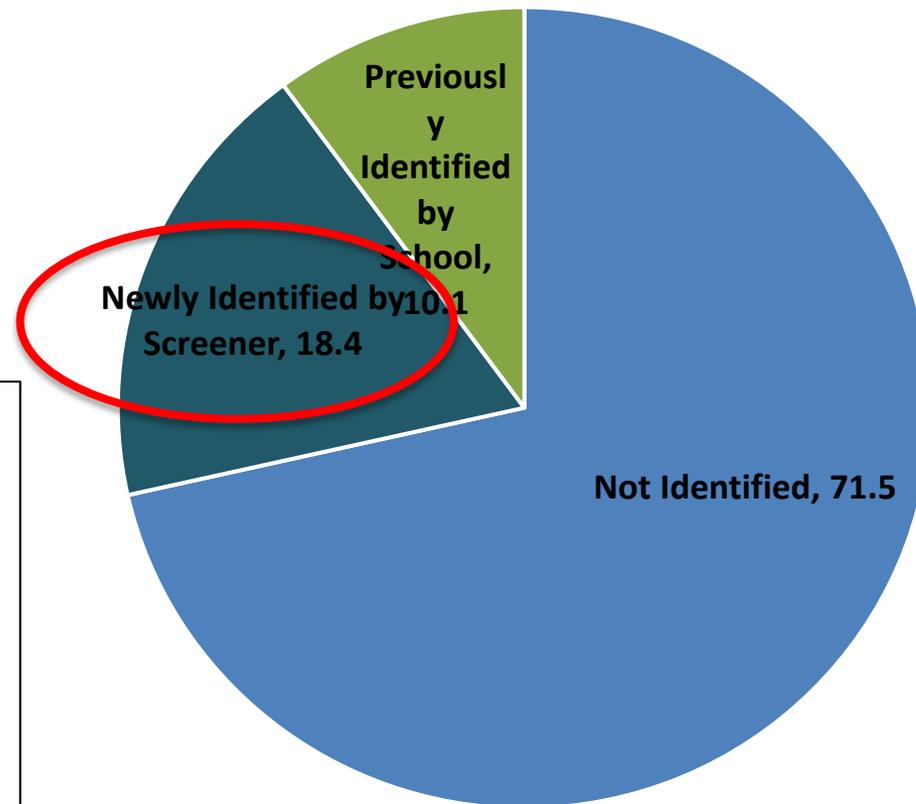
PASS Goals and Objectives: Screening

- Improved implementation of screening and follow-up on screening findings

Splett et al. (2018)

- Used BASC-3 BESS Teacher with externalizing, internalizing, and adaptive skill subscales
- Compared students already receiving intervention to those newly identified by BASC-3 BESS Teacher
- Splett, J.W., Trainor, K., Raborn, A., Halliday-Boykins, C., Garzona, M., Dongo, M., & Weist, M.D. (2018). Comparison of universal mental health screening and traditional school identification methods for multi-tiered intervention planning. *Behavioral Disorders, 43(3)*, 344-356.

Splett et al. (2018)



**180% increase
in identified
need with
screener**

Splett et al., (2018). Comparison of Universal Mental Health Screening to students already receiving intervention in a multitiered system of support. *Behavioral Disorders*, 43(3), 344-356. <https://doi.org/10.1177/0198742918761339>

Latent Profile Analysis - BESS

	Class 1: Elevated Behavioral-Emotional Risk	Class 2: Normal Behavior-Emotional Development	Class 3: Extreme Behavioral-Emotional Risk
Characteristics:	Moderate levels of IRI, ERI, and adaptive skills deficits	Low IRI, ERI, and high levels of adaptive skills	High levels of IRI, Extreme levels of ERI, low levels of adaptive skills
Size	1734 (29%)	3668 (61%)	577 (10%)
Internalizing Risk	4.8	2.1	7.2
Externalizing Risk	6.8	0.9	13.7
Adaptive Skill Risk	5.2	9.4	3.2

More fine-grained analysis

- Profiles of students based on patterns of emotional/behavioral and adaptive functioning
- Anxiety = A, Depression = D, Attention Problems-Hyperactivity = APH, Conduct-Aggression = CA, Adaptive = AD

More fine-grained analysis 2

- From most to least in need
- A,D, APH, CA and low AD
- A,D,APH, and low AD
- A,D, and low AD
- A,D,APH and higher AD
- A,D, and higher AD
- A and higher AD
- Etc.

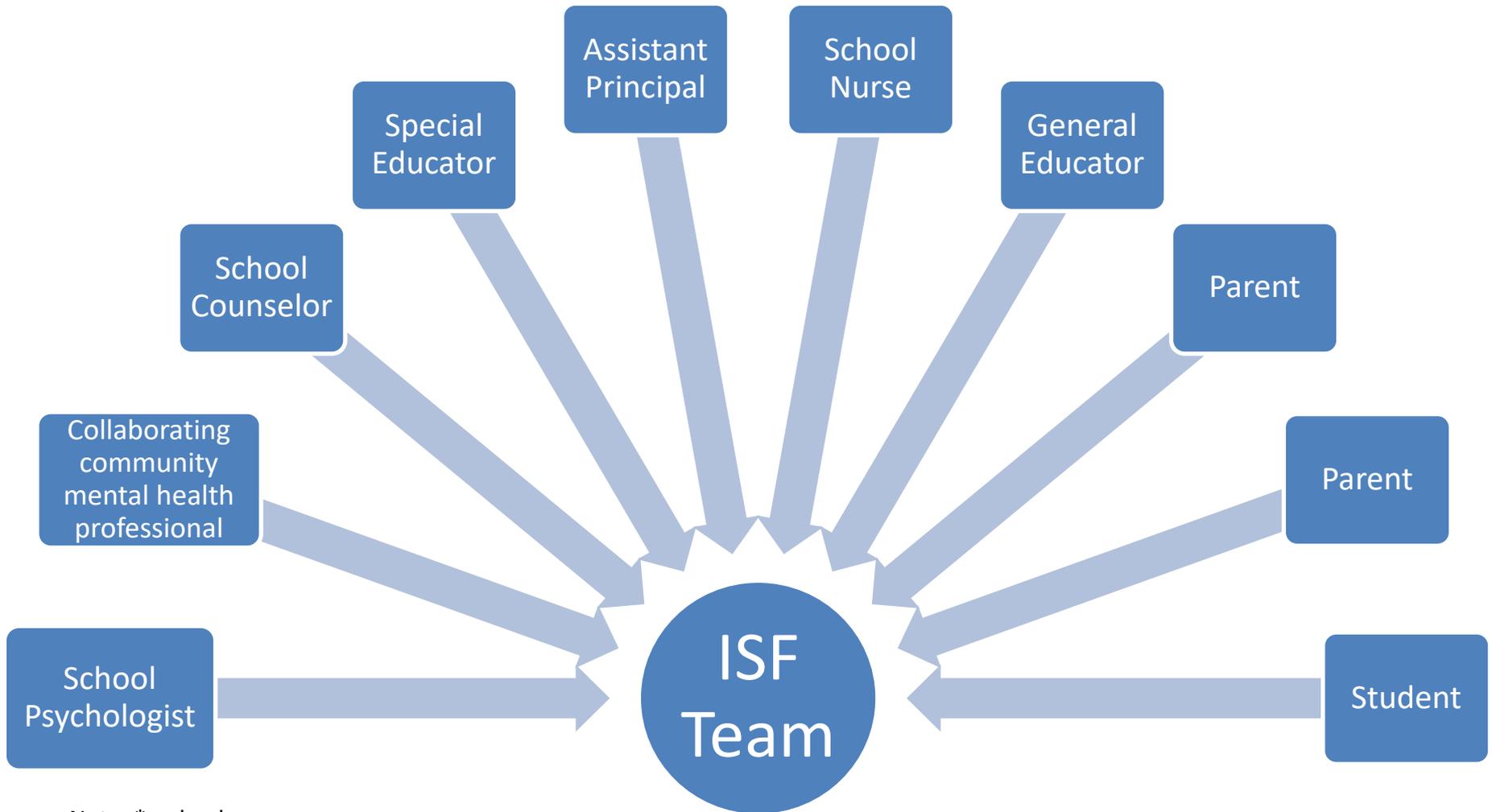
PASS Goals and Objectives: Teaming

- Improved coordination and communication between school and mental health staff

Teaming Implementation

- Added MH clinician to each team
- Team training and coaching in teaming operational procedures
- Face to Face training, technical assistance, coaching in addition to webinars and conference calls
- Quarterly DCLT meetings

Example Team



Note: *co-leaders

Preliminary Teaming Outcomes

In ISF Schools...

- 3.7 times more meetings per quarter
- More Tier 1 discussion in ISF schools
- Greater attendance by principals, school counselors, school psychologists, and school mental health clinicians
- Longer meeting times (~25 minutes longer)

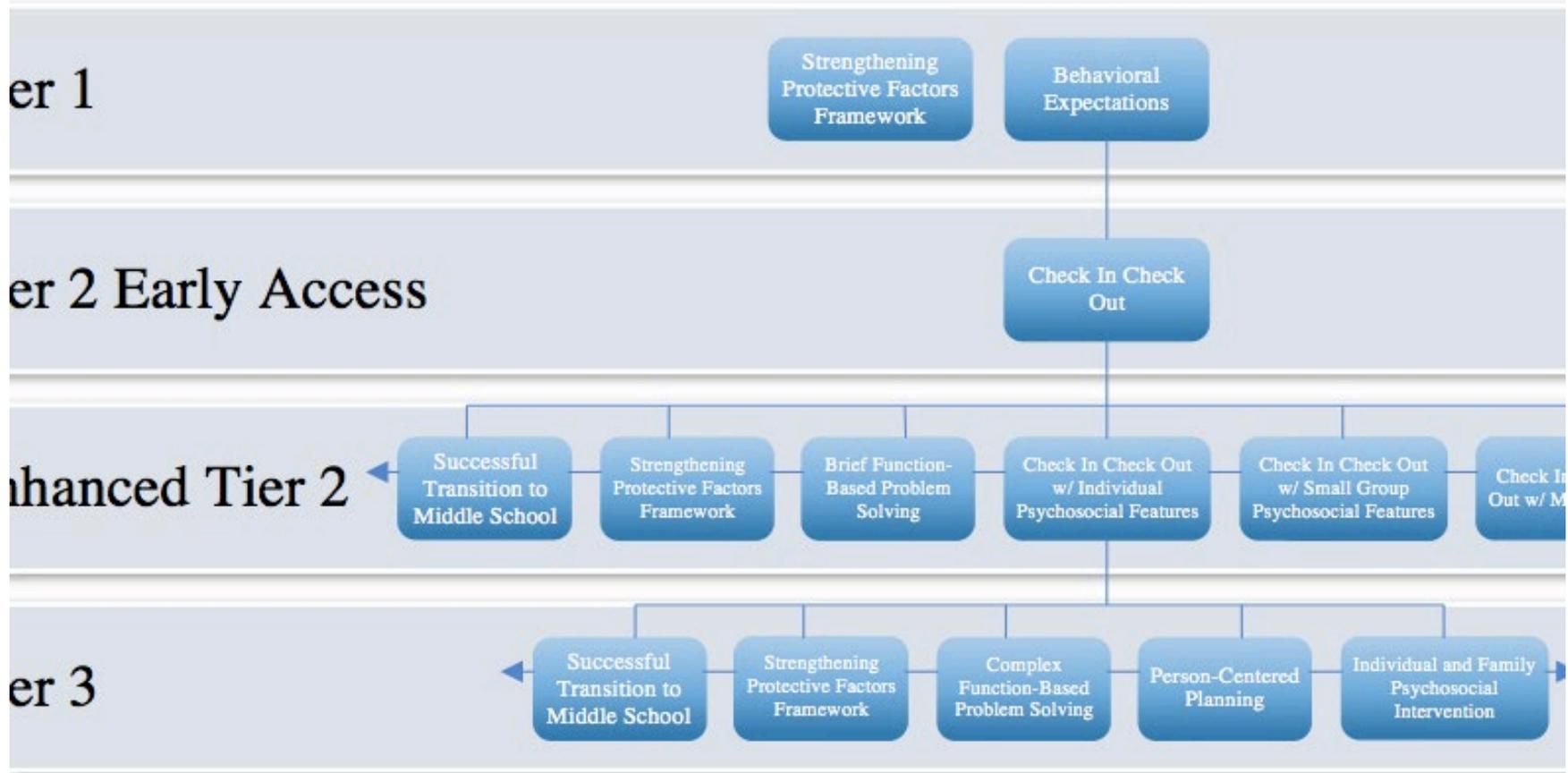
PASS Goals and Objectives: Access

- Improved proportion of children with mental health problems who receive treatment interventions
- Enhanced connection of students to school mental health interventions for full range of mental health needs
- Enhanced connection of students to school mental health interventions for full range of mental health needs

Access Implementation

- Intervention Receipt Forms (IRF) to track the number of students over time who are connected to ISF interventions
- School and community mental health professionals on teams to review data, select EBPs, progress monitor, etc.
- Universal mental health screening conducted twice annually
- Intervention continuum array to include
 - Early intervention access via CICO
 - Expanded array at Tiers 2 and 3 for internalizing needs, trauma, protective factors, family engagement

PASS Continuum of Interventions



Preliminary Access Outcomes

- Students with emerging emotional and behavioral risk were
 - Identified (Splett et al., 2018)
 - Connected to more services in the ISF condition than control conditions
 - Especially true for African American students

PASS Goals and Objectives: Intervention Service Delivery

- Enhanced provision of school-wide mental health promotion and prevention programs
- Decreased amount of time between problem identification and effective intervention delivery
- Improved selection and implementation of evidence-based services across tiers
- Students and families received greater dose of effective interventions

Intervention Service Delivery Implementation

- Use of ISF Implementation Inventory and Integrated Action Planning
- MH partners providing PD for school staff and consultation on MH issues
- Enhancing continuum of interventions in both sites with attention to existing resources (i.e., behavior intervention protocol)
- Professional Development on behavior intervention protocol and team process
- Professional development for school and community MH professionals on MATCH-ADTC
- Use of MATCH-ADTC in both small group and individual intervention

Purpose of ISF Implementation Inventory

- To assist school and community partners in their installation and implementation of ISF
- To assess baseline and/or ongoing implementation progress of critical ISF features
- To inform action planning that advances and enhances ISF implementation
- To measure ISF implementation fidelity

Tier 1

19 items

Tier 2

16 items

Tier 3

19 items

Implementation of SWPBIS: Are core features of SWPBIS implemented with fidelity?

Teaming: Do team members collaborate? Do team members include education and mental health system representatives, families, and students as indicated with active opportunities for participation and collaboration

Collaborative Planning and Training: Do all team members have PD and training across systems and core features of ISF, as well as intervention practices as appropriate?

Family and Youth Engagement: Are students and families included in teaming, decision making, intervention selection and implementation, intervention monitoring, and system processes?

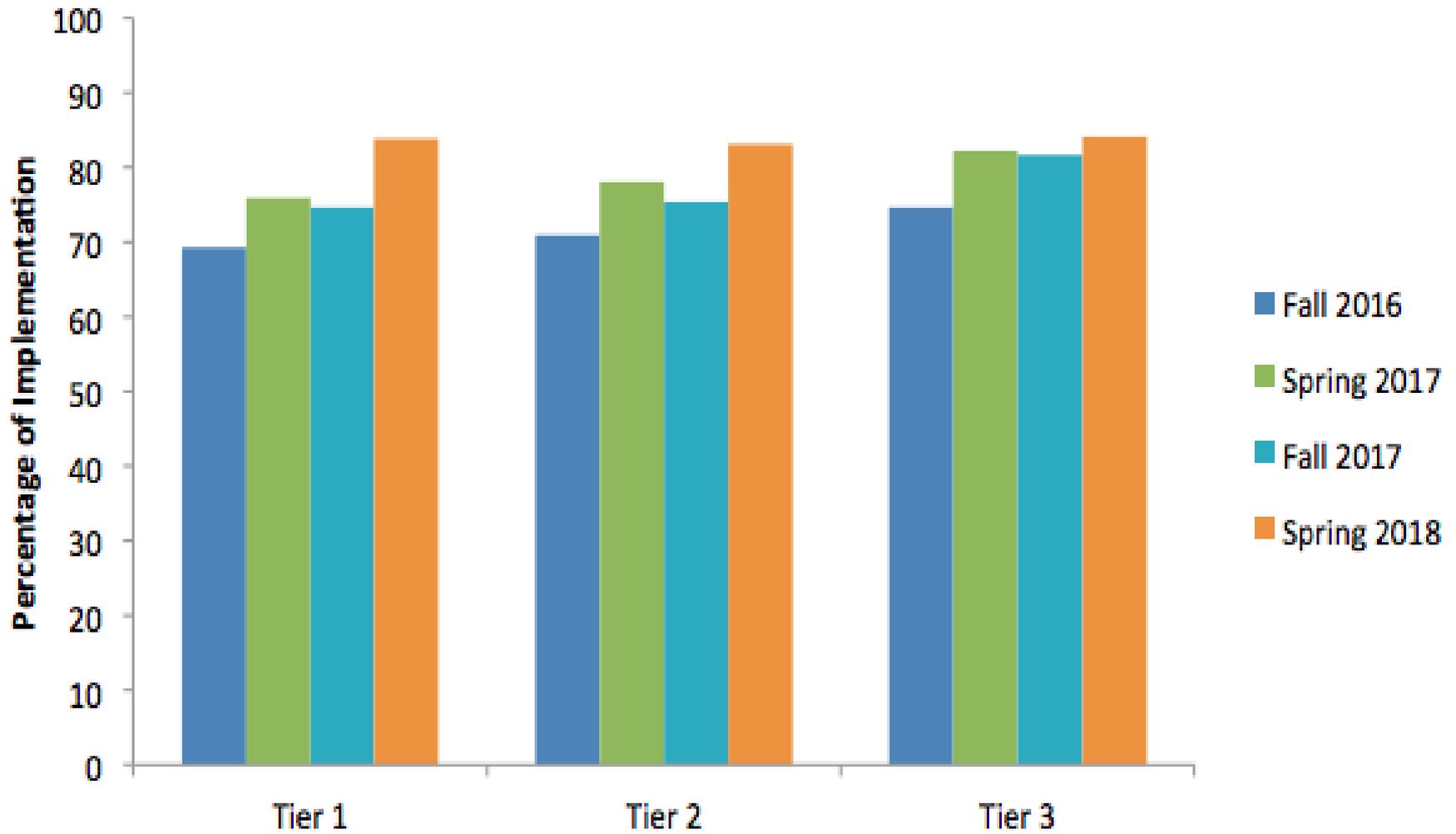
Intervention Selection, Implementation and Progress: Are evidence-based interventions selected based on need, implemented with fidelity, progress monitored, and concluded after attainment of positive outcomes?

Data-Based Decision Making: Are data representative of school, home and community behavior collected, analyzed and used for decision making, including outcome/impact, process, and fidelity data?

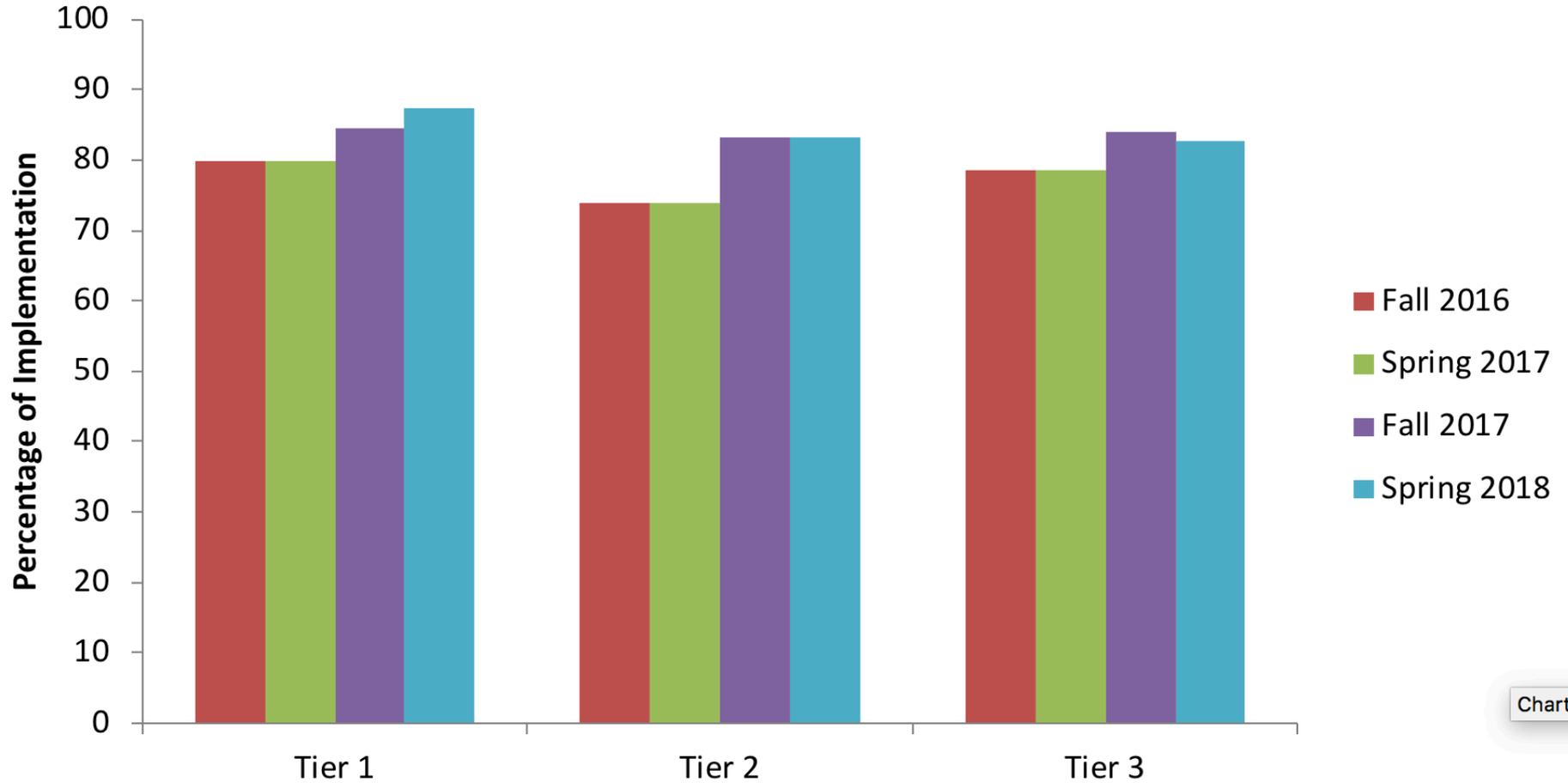
ISF II Validation Study Results

- Internal consistency is strong
- Three-tiered model fits data
- Usability rated good to very good
- Suggested improvements include reducing wordiness and professional jargon

CCSD ISF Implementation Inventory Results



MCPS ISF Implementation Inventory Results



Themes from Report Card

- Nearly all schools improved in each tier with each administration
- Many items were indicated as fully in place
- Several schools improved Tier 1 and some Tier 3 core features of ISF
- Family engagement consistently identified as needing improvement

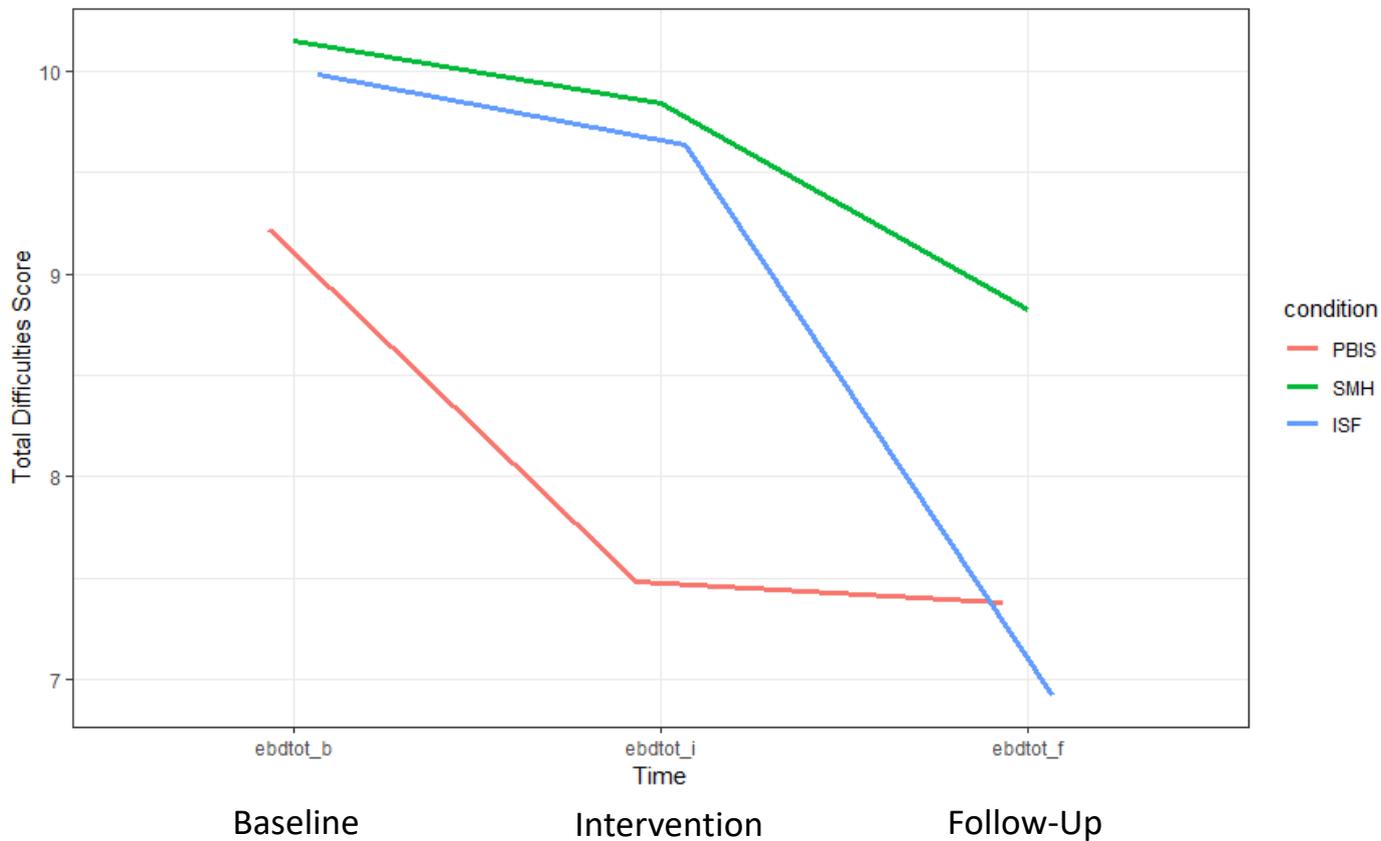
Pass Goal: Improved Student Outcomes

- Social/emotional/behavioral functioning
- School and academic functioning
- School climate and student safety

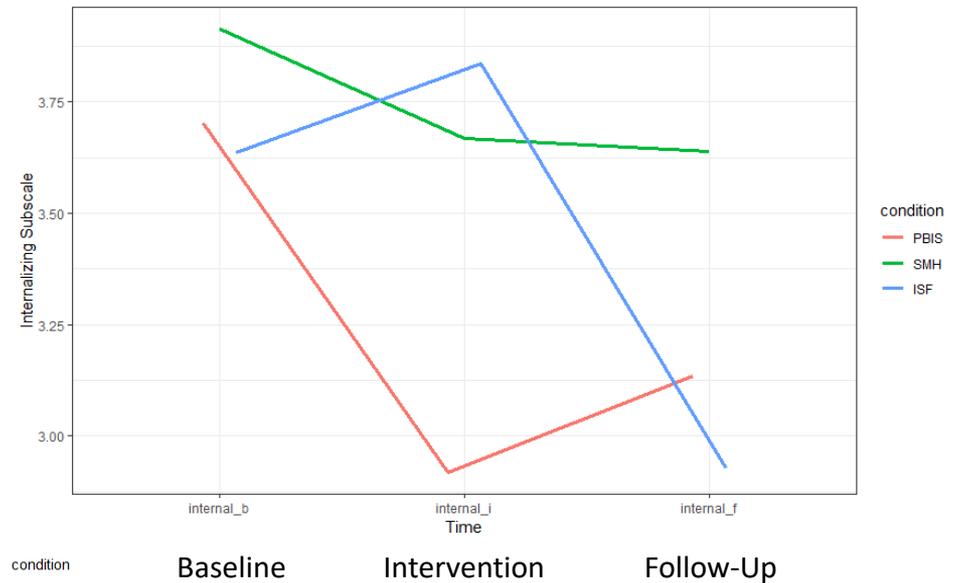
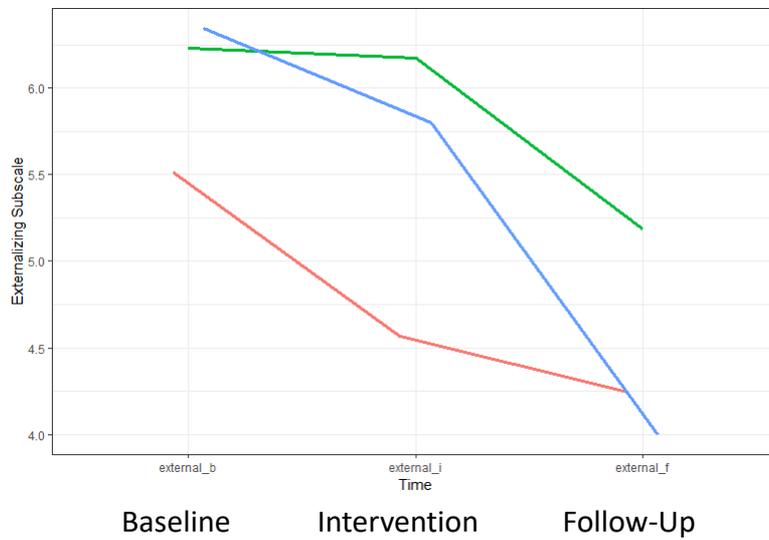
Psychosocial Outcomes

- First results available are for teacher ratings of a subset of student participants in the first cohort using the Strengths & Difficulties Questionnaire (SDQ)
- SDQ completed in fourth grade (prior to intervention), in fifth grade (after one year of intervention), and near the end of sixth grade (no intervention; follow-up after transition to middle school)
- ISF means are lower (positive change) at follow-up on total difficulties and six of seven subscales

Display of Total Difficulties Means across Conditions and Times



Externalizing and Internalizing (Typical of subscales results)



Other Successes

- School district coaches have been excellent
- PBIS fidelity has improved
- Data-based decision making is becoming routine
- Improved progress monitoring (see next)
- Notable increased involvement of families in the multi-tiered system of support
- Strong local support and interest in sustainability and expansion at both sites

Check-In/Check Out (CI/CO)

In-On-Out Decision Rules

1) Identification for CI/CO (“In”):

- Student identified in Elevated range for Externalizing Risk on screener
- Student has 2 or more ODRs leading to suspension
- Student has not responded to Tier 1 core curriculum or low-level supplemental supports

2) Progress-monitoring (“On”):

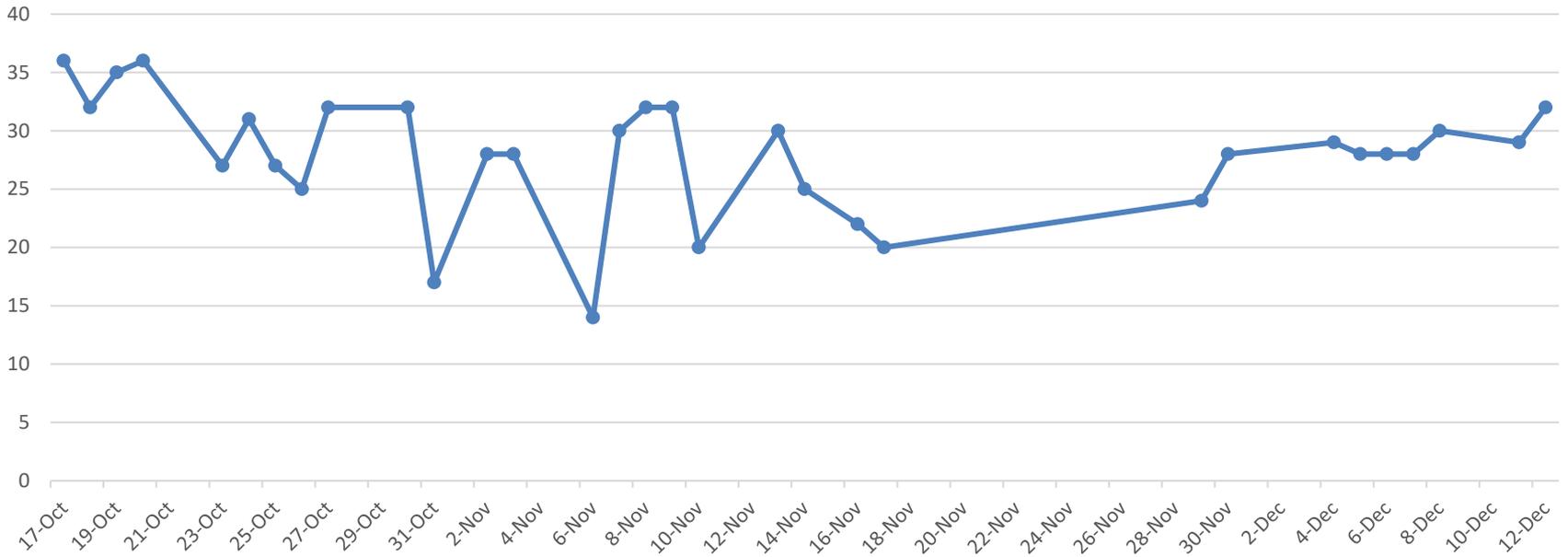
- DPR data is collected daily & reviewed every other week. Data is collected and reviewed for 6-8 weeks, and monitored for trend.

3) Exiting/transitioning (“Out”):

- Student received a total of 80% of DPR points average per day/week for 8 weeks and has had no new ODRs, suspensions, or time out of class due to behavior issues. Student may be faded to Tier 1 or “modified” CI/CO.

CI/CO Individual Student Progress Monitoring Data

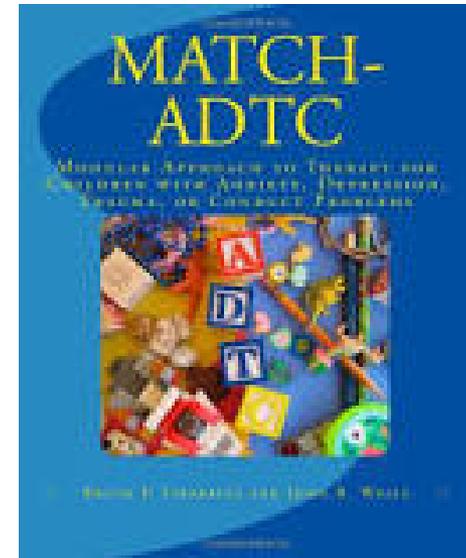
Behavior Chart (Tier 2)- Caleb A
Points Goal: 25



What is MATCH-ADTC?



- Easy to use practice guides or step-by-step instructions for implementing the key elements of each module (treatment procedures)
- Flowcharts that coordinate treatment and guide selection of modules
- Paperback or online format
 - http://www.practicewise.com/portals/0/MATCH_public/index.html



Social Emotional/Behavior Goals

1 Social Emotional/Behavior goal has been set for ██████████ in the areas of Physical Aggression, Disrespect to teachers/staff, Defiance/Noncompliance, Self-regulation of anger/frustration.

Goal 1) Discipline Referrals-Major (ODRs) - Target: 1

Baseline as of 8/16/2017: 3

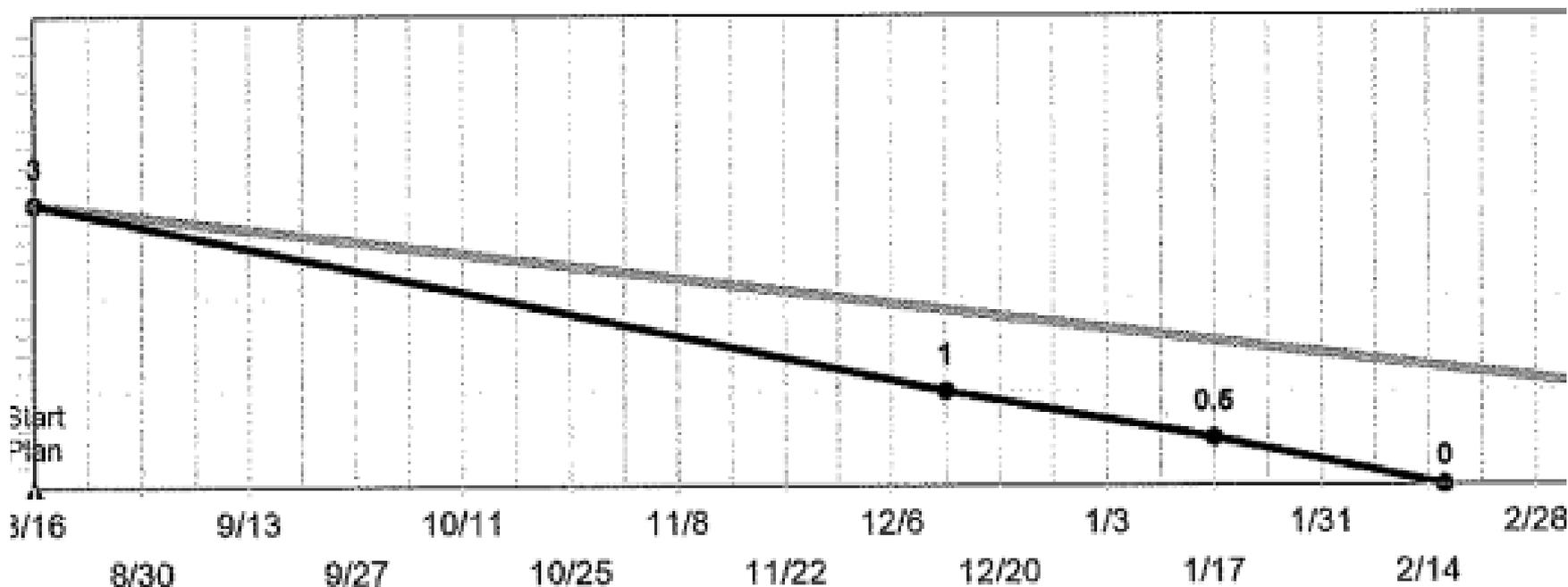
Target to achieve before 3/14/2018: 1

Progress will be measured Weekly

██████████ will decrease his angry outbursts (i.e., hitting, kicking, yelling, throwing things) from three times per week to one time per week

1) Dis

□ Plan Change - - - - - Recent Trend ······ Projection (High) —●— Probes ▲ Special Dates
= Goal ······ Projection (Low)



Social Emotional/Behavior Goals

1 Social Emotional/Behavior goal has been set for ██████ in the areas of Self-regulation of anger/frustration, Tardiness/Truancy, Low motivation.

Goal 1) Desired Behavior/Skill Tracking Chart - Target: 8

Baseline as of 10/27/2017: 2

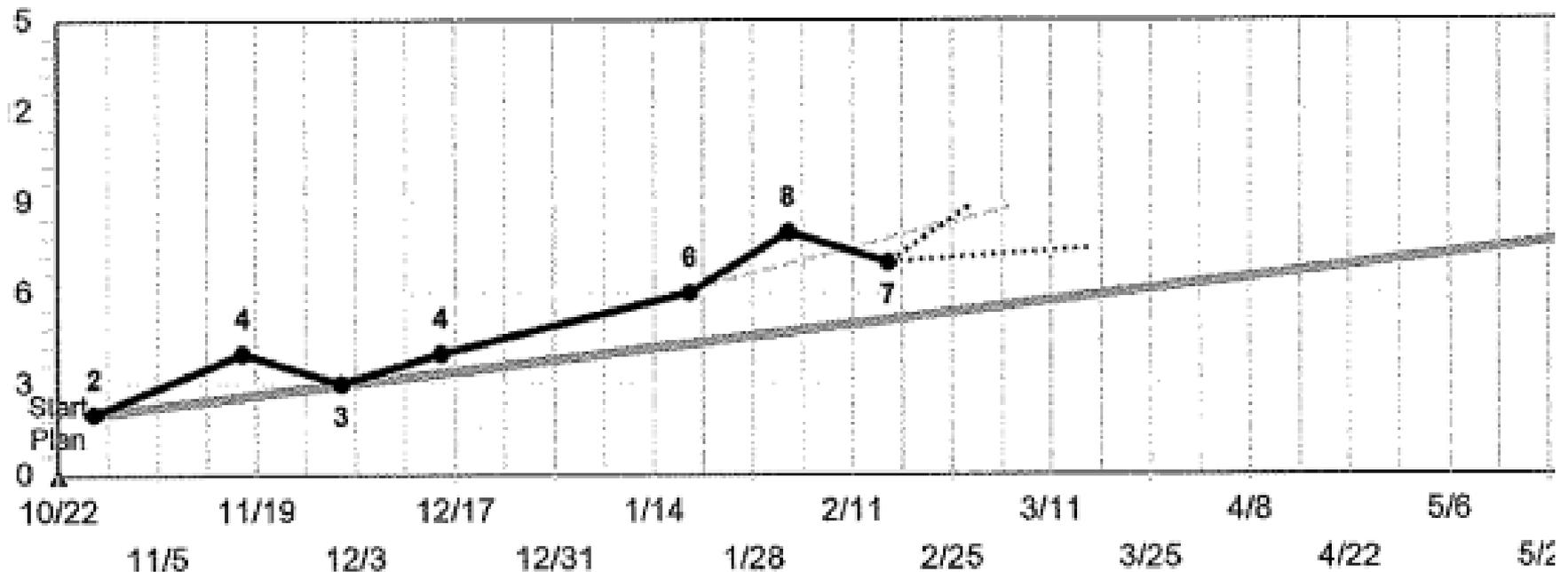
Target to achieve before 6/1/2018: 8

Progress will be measured Every 2 week(s)

██████ experiences emotional dysregulation, which results in missing school per parent and student report.

Her attendance will increase from attending 2 out of 10 school days to 8 out of 10 school days per two week period.

— Goal Projection (Low)



Family Support Specialist

Job Purpose/Reason:

To work as the liaison between home and school and to assist parents in becoming actively engaged in their children's education

Position Responsibilities:

(Primary Functions)

1. Plans and conducts activities to assist parents in becoming actively involved in the instructional/academic programs of the school;
2. Works with school staff to develop and maintain positive home-school relations;
3. Provides school staff with information and resources on best practices for family and community engagement;
4. Conducts pre and post surveys and assessment tools to determine needs and interests of school families;
5. Works with school staff and outside agencies to provide workshops on a variety of parenting topics relevant to the needs of school families such as bullying, curriculum, assessments, child and adolescent development, technology, etc.
6. Works collaboratively with principal and parents in developing the Title I home-school compact and parent involvement policy;
7. Maintains accurate documentation of all parent involvement programs and activities-notices, agendas, sign in sheets and minutes
8. Establishes a parent resource center in the school;
9. Provides referrals to other agencies and works collaboratively with these agencies to enhance services to families;

Challenges

- Poor initial readiness at some sites
- Some administrators not buying in
- Some high level school leaders conveying anti PBIS messages
- Mental health center policies caused problems in hiring and changes in workforce

Challenges Continued

- Hard for mental health system/staff to get out of traditional paradigm (e.g., for clinician involvement in Tier 2)
- Some compliance issues (e.g., for intervention receipt form)
- Continued resistance by schools to involve families

Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS)

Concepts and Strategies for Families
and Schools in Key Contexts



edited by
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Family-School-Community Alliance

Vision

Promote family, youth, and community engaged partnerships in research, practice, and policy to improve prevention and intervention in the systems and practices of positive behavioral interventions and supports and related multitiered systems of support toward improvement in valued outcomes.

Priorities

- Emphasize research and implementation
- Strengthen infrastructure
- Create research-practice partnerships
- Support the PBIS Center and other relevant organizations to create resources that align and integrate family-school-community partnerships in school and program systems and practices
- Convene at relevant national meetings (e.g., APBS, PBIS Implementers Forum)



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**April 18-19, 2019
Myrtle Beach, SC**

Thank you!

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