







# Using CoIIN to Enhance Resource Mapping & Interdisciplinary Collaboration within a Medium-Sized Suburban School District

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Fairport Central School District

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## Objectives

Discuss how SHAPE and the Collaborative Innovation and Improvement Network (CoIIN) has enhanced our School Mental Health System's ability to systematically collaborate, map, and team with a comprehensive array of behavioral health supports available both in- and outside of our suburban school district

## Fairport Central School District

- FCSD serves 5,960 K 12 students across 8 schools including four elementary schools, two middle schools, one 9th grade-school, and one high-school.
- Approximately 20% of students receive free/reduced lunch; 1% are Native American, 3% Asian, 5% Black, 3% Hispanic and 88% Caucasian
- The district employs 526 teachers and 548 'other' staff, including 10 Social Workers, 15 School Counselors, and 15 School Psychologists. UR Medicine supplements this with 3 part-time doctoral-level Psychologists, two LCSWs, and a community-resource specialist.

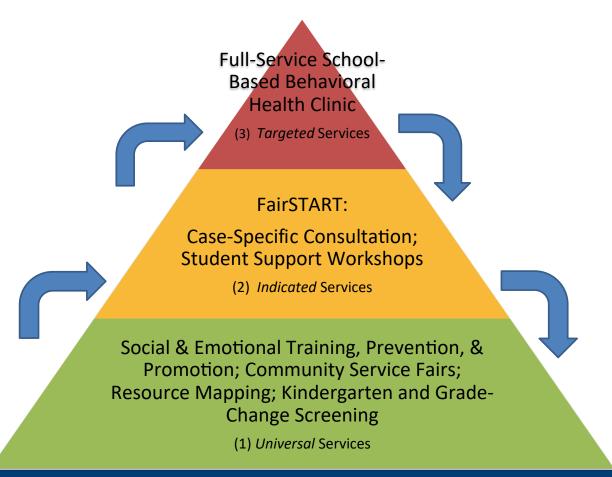
## FairStart:

## A District-Community Partnership

- Proactive approach to bring URMC resources into the district.
- District's mental health staff were referring students and families to URMC for crisis intervention resulting in inpatient and outpatient services.
- The goal for the partnership was to further strengthen the resources in district and to streamline the process for families to access mental health services.
- Data to support this initiative was realized through our annual YRBS, an increase in families with lower SES, and an increase in students displaying behavioral challenges

### The FairStart CSMHS

Mission: Promote the socioemotional health, wellbeing, and academic success of Fairport's youth and families through prevention programming, training & collaboration with educators, and comprehensive child clinical services in a school setting.





## FairStart and CoIIN



## Collaborative Improvement and Innovation Network

- Learn from each other and experts to collectively make improvements
- Innovative, multi-faceted learning framework to rapidly translate expert knowledge and best practices to practical program change

## CoIIN Participants FairSTART CSMHS



Deb Miles, Director of Student Services at FCSD



Erin Moretter, Asst. Principal of Northside School at FCSD



Tori Lammerhirt, District Behavior Specialist at FCSD



Nancy Loughran, Parent & Community Advocate



Melissa Heatly, CoIIN Team Leader Clinical Psychologist at UR Medicine



Linda Alpert-Gillis,
Director of Pediatric Behavioral Health Outpatient
Services at UR Medicine



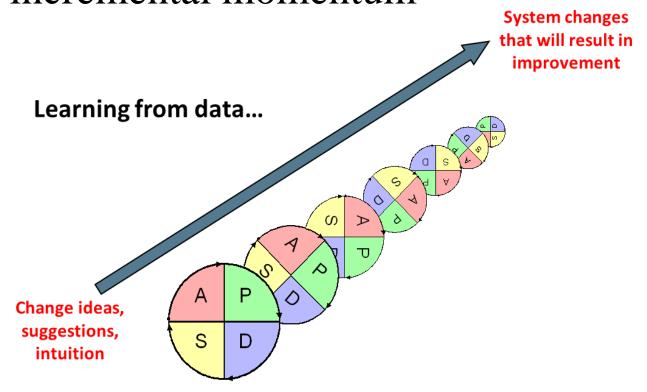
Rich Worden, Community Education Liaison at UR Medicine

## CoIIN Methods

- Step 1: Conduct a detailed qualitative and quantitative needs assessment, with the assistance of the School Health Assessment and Performance Evaluation System (SHAPE System)
- Step 2: Extensive training and technical assistance from the Center for School Mental Health & National Experts
  - In-person and virtual learning sessions
  - Technical assistance and coaching
  - Selection and implementation of change packages

## CoIIN Methods

■ **Step 3:** Plan-Do-Study-Act Cycles that include small tests of change, to build incremental momentum



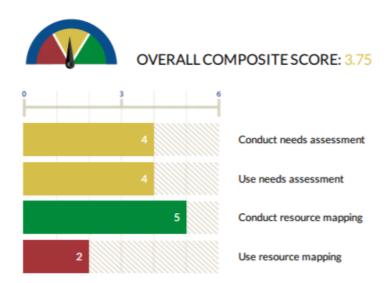
## Step 1: Conduct Needs Assessment

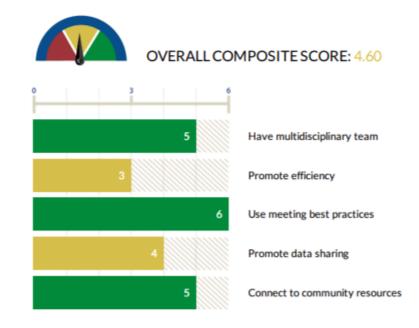


QUALITY DOMAIN Needs Assessment/Resource Mapping



QUALITY DOMAIN | Teaming





## Step 2: Resource Mapping

- Resource map contains 12 sections detailing resources both within the community and across the school district.
  - Mental health resources, emergency mental health, parent resources, regional wraparound services, services for persons with developmental disabilities
  - Incorporates district-based resources as well
  - Also includes services identified within 7 outlying counties that youth either move to or from.
- Rolled out in a workshop-based training to school mental health staff

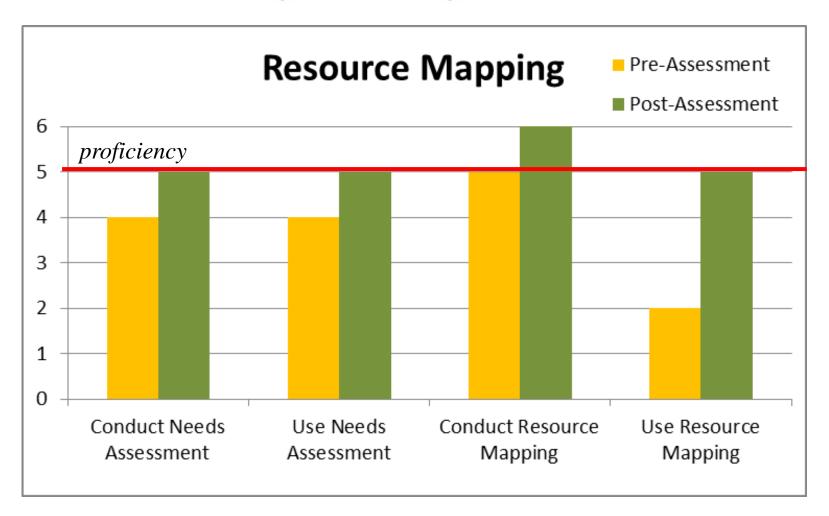


FAIR START
SOCIAL AND EMOTIONAL
DISTRICT AND COMMUNITY RESOURCE MAP

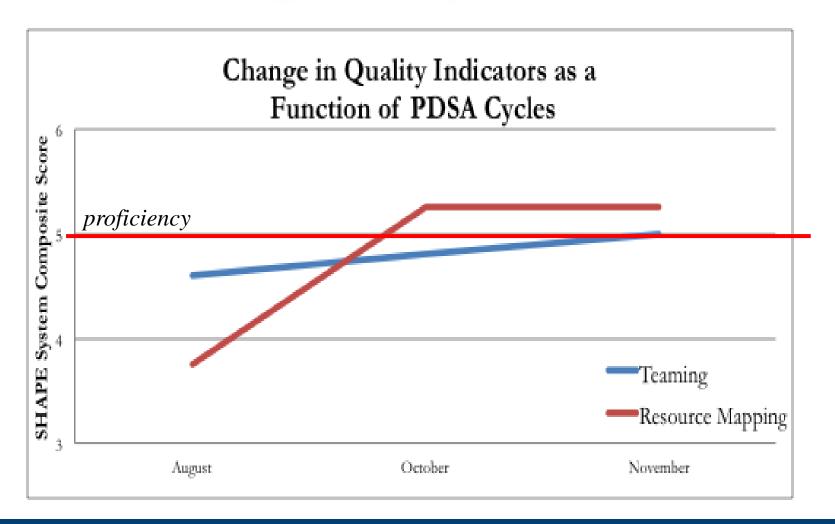
## Step 3: Training in Resource Mapping

- A series of workshops were conducted in which we explicitly reviewed the resource map, and used it in a series of vignettes designed to provide a cross-walk of the different sections of the map
- Partners at UR Medicine also engaged in ongoing consultation for school mental health staff on how to utilize this map effectively, and navigate changing community resources

## Assessing Change Over Time



## Assessing Change over Time



## Discussion

 Educators and psychologists increasingly coordinate evidence-based mental health services and programming with school staff and across educational systems

Training school mental health professionals how to negotiate the needs of multiple systems and professions is necessary to overcome barriers and gaps in service.

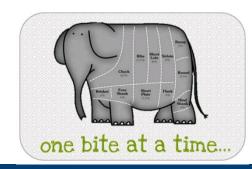
## Discussion

- Resource mapping offers a strategy that can help identify a larger array of supports and resources that are available to students and families.
- Resource Mapping also facilitates more effective teaming across school and community behavioral health and support agencies.

## Practical Tips in Making Change

■ Tip #1: Small steps add up to mountains of progress. But still, start with something manageable!

- Tip #2: Steal shamelessly, share seamlessly
- Tip #3: **Plan** for success, and remember...
  - Some is not a number
  - Soon is not a time
  - Hope is not a plan











### Thank you!

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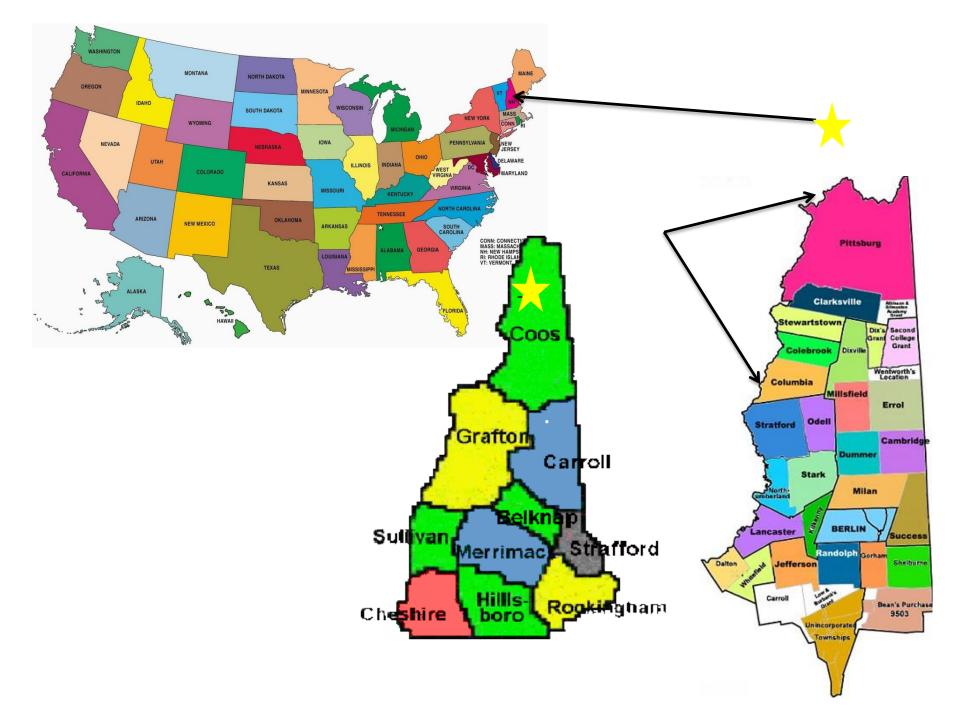
Melissa Heatly, Ph.D. Melissa\_Heatly@URMC.rochester.edu *University of Rochester Medical Center* 



## SAU 7 OFFICE OF STUDENT WELLNESS

JENNIFER NOYES

AMY CARON



## BARRRIERS DUE TO BEING A RURAL COMMUNITY

- Access to providers, options
- Waiting lists
- Transportation, travel
- Lack of specialists locally
- Time
- Difficulty with objective treatment
- Funding, medicaid etc.
- Small schools

## HOW COIIN WORKS IN THE SAU

- School behavioral health program established SAU wide
- One team for the whole SAU, but with PDSAs we often focused smaller
- Team had members of staff that worked with all schools, two local mental health programs, and a parent
- Struggle with meeting regularly as everyone wears many hats
- Lots of work done through emails and using a Google Doc

## HOW DID COIIN/SHAPE HELP US IN DEVELOPING PROGRAM

- We were able to have data on what we did that was working and what areas we needed to improve upon
- We knew what to track and were able to develop a system for this
- We were able to learn and become familiar with the PDSA cycle and small change tests
- Progress monitored regularly

## MAJOR ACCOMPLISHMENTS THROUGH COIIN

- Universal screening
- Tier 2 training and meeting protocol
- Progress monitoring tool
- Schoolwide behavioral health services tracking system developed
- We have begun the exploration of system for tracking student data for tiers 2 and 3

### PDSA FOR UNIVERSAL SCREENING



PDSA WORKSHEET Date of test: ended Full facility name: SAU 7 Project Aware Test Completion Date: 9/28/2016 9/28/2016 Which change idea does this test? Using a protocol for teachers to complete a mental health screening tool will improve screening data collection for students enrolled in school/served by our mental health providers Which driver is this test related? SCREENER PLAN DO: Test the changes. What questions do you want this test to answer? Was the cycle carried out as planned? Yes Is the protocol developed easily followed and feasible? Record data and observations. Teacher reported the information was useful, took about 10 minutes, she felt bullying defiance and listening skills were missing, she felt giving teachers time during the school Briefly describe the test: day to complete would be helpful One teacher complete the screener for one student following the protocol What do you predict will happen? What did you observe that was not part of our plan? We will get feedback that will help us to improve the protocol Took longer than we expected to complete for 1 student, some areas the teacher felt were PLAN missing Person List the tasks necessary to complete responsible STUDY: Where this test (what) (who) When Did the results match your predictions? Yes No CES 1. Have an initial meeting to discuss Team, Jen N Beginning of this whole psda and begin will schedule week of Sept developing protocol 19th, 2 Compare the result of your test to your previous performance: meetings that This was our first time running this type of test week September CES 2. Follow the protocol as developed One team What did you learn? in training and giving staff the member (will be 26th Teachers would appreciate time during the day to complete, up to 10 minutes per student, chosen during instructions teachers want to give more data on bullying, defiance, and listenig skills. Directions and 1st meeting) process worked, no problem with the teacher not understanding or seeing the importance September CFS 3. One person completed the Staff chosen ACT: Decide to Abandon, Adapt, Adopt screening on one student. 27th Abandon: Discard this change idea and try a different one. Adapt: Improve the change and continue testing. 4. Interview the one person, Same person September CES Describe what you will change in your next PDSA 28th collecting feedback who completed We will set aside more time to complete, give teachers time away from students to protocol complete during the day, Add a piece where teachers can add notes or additional How will you know that the change is an improvement? Plan for collection of data: information they want to share. We will now have one teacher conduct the screener Teacher interview, reviewing results and check that it was completed correctly on a whole class. Test length per student once again. Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability

## PDSA FOR UNIVERSAL SCREENING



#### **PDSA WORKSHEET**

		Full facility name:	SAU 7		Date of test: October	Test Completion Date: By October 14th	
Plan D	00	Change Idea:			1	, .	
Act St	tudy			o complete a ment ur mental health pr		Il improve screening data collection for students	
		Which driver is this	test related? SCI	REENING			
DIAN							
Is the SAEBRS Briefly describe One teacher co	s do you want this test to ans S screener feasible and usefu e the test: omplete the SAEBRS screen redict will happen? rs will report the protoco	I for teachers and st	in their class	V R T the second	nat it took 2-3 minutes per child, creener so teacher doesn't have the felt she has had enough time eacher felt there was more data What did you observe that was n	t down and think about these qualities in her students, she reported was easy to follow, requested that key be placed on back of to turn page around when looking for the key to answer questions, to get to know the students and felt this screener is important. The she wanted us to know such as parent participation.	
Annual Control of the	necessary to complete this test	Person responsible			STUDY:	tions? Yes No	
	(what) e first teacher to conduct ith 5 students	(who) Subgroup	Second week of October	CES	bid the results match your predictions and the result of your test to		
Make copies and train the teacher on how the procedure works		Jen and Val	Between 10/10 and 10/15	CES or school te	This teacher reported that the screener took less time, this teacher and the initial teacher who tested both had positive responses and feel data is important, both felt staff would appreciate a score more accurately if time is given  What did you learn?  Screener is feasible, staff would like extra time to do the screener, place key on the back to ma easier for teachers, there is additional data teachers would like us to know not related to social emotional academic skills we will explore what this data is and how this can be gathered and		
3. The classroom teacher will complete the screening on the 5 students		Classroom teacher	Third week of Oct	S			
4. Review data and discuss feasibility of screening completion with the teacher		Coiins team member and classroom teacher	Oct. 30th or 31st	CES u	tilized  CT: Decide to Abandon, Ada	·	
	now that the change is an imp					,	
Interview with teacher, based on questions developed by the team						ange and continue testing. change in your next PDSA	
						to implement on a larger scale and develop an implementation inability **Staff will be given time in December to complete	

## PDSA FOR UNIVERSAL SCREENING



#### PDSA WORKSHEET

Date of test: 11/30/16 Full facility name: SAU 7 Project aware Test Completion Date: 11/30/16

Which change idea does this test? Using a universal screener with a tested protocol will improve data collection for all students in the school

Which driver is this test related? SCREENER

#### PLAN

What questions do you want this test to answer? Is the protocol feasible for use with a whole class (for both the teacher completing the screener and the School Behavioral Health (SBH) Staff scoring and inputting data)?

Briefly describe the test: One teacher will complete the screener on one class and the SBH staff member then score. Both will be asked questions

What do you predict will happen? The screening protocol will be feasible and the SBH staff will not have any difficulty scoring

#### PI AN

List the tasks necessary to complete this test (what)	Person responsible (who)	When	Where
Identify one teacher to screen their whole class	Team	11/11/16	CES
Go through the protocol with the teacher, then give them time to complete the screener on their class	Jen N. and Val R.	11/16/2016	CES
3. SBH staff will gather date from the leacher	Jen N.	11/16/2016	CES
SBH staff will score the screeners and will complete questions relating to the feasibility of this	Jen N. and Val R.	11/17/2016	CES

How will you know that the change is an improvement? Plan for collection of data: The teacher and the SBH staff will both answer predeveloped questions.

DO: Test the changes.

Was the cycle carried out as planned? Record data and observations.

Yes No

The teacher reported the test was easy to complete, took about 15 minutes for 15 students, it was helpful to be given time to reflect on each student, that she felt it was important to complete, and that she knew her students well enough at this point to complete. The SBH staff reported that it took between 20 and 25 minutes to score and that this was not difficult.

What did you observe that was not part of our plan? Nothing

#### STUDY:

Did the results match your predictions?

Compare the result of your test to your previous performance: Results were the same, the teacher did report after doing a few each screener went faster

What did you learn? The protocl developed for the screener is feasible and can be completed for the whole class easily.

- ACT: Decide to Abandon, Adapt, Adopt
  - Abandon: Discard this change idea and try a different one.
- Adapt: Improve the change and continue testing. Describe what you will change in your next PDSA
- Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability

Dec. 21st, all teachers in grades k-5 will be given time to complete the screener on their whole class.

## TIER 2 PROTOCOL

#### SAU #7 Tier 2 Meeting Protocol

<u>Team members</u>: principal or representative for principal, guidance, SAP, nurse, Therapist and Case Manager from Northern Human Services, PBIS coach), Project Aware Project Manager

- -Special Ed. Teachers may be invited to some meetings if a child they work with is being discussed and they stay just for those students
- -Teams should meet at least once a month

#### First Meeting

Develop mission and norms

Decide on roles for meeting (timekeeper, notetaker, who will run the meetings)

Decide on who will bring what data

ODRs, attendance, academic, nursing, teacher referrals, SAEBRS (universal screening)

Develop set meeting schedule (example- every third Tuesday of the month at 9 am)

\*\*PRIOR TO EACH CONSECUTIVE MEETING, THE PERSON WHO HAS BEEN DECIDED WILL RUN THE MEETING WITH REVIEW DATA AND DEVELOP A LIST OF STUDENTS TO DISCUSS (BETWEEN 5 AND 10 DEPENDING ON SIZE OF SCHOOL. THEY WILL DEVELOP THE AGENDA WITH THESE NAMES AND SHARE WITH THE REST OF THE TEAM. MEMBERS OF THE TEAM WHO HAVE BEEN ASSIGNED TO BRING DATA WILL GATHER THIS DATA ON THESE STUDENTS AND HAVE IT READY DURING THE MEETING.

#### All other Meetings

Review norms and mission

Review roles

Begin discussing students on the agenda (students who are already seen in groups may be on the agenda to check on progress, but this will mostly be new students each meeting)

For each student

- discuss each piece of data
- -decide on function of behavior?
- what skills is the child lacking?
- -Looking at intervention list make decisions about what program we can assign the students and who will work with the child (schedules will be done at a different time)

wrap up by reviewing groups developed, program, and who will run the groups

### HOW WILL WE CONTINUE OUR WORK

- WE WILL CONTINUE TO WORK WITH THIS TEAM, BUT COMBINE WITH ANOTHER SCHOOL TEAM TO SHARE WORK
- WE WILL CONTINUE PDSAs
- SHAPE WILL BE USED REGULARLY TO MONITOR WORK

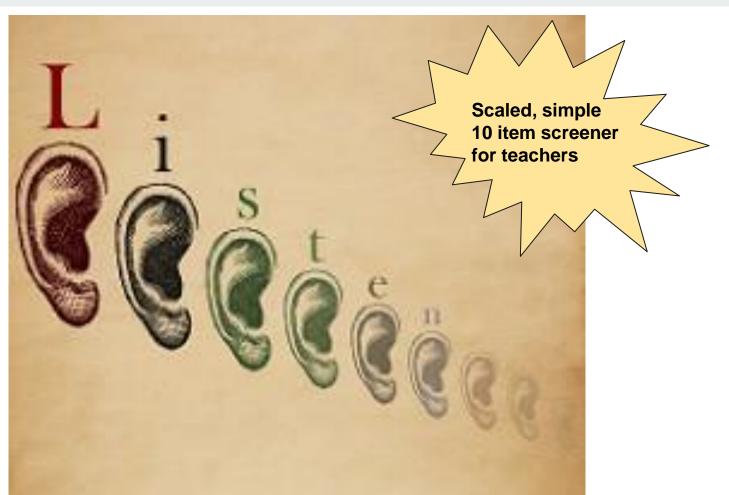
## Using COIIN to Improve School-Wide Mental Health Screening

CSMH Conference on Advancing School Mental Health Washington, D.C.
October 20th, 2017

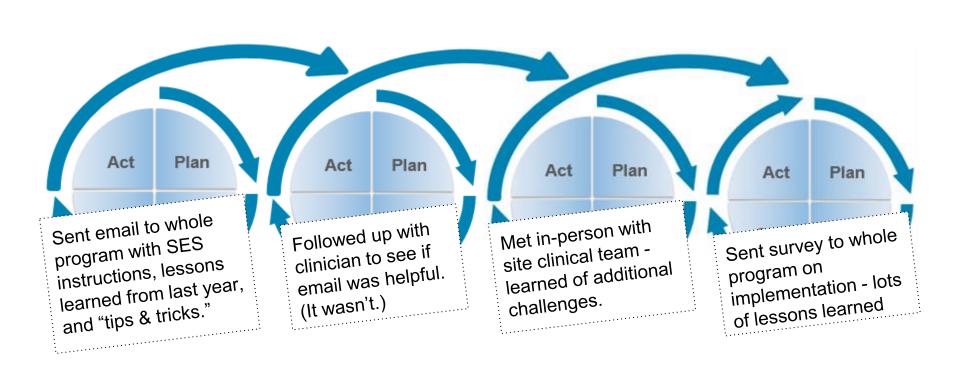
Sean Murphy Emily S Marsh LCSW CA26725



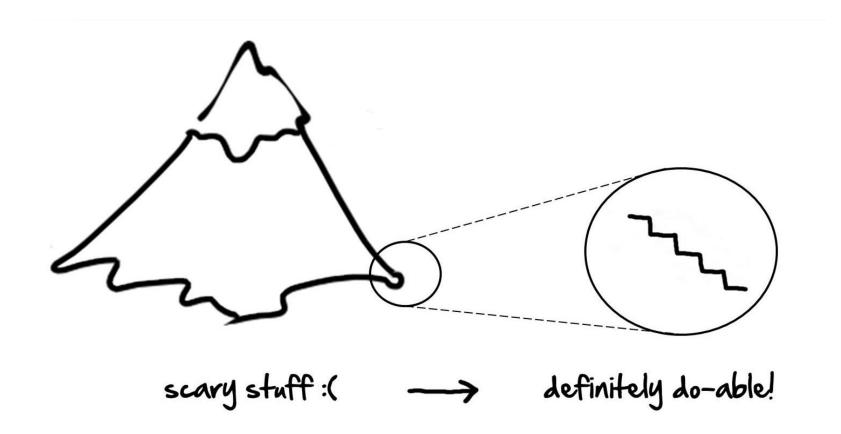
### **Intro to Social Emotional Screener**



## PDSA Cycles: Improving How We Use and Share SES Data



### **Starting small...**



### **Current work / roll out**



"I plan to continue working with the Toolbox [SEL Curriculum] in my class and checking in with students around applying these tools at home to help them work through any traumas they experience there."

"I'm going to use the grade summary from the SEL screener to better respond to particular students."

### "I appreciate that Lazear is making SEL and traumainformed education a priority."

"I will think more specifically about my extra challenging students I have this year who also happen to be high scorers on the SES survey."

"Hearing about ACE scores was really interesting and impactful."