Finding the Bridge: A Collaboration Between Government and Education

ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES

Children, Youth & Families

Behavioral Health

Intellectual Disability

Aging

Cross System Supports
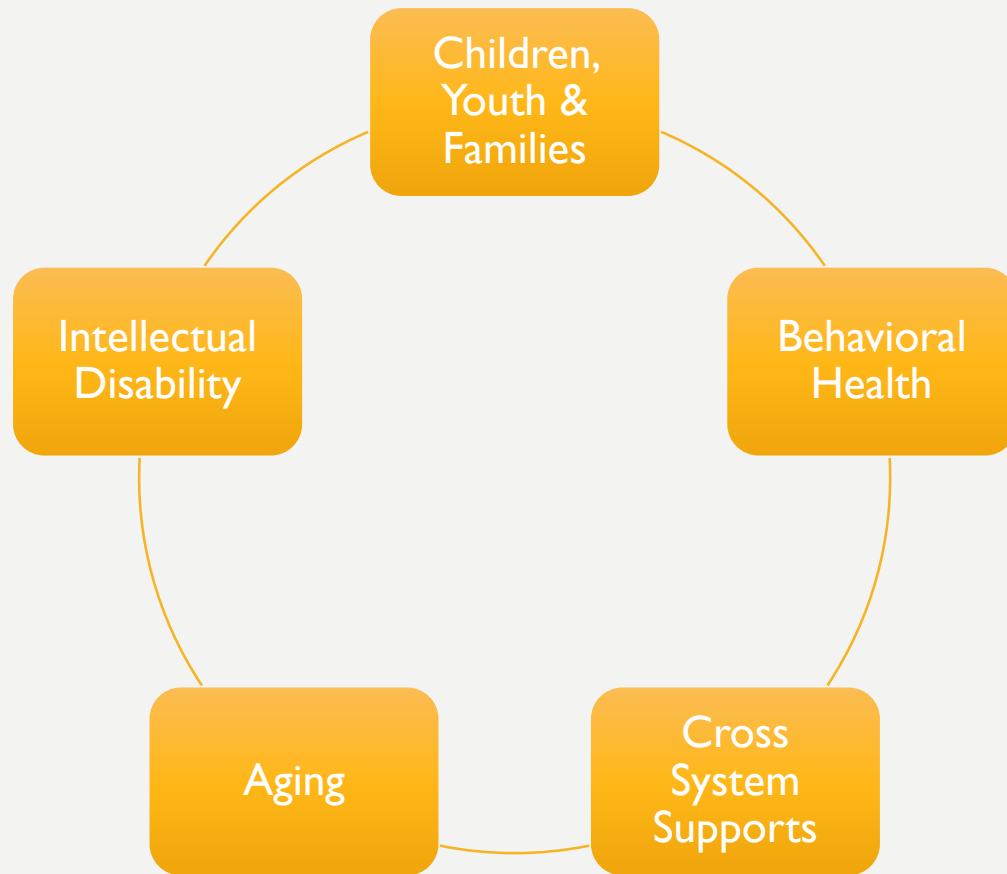
- Provide publicly-funded human services to about 20% of the population of Allegheny County. Actively provide case management to more than one-third of those individuals

- Manage a total budget of $802 million (160 funding sources)

- Fund more than 300 providers, for more than 1,700 distinct services

DATA SHARING AGREEMENT

What Are We Trying To Accomplish?

"How do we improve educational outcomes and child well-being

in Allegheny County?"

- Share data to identify attributes and indicators for academic and behavioral successes and challenges

- Enable School Districts and Allegheny County Department of Human Services to create and implement strategies and/or interventions to improve educational outcomes and enhance child and family well being

Using shared data allows for better informed decision-making and collaboration/sharing of resources that will improve outcomes for all students.

PHILOSOPHY OF LEADERSHIP

As part of our due diligence concerning data confidentiality, DHS hired an independent expert, to examine how our use of data complies with federal and state laws on the privacy and security of individually identifiable health information. With his assistance, we were able to develop a data-sharing approach that is in keeping with the letter and the spirit of the applicable laws.

- **DHS believes fundamentally that sharing protected information is critical to the provision of care**. The <mark>appropriate</mark> sharing of client information promotes good care, and is essential to the continuity and overall quality of care provided to our clients.

INTEGRATED DATA SYSTEM

Internal Sources

- Aging
- Children, Youth and Families
- Community Service Block Grant
- Drug & Alcohol
- Early Intervention (partial)
- Family Support Centers
- HeadStart (partial)
- Human Services Development Fund
- Homeless/Housing
- Low Income House Energy Assistance Program
- Medical Assistance Transportation Program
- Mental Health (public)
- Intellectual Disabilities
- System of Care Initiative

External Sources

- Allegheny County Housing Authority
- Allegheny County Jail
- Allegheny County Medical Examiner's Office
- PA Department of Human Services (TANF, food stamps)
- Housing Authority City of Pittsburgh
- Juvenile Probation
- Pittsburgh Public Schools +21 additional County School Districts
- Pre-trial Services
- Adult/family court
- 911 Data
- Post Secondary Education
- Vital statistics

Potential Data Sources

- Health Department
- Early Childhood (PELICAN)
- Employment & Training
- Adult Probation (forthcoming)

Partner School District
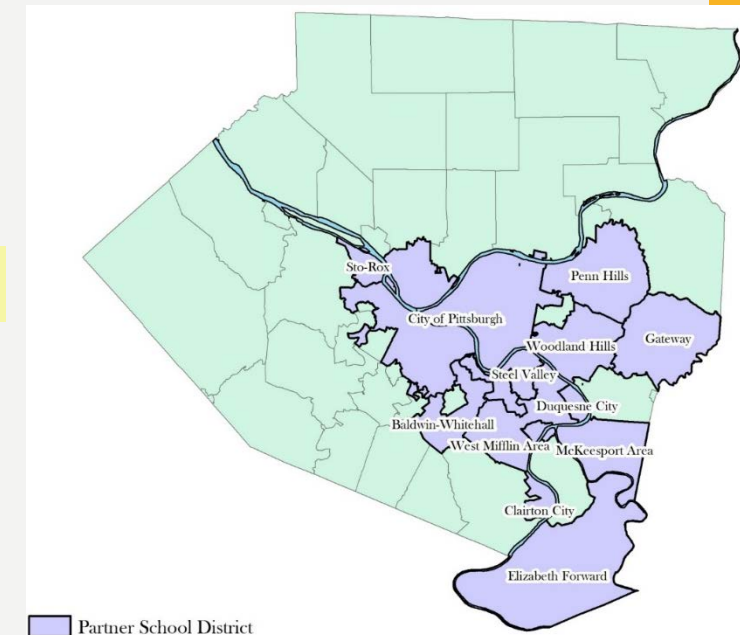
ADDITIONAL COUNTY SUPPORTS

- Student Assistance Program
  - Provide consultation and referrals for students experiencing barriers to learning related to behavioral health or drug and alcohol related concerns
- Education Specialists
  - Provide consultation and support to families to facilitate meaningful IEPs for students with special needs
- Office of Intellectual Disability
  - Provide supports for individuals with intellectual disabilities and autism
- Community and School Based Behavioral Health Team
  - Provide comprehensive mental health support in the school and community setting for students with high level of needs
- Educational Service Specialists
  - Assigned to schools to provide service coordination for students with high level of needs
- Focus on Attendance
  - Provide consultation and referrals for students struggling with truancy

SCHOOL BASED LIAISON

- Housed within the Office of Behavioral Health
  - Child and Adolescent Mental Health Team
- Single point of contact between Department of Human Services and schools
- Allows educators to navigate the mental health and other child serving systems
- Assists schools with building mental health supports in schools
  - Student Assistance Program
  - Outpatient
  - Community & school based behavioral health teams
  - Educational case management/service coordination
- Provides problem solving between school districts and mental health providers

STRUCTURE OF SCHOOL BASED LIAISON UNIT

- Pittsburgh Public Schools (55 buildings, 25,000 students)
  - 2 full time liaisons
- 3 additional full time liaisons cover
  - 14 school districts (inner core around the city)
  - 14 school districts (inner core around the city)
  - 14 school districts (outer ring)

EXAMPLE – HOW DOES THE PARTNERSHIP BETWEEN SCHOOL BASED LIAISONS AND DATA SHARING HELP SCHOOLS?

Raise awareness of the high overlap of human service involvement in their school

- Youth already engaged in mental health services

- Child welfare connections made

- Intellectual Disability ties strengthened

Data supported the school as a basis for asking the mental health system for services INSIDE THE SCHOOL that were tailored to their specific needs (ESC/CSBBHT)

Increase opportunities to influence a trauma informed educational environment (BrainWise and Why Try?)

More information on their student body when applying for grants

Access to funders locally who care about education and expect collaboration

OVERVIEW OF ALLEGHENY COUNTY SCHOOLS

- 250,000 school aged children

- 43 Public School Districts

- 22 charter and cyber charter schools based in Allegheny County

- Additional network of private schools

AIU 3
(ALLEGHENY INTERMEDIATE UNIT 3)

- Regional public education agency

- One of **29 INTERMEDIATE UNITS** across the state of Pennsylvania

- Provide specialized services to Allegheny County's suburban school districts as well as non-public, charter and vocational-technical schools.

- Liaison with the Pennsylvania Department of Education

- Operate three schools for exceptional children, 11 family centers and about 130 programs for children, adults and families.

TAC
(TRAINING AND CONSULTATION COORDINATOR)

- Provide technical assistance and professional development in presentation, interpretation and implementation of all phases of IDEA that was reauthorized in 2004.

- These services are subsidized by IDEA Component II Fund

- Emphasis is placed on improving educational results for all children to ensure the effectiveness of special education programs and services.

- Training and Consultation for Behavior/Intensive Interagency (strong background in behavioral science/ABA and mental health)
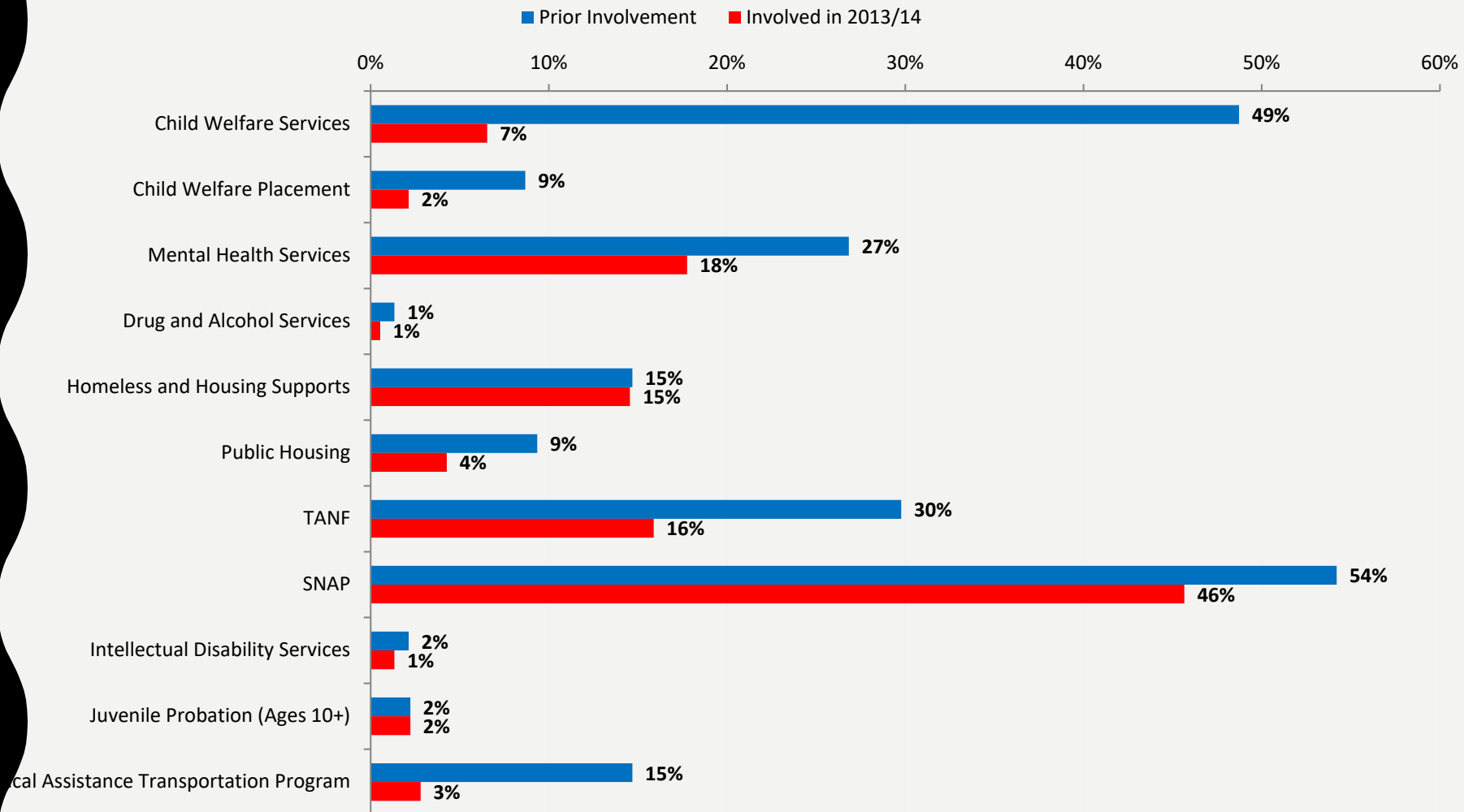
FLOW CHART

County

School ↔ AIU

What type of Meeting for Problem Solving

County Interagency

School Based Interagency Meeting

Intensive Interagency

Action Plan

Reconvene and Review Progress
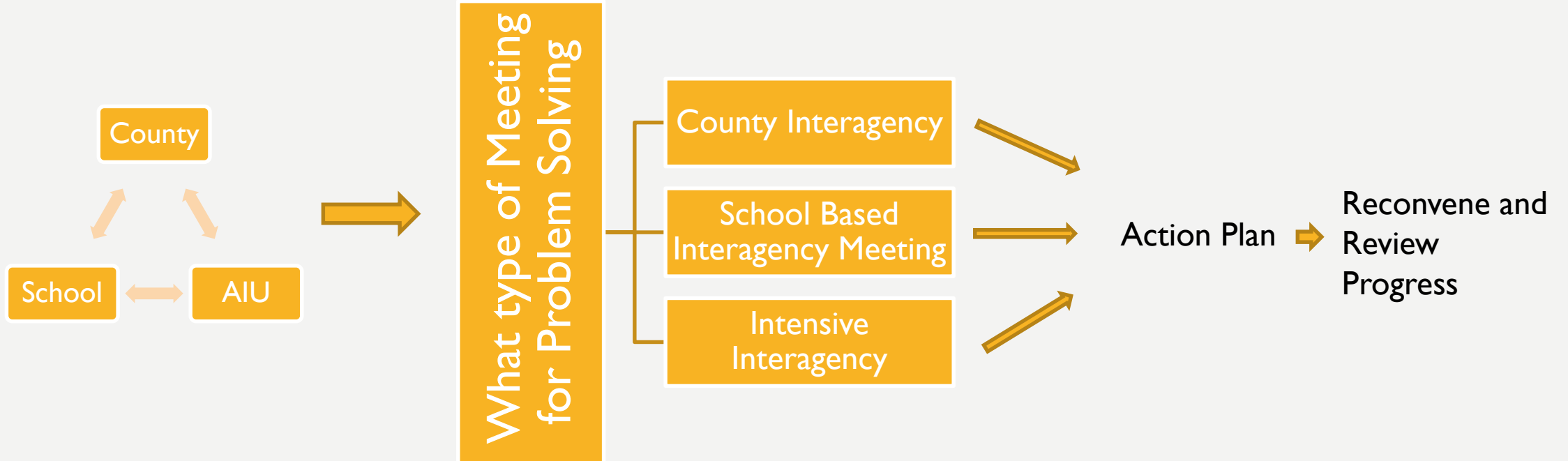
MEETINGS

County Integration and Teaming Meeting	School Based Interagency	Intensive Interagency
• Facilitated by County Personnel • Focuses on overall needs of family and child and barriers to meet these needs • Technical assistance provided to agency providers and families	• Facilitated by School Personnel • Focuses on the educational and other identified needs of student in the educational environment • Technical assistance provided to schools and families	• Facilitated by AIU Personnel • Focuses on an appropriate educational placement that encompasses the educational and therapeutic needs of the student • Technical assistance provided to schools and families

COUNTY ROLE/PROCESS

- Referred by School Personnel, Service Provider, or Family due to concerns with progress, communication or access to services

- County identifies service providers working with the youth utilizing data share and sends out invitations for the meeting

- At the meeting the facilitator encourages the team to identify strengths and needs of the youth and family

- Roles of each service provider are identified and plans are made to determine who able to meet unaddressed needs.

- Gaps in service are addressed through the creation of action plans with identified timelines and responsibility parties.

DETAILED SERVICE INVOLVEMENT DISTRICT-WIDE (N=749)

Human Service Involvement by Program Area

■ Prior Involvement   ■ Involved in 2013/14

Program Area	Prior Involvement	Involved in 2013/14
Child Welfare Services	49%	7%
Child Welfare Placement	9%	2%
Mental Health Services	27%	18%
Drug and Alcohol Services	1%	1%
Homeless and Housing Supports	15%	15%
Public Housing	9%	4%
TANF	30%	16%
SNAP	54%	46%
Intellectual Disability Services	2%	1%
Juvenile Probation (Ages 10+)	2%	2%
Medical Assistance Transportation Program	15%	3%

AIU 3 ROLE/PROCESS

- Referral by school district personnel (most often the Special Education Director)

- Identify all members for the interagency team and an agreed upon date

- Use of tools
  - Initial Line of Inquiry
  - Modified Person Centered Plan
  - Behavior Response/Crisis Plan
  - Action Plan

CASE STUDY

- Steely McBeam
  - 15 years of age
  - Autism diagnosis/IDEA disability category
  - Experiences anxiety, frustration, and being overwhelmed
  - One singular problematic behavior; biting

- Scenario
  - School district contacted the AIU Intensive Interagency Coordinator
  - School placement had recently changed to a school serving students with Autism and behavioral challenges following a number of incidents that included biting others
  - AIU Coordinator suggested interagency meeting to ensure that all services were being accessed and utilized to benefit Steely. Parents would need to give permission to have School Based Liaison at the meeting with other agencies currently involved.

INTERAGENCY MEETING

- Agenda
  - Current status home, school, community, medical/mental health, other services providers
- Choose tool to direct conversation and identify goals
  - Initial Line of Inquiry
  - Person Centered Plan
  - Behavior Response/Crisis Plan
- Identification of next step/goals
  - Create Action Plan

Initial Line of Inquiry

1. Strengths of Student: Positive interactions/follows directions of parents, Math is preferred subject=likes numbers t, navigation of the computer, can ask for help with academics, good fine and gross motor skills, follow one step preferred activity directions, completes self-care routines with prompting

4. Slow Triggers: (Setting Events)	3. Fast Triggers: (Antecedents)	2. Problem Behaviors: (in measurable / observable terms)	5. Actual Consequences: (Natural and/or Planned)
Allergies-seasonal and food (barriers with some medications) Autism Non-reliable communication when frustrated, anxious, or overwhelmed/agitated Not able to calm self/escalates quickly Easily agitated; arrives to school agitated	Loud noises & words Non-preferred (reading) activities Seated to work for too long	Out of seat Biting (Self or Others)	Removal-isolated from peers/adults/activity Guided to calming area Sleeps Students/staff leave area Activity ends Verbal directions from staff Cries

6. Perceived Function(s) of Behavior (what student gets or avoids):
Sensory release; Escape non-preferred activities when overwhelmed/frustrated or anxious

7. Needs: Coping skills, Express-Communicate needs/wants

PATH - PATH is an effective process for bringing together a team that may already know a child well and has made a commitment to supporting the child in the future. PATH is ideal for addressing long and short-term planning. The process provides clear time lines for achieving goals and breaks those goals into achievable and measurable steps. It also identifies individuals on the team who are responsible for completing each action step (Kincaid & Fox, 2002). This is an adapted version of the original PATH for Allegheny Intermediate Unit Use.

Future Goals

3 years away:

Prepared to live on his own in an apartment, but if not possible to be in group home
- Have a full time job in a preferred activity (tech/electronics)
- For him to be Happy and be able to care for himself
- Socially – have a group of friends/Pa Connecting Communities

1 year away: (16 years old)

Back in school
- Making friends
- Learning life skills ($)
- Involved in community based program
- Involved in activities helping others

** To be back in the emotional place he was when he was 15 yrs. old

Strengths

- Good sense of humor
- Academics – Math
- Likes to have friends/helping others/loving and affectionate
- Yoga/Basketball /Swimming
- Music
- Maps
- Color by #/crafts
- Technology/electronics
- Doing tasks/jobs/work – cooking and cleaning up
- Working out – treadmill/elliptical
- Traveling – long distance drives
- Strong memory

Needs

- Coordination and communication of treatment (BTW school/community partners/Dr's)
- Fill in educational gaps from having missed and differences in instructional approaches
- Behaviors need to be safe
- Increase desire to return to school
- To participate with and in, and have social group
- Increase his own communication to express his needs at the early signs of agitation
- Assessment (re-evaluation) – AFLS
- Transition plan

Barriers

- Learned escape behaviors (biting/intense agitation/anxiety), and does not want to return to school
- Safety – needs to learn to be redirected and calmed
- "Getting him on the right medicines"
- Inconsistencies – changes in professionals (TSS/teachers/Dr's) Instructional approaches among teachers/schools
- Communication – his ability to express his needs appropriately
- Isolation from peer group
- Adolescence/puberty
- Transitional planning
- Communication btw school/family/agencies/ Doctors

1 Month

What action?   Who helps?

Establish goals that Agencies and School will work on together and in similar ways (team)

Create a crisis plan to be used across settings (team)

Access specialized services at county for support in addressing supports in return to school (School Based Liaison)

Plan for utilizing technology to access educational services on temporary basis (team)

Behavior Response/Crisis Intervention Plan

Student: _____ Steely McBeam _____ Date: ____ 10/11/18 _____

Calm:

Student: Quiet; attentive to task, engaged with low levels of scripting; low level humming and singing; can be redirected when you have his attention through eye contact. Independent in use of schedule of tasks.	*Adults: Presentation of 1st/then activities using visuals to ensure he knows what reinforce will follow work; provide high levels of praise and reinforcement for appropriate behavior; movement breaks between tasks (have reinforce in another area that he goes to)*

Trigger:

Student: Bounces leg(s); hand flapping with increased intensity; voice louder and higher pitch; says "bad" when presented with non-preferred task and pushes the task away	*Adults: Remove the task and provide "break" at his desk with play dough and weighted lap pad*

Agitation:

Student: Pulls and twists his wrist bands; bites his shirt; increased hand and leg flapping; vocal tone changes; gets out of seat	*Adults: Remove other students from environment; limit verbal directives to a minimum; allow him to calm enough to guide/direct him to calming room; monitor safety of Steely, other students and staff*

Acceleration:

Student: Bites his knee; gets out of seat; rolls on the floor;	*Adults: Remove other students from environment; limit verbal directions to a minimum; allow him to calm enough to guide/direct him to calming room; monitor safety of Steely, other students and staff*

Crisis:

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