

Ready, Set, Integrate: Is your team ready to integrate mental wellness into your PBIS framework?

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Who is joining us today?



- Youth
- Family
- Administrators
- School-based practitioner
- Community-based practitioner
- Researcher
- Technical assistance provider/consultant
- State leadership
- Other?

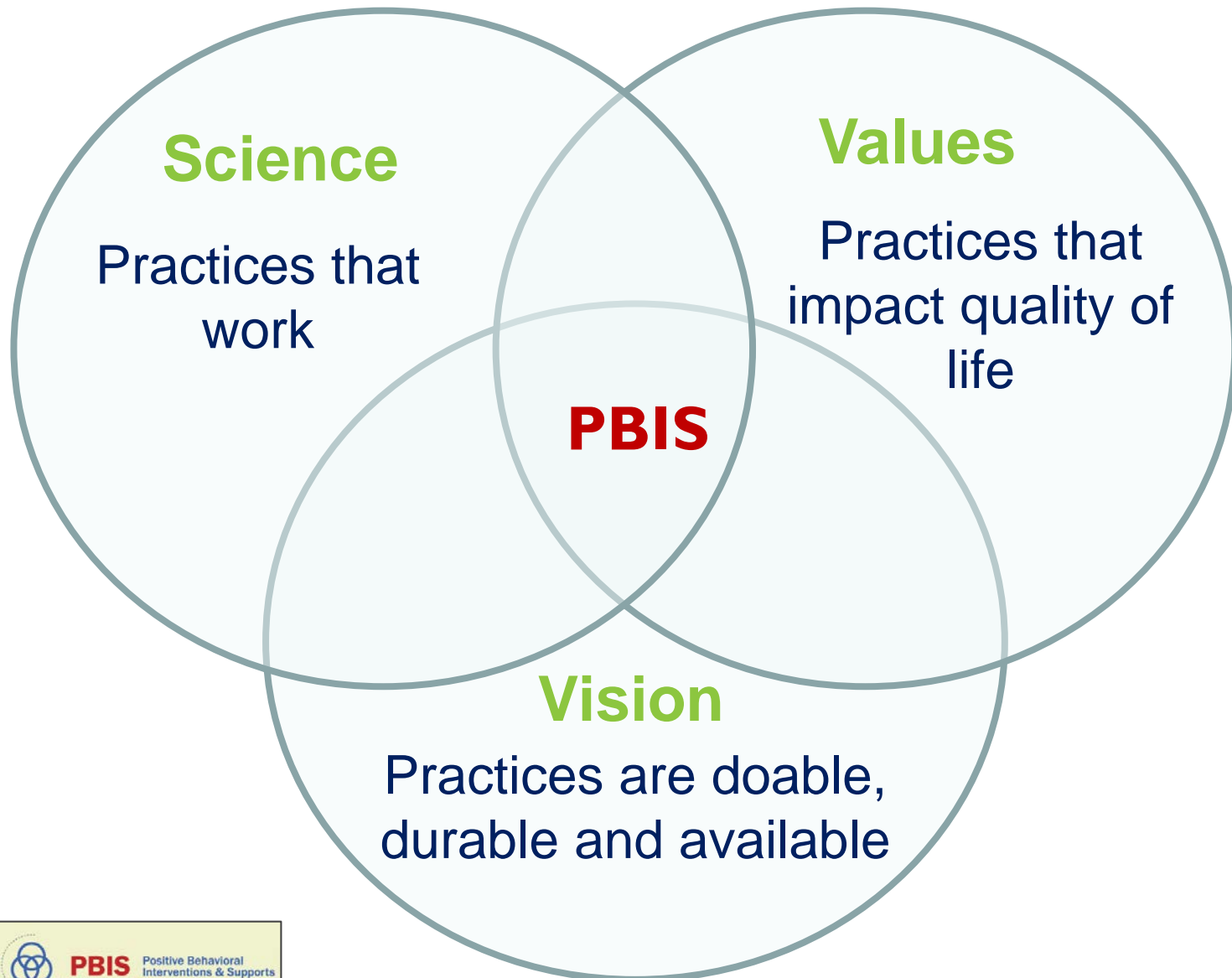
Objectives



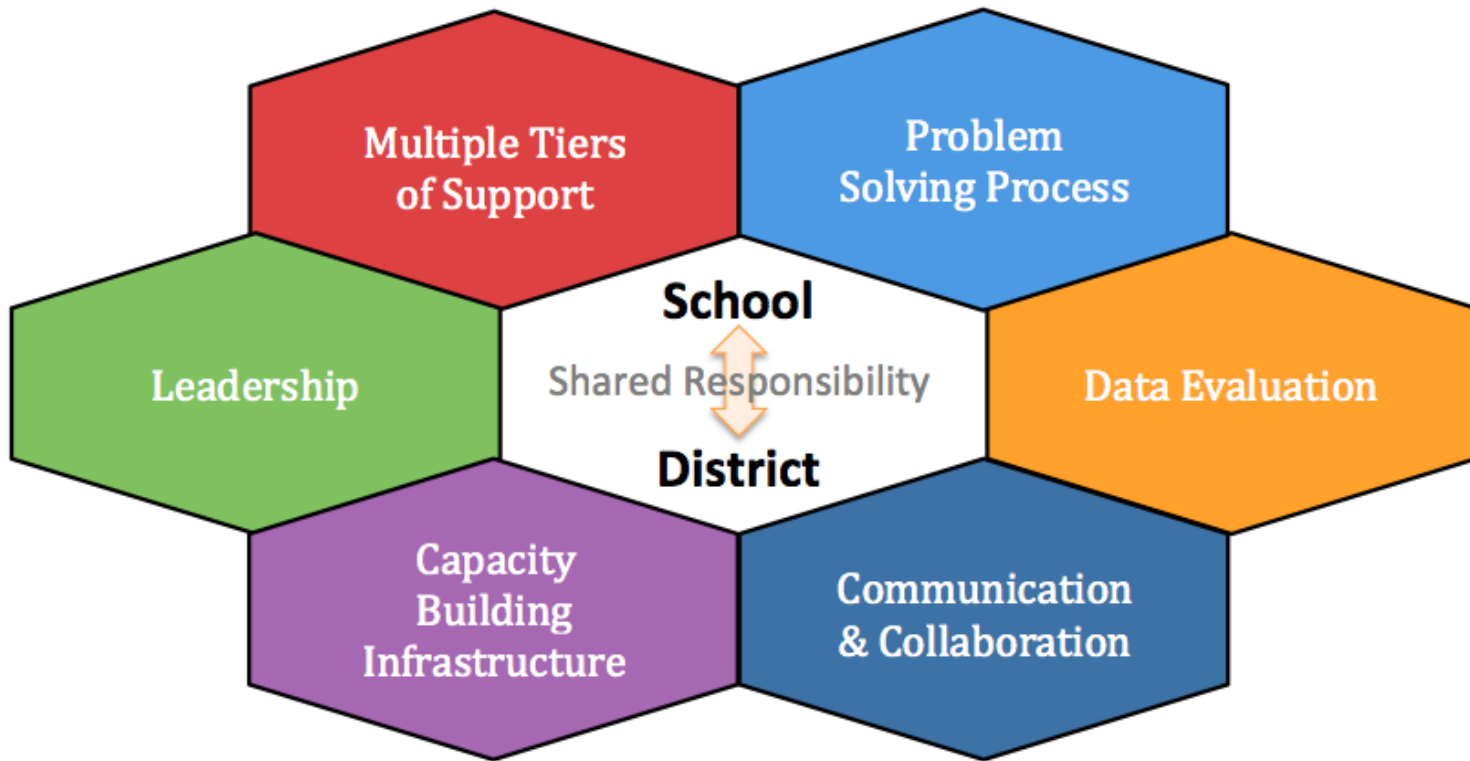
Identify practices (and our lessons learned) for supporting districts integrating mental health supports into their PBIS framework.

- Recognize components of PBIS framework
- Describe practices for effective teaming
- Identify strategies for securing buy-in
- Identify key aspects of coaching and PD

Core Principles



Critical Components (“The How”):



MTSS & the Problem-Solving Process

Tier 3: Intensive, Individualized Interventions & Supports

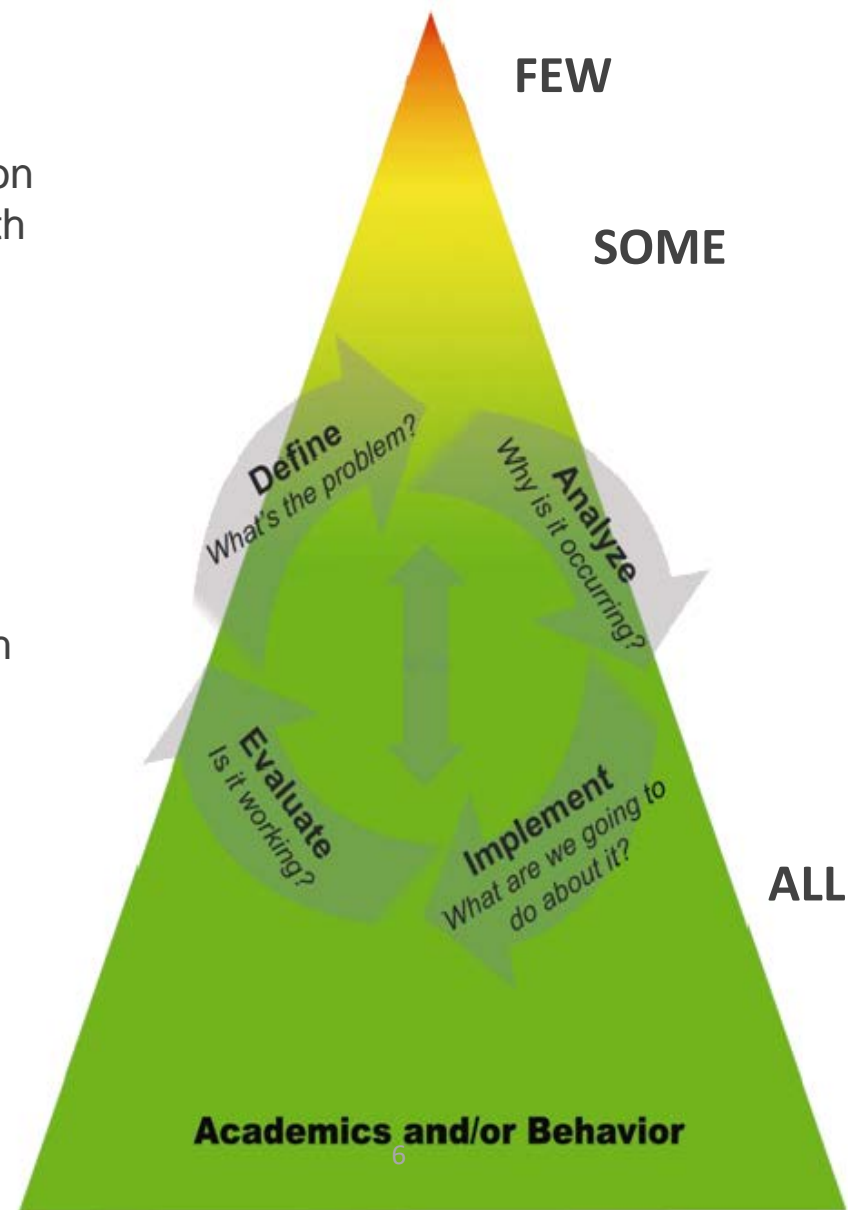
The most intense instruction and intervention based on individual student need, in addition to and aligned with Tier 1 & 2 academic and behavior instruction and supports.

Tier 2: Targeted, Supplemental Interventions & Supports

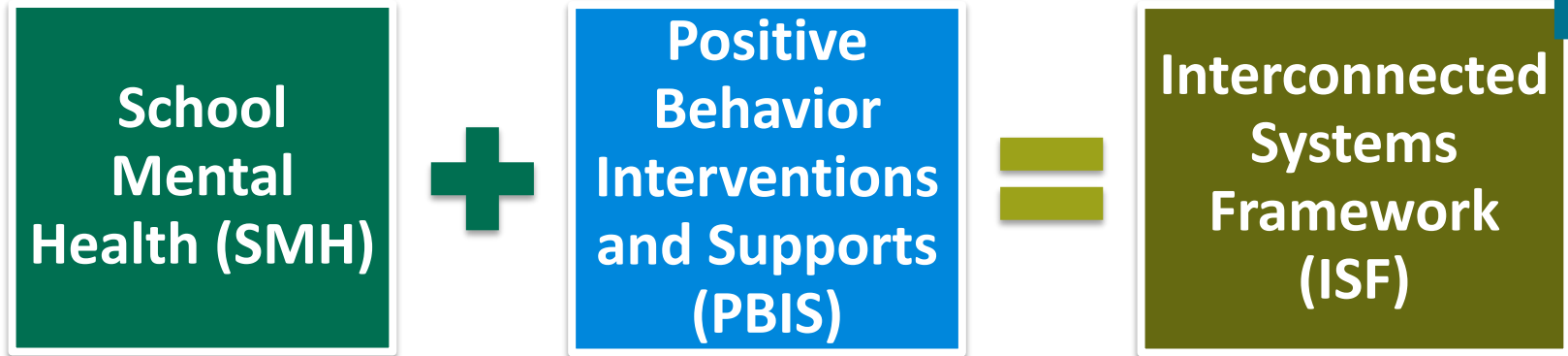
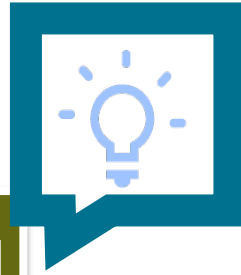
More targeted instruction/intervention and supplemental support, in addition to and aligned with the core academic and behavior curriculum.

Tier 1: Core, Universal Instruction & Supports

General academic and behavior instruction and support provided to all students in all settings.



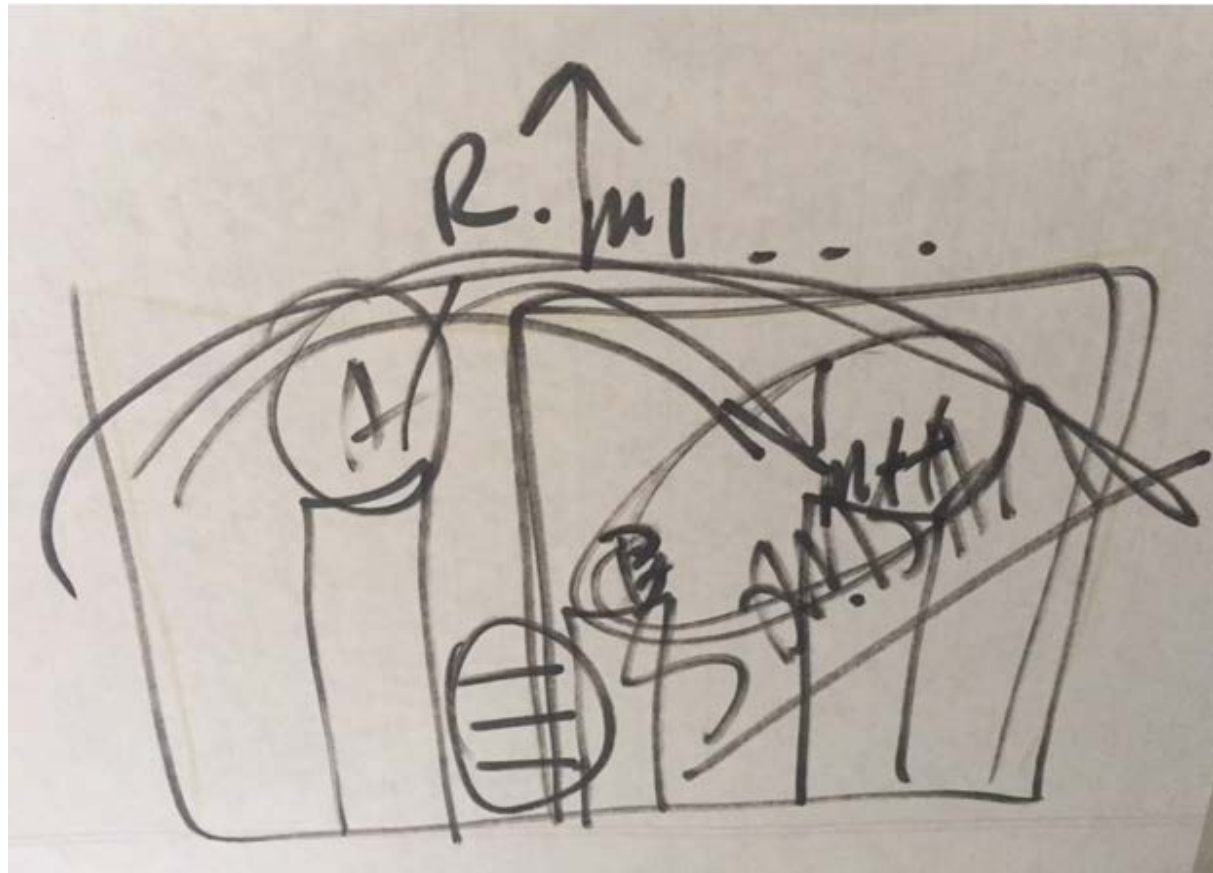
Integrating PBIS and Mental Health



Designed to...

- Improve depth and quality in prevention and intervention services within multi-tiered framework to increase likelihood of positive outcomes for *all students*
 - Address current gaps in extant mental health and educational systems often operating in silos
- (Barrett, Eber, & Weist 2013)

Where to start?



The BIG Lesson: Systems change is hard work.



The stakes are high.

Translating research to practice in schools is challenging.

There are no quick fixes, you'll make mistakes, you're learning.

Change means there will be barriers and resistance.

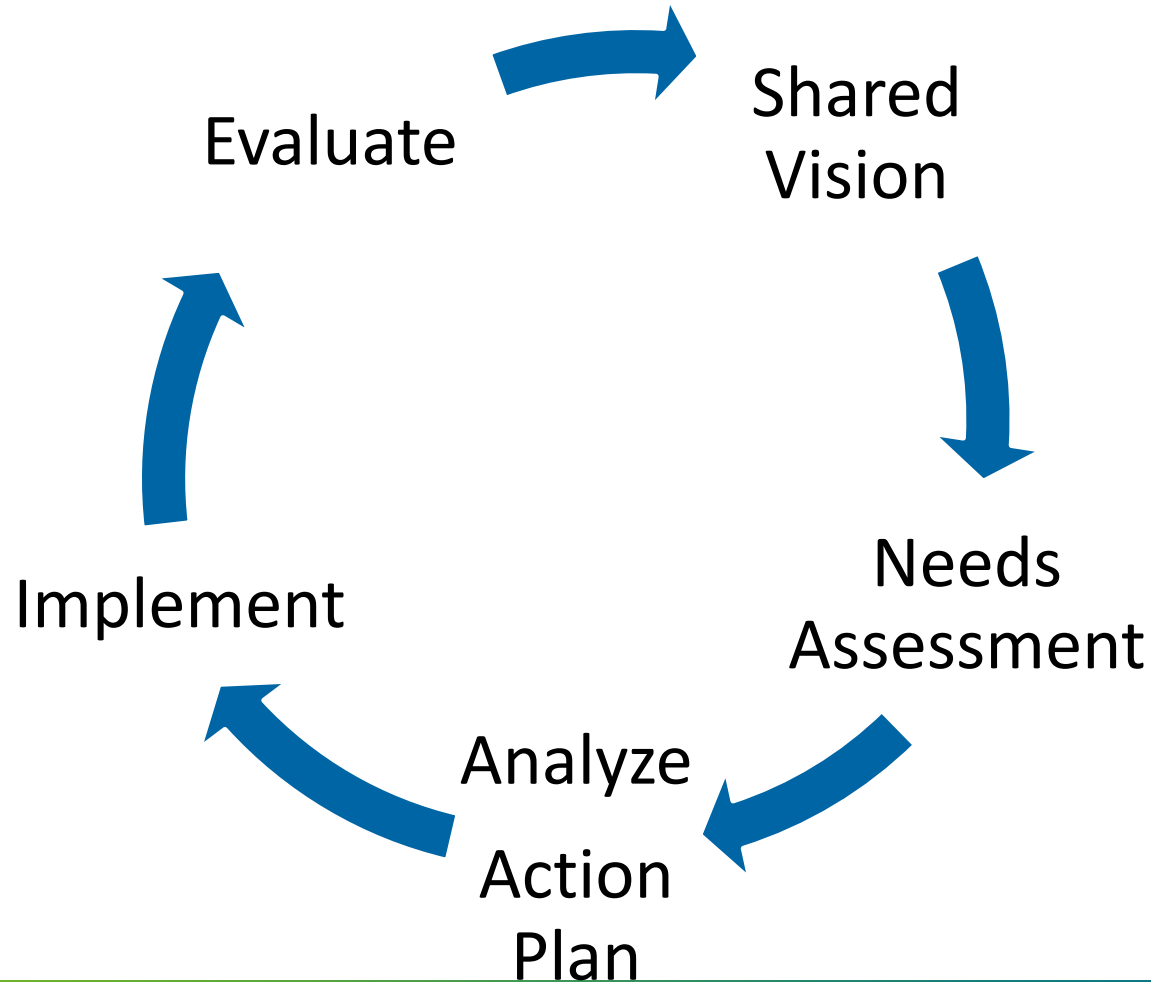
It takes a team **working** together, team members are different.

Acknowledge and celebrate success, no matter how small



DEFINING “THE WHAT” AND “THE HOW”

Continuous Improvement towards a *Shared Vision*



Mental Health and Academic Achievement

You Need to Know: Mental Health Matters



In an average school of 600 students, approximately **100 students** are coping with a mental illness.



More than **1 in 20 young people** ages 12 and over **report current depression**, which among school-aged youth is linked to reduced academic achievement and increased school suspensions.⁷

Mental illness is associated with **school absences**, causing the **loss of critical school funding sources**.⁸



Young people with **attention-deficit/hyperactivity disorder (ADHD)** often feel **isolated** at school due to **social problems** associated with their illness.⁹



Having a mental illness is associated with being pushed out of school through **suspension, expulsion, and credit deficiency**.^{10, 11, 12}

17%
considered
SUICIDE

8%
attempted
SUICIDE

Among students in grades 9-12 in the U.S. during 2013-2014¹³: 17.0% of students seriously considered attempting suicide, and 8.0% of students attempted suicide one or more times in the previous 12 months.

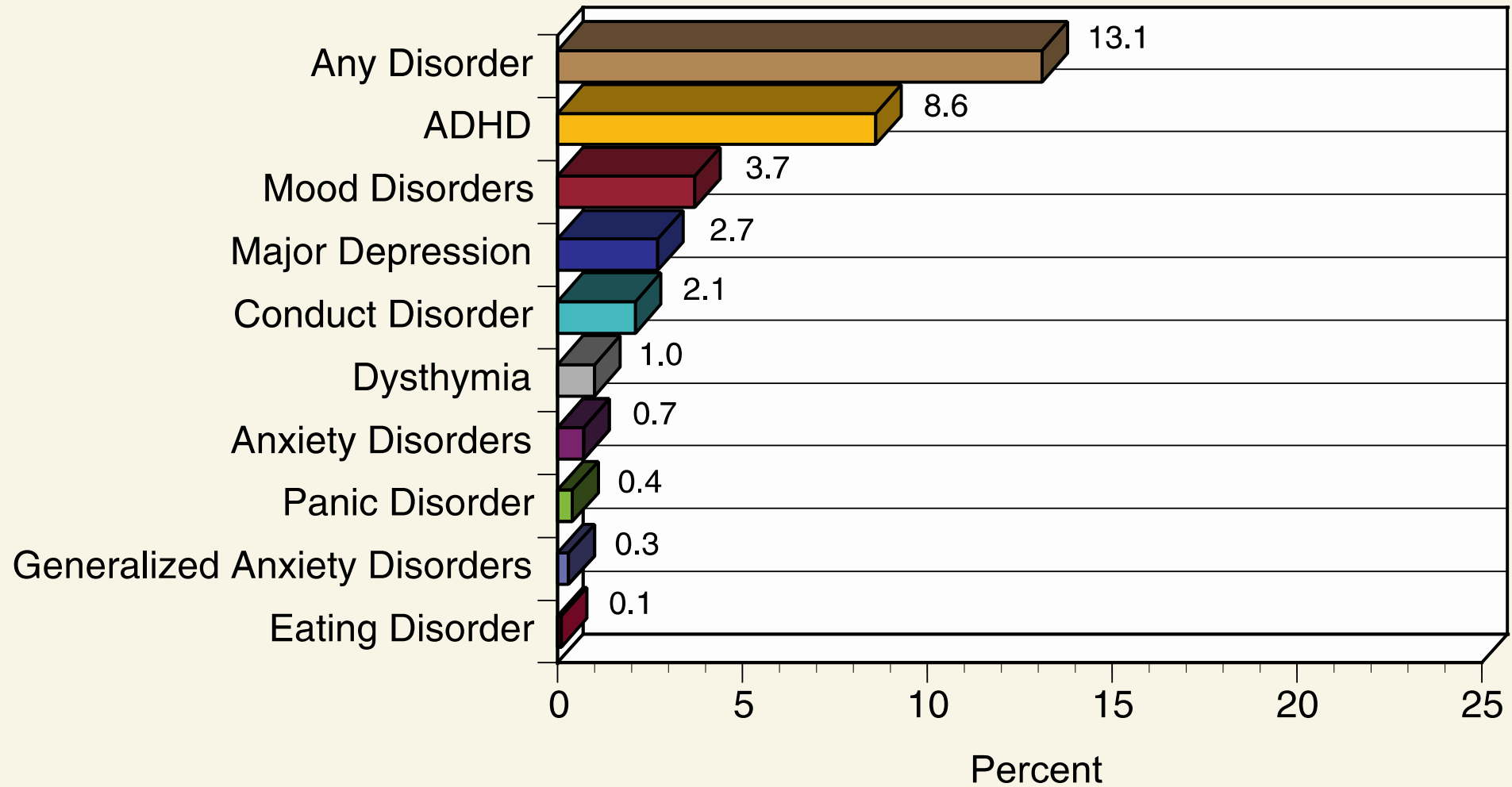


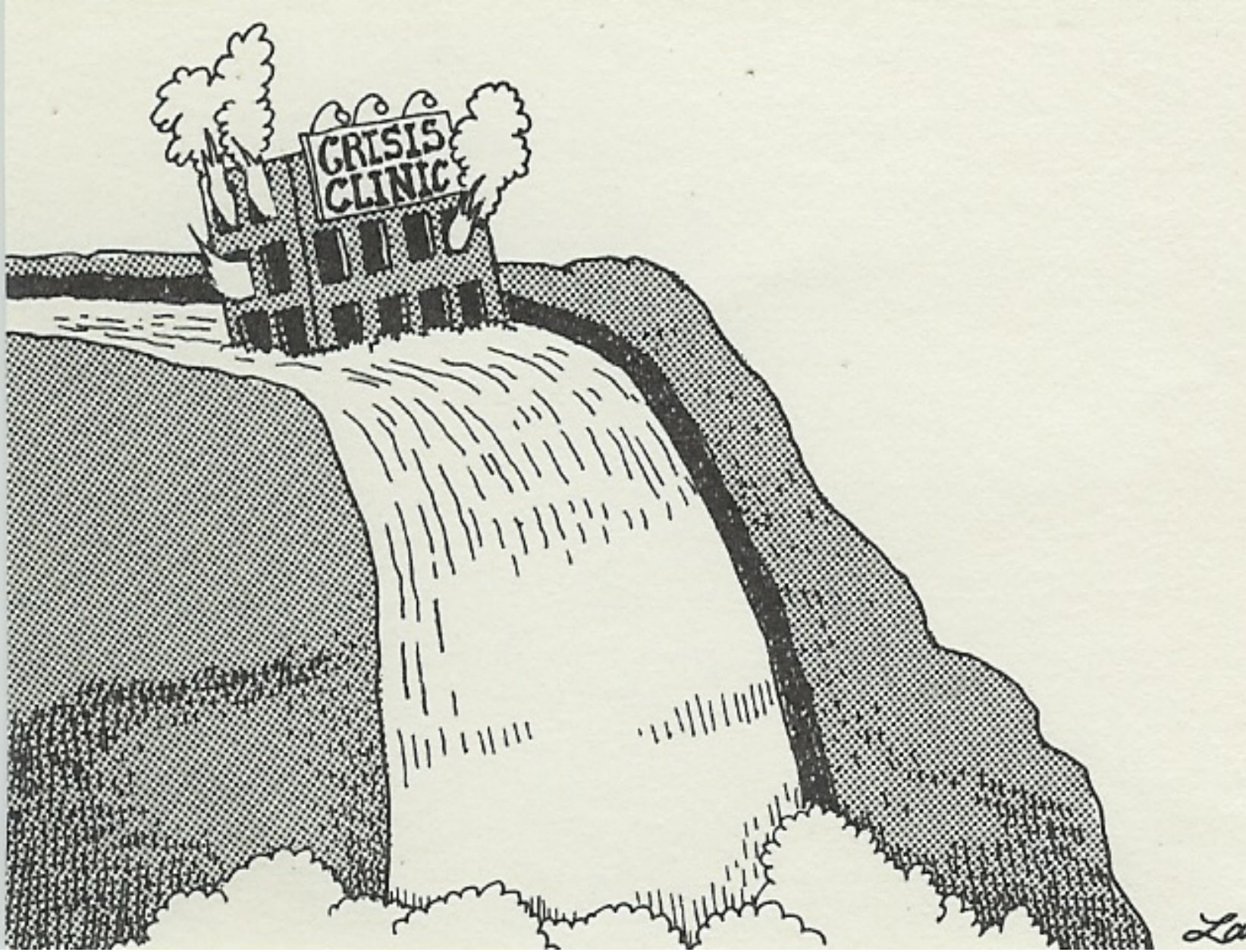
Only **one third** of adolescents with mental illness go on to **postsecondary education**.¹⁴



Early detection of mental health concerns leads to **improved academic achievement** and **reduced disruptions at school**.¹⁵

12-month Prevalence for Children (8 to 15 years)





Our Shared Vision



Florida will develop and sustain integrated, multi-tiered systems of support that promote the mental health of, and advance wellness and resilience of, students within family, educational and community settings.

Youth Mental Health

Negative Symptoms (Mental Illness)

Anxiety,
Depression, and
other forms of
internalizing
problems

Disruptive
Behaviors, such
as defiance, rule
violations,
substance use

Positive Indicators (Wellness or Well-Being)

Life Satisfaction
and Happiness

Strong Social
Relationships

Trauma
and
other
environ-
mental
stressors

Thinking
errors,
behavioral
withdrawal

Risky/
unsafe
settings

Inconsis-
tent rules
and
expecta-
tions
across
settings

Building
blocks of
well-being,
(gratitude,
empathy,
persistence)

Basic
needs
are
met

Social
skills

Healthy
interactions
(minimal
bullying,
high
support)

Risk Factors

Resilience Factors

Our Shared Definition of Mental Health



The presence of social, behavioral, and emotional well-being and resilience factors, as well as minimal social, behavioral, and emotional problems, and the reduction of risk factors.

BIG PICTURE Lessons Learned:

Do they know what they have committed to implementing?

Do they have an understanding of MTSS, ISF, Complete Mental Health?

It is a way of work

- Not a program/practice
- It will take time; 3-5 years
- We are initial implementers
- Identify target outcomes and share data ongoing as impact of work

We are initial implementers

- We are among the first to “do this” way of work
- Although it has essential components, it looks a bit different for each implementer because it is contextual



SECURING BUY-IN FROM KEY STAKEHOLDERS: ESTABLISHING “THE WHY”

Impact of School Mental Health on Student Outcomes



Growing body of literature demonstrates positive effects on students':

- Academic outcomes
- Social-emotional outcomes
- School-wide academic and behavioral outcomes

- Suldo, Gormley, DuPaul, & Anderson-Butcher, 2014

Theory: Academic Effects of Mental Health Interventions



What is Buy-In?



“Accepting an idea or a goal and making it part of your everyday frame of reference.”

Intellect +  = Change in Behavior

(Kautt, G. G., 2011)



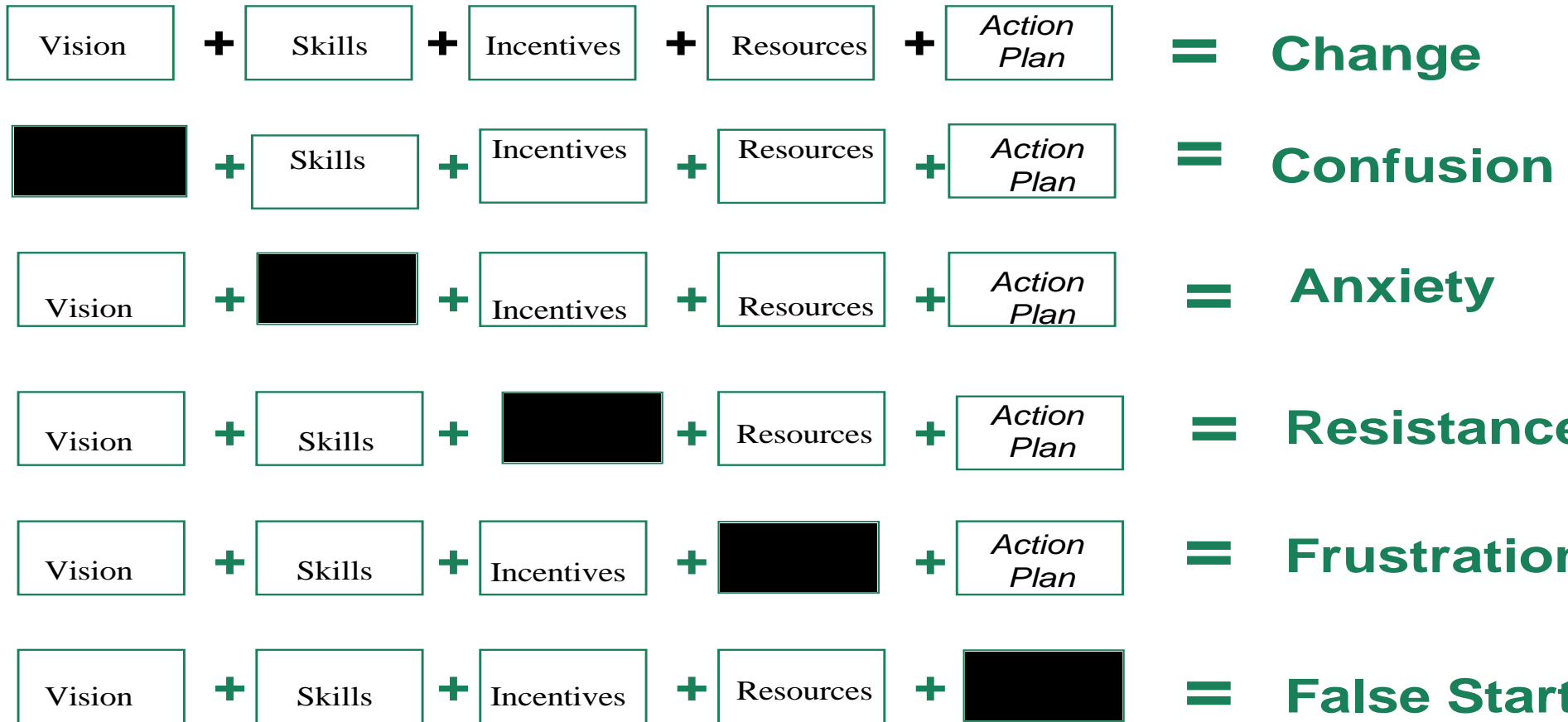
In your work.....

What behaviors demonstrate buy-in?

Who are key stakeholders?

Exploring Reasons for Lack of Buy-In

Managing Complex Change



Adapted from Knoster, T.



Initially Focused On Things Needed to Drive Work

- Building vision/mission
- Effective Teaming
- Building consensus/knowledge mental health supports
- Developing Meeting Structure

Then Focused on Building Practices for Complete MH

- Universal Screening
- Selection of EBP
- Using Data To Drive Decision Making

Lessons Learned: Be explicit w/teams

Are we REALLY committed to mental wellness promotion in our district/schools?

Why are we committed to it?

- **Share relevant data** on need (the why) in your context
- **Identify target outcomes** and share data ongoing as impact of work

What will it take to be committed?

- **Clearly identify early** and hold teams accountable
- **Establish partnerships** in teaming structures
- **Commit to selection of evidence-based practices, fidelity tracking**

Example: Defined Team Commitments

- **Coaching staff** to implement student curriculum focused on developing social, behavioral, and emotional skills.
- **Training staff** to create mental health friendly classrooms.
- **Collaborating** with community partners to help foster resilience and increasing protective factors.
- **Identifying negative indicators** with school based teams to help minimize risk factors for internalizing and externalizing problems.
- **Providing indirect support to youth in crisis** or with chronic mental health needs.

Example: Defined School Commitments



**Implement
SEL
Curriculum
with
fidelity**

**Completion
of
Universal
Screener**

**Use student
outcome &
fidelity data to
drive
evaluation of
MTSS for MH
across tiers.**

**Regular
monthly
PBIS/Leader
ship Team
Meetings.**

**Use Data
Based decision
making
through the 4
step problem
solving
process.**

**Time for PD
and coaching
in areas
identified by
team for
improvement**

If we don't establish buy In....



What
it
looked
like:

- Limited meeting time
- Lack of structure in meetings and support for systems continuous improvement
- Limited professional development time for supporting necessary practices
- Flexibility in practices (limited fidelity, universal assessment optional)



ESTABLISHING EFFECTIVE TEAMS

Which Team? Who's on It?



Review Current Teams:

- Team Responsibility
- Team Membership
- Team Meeting Frequency
- Team Outcomes/Productivity

Can a current team's responsibilities be expanded?

Can a current team be dissolved/merged?

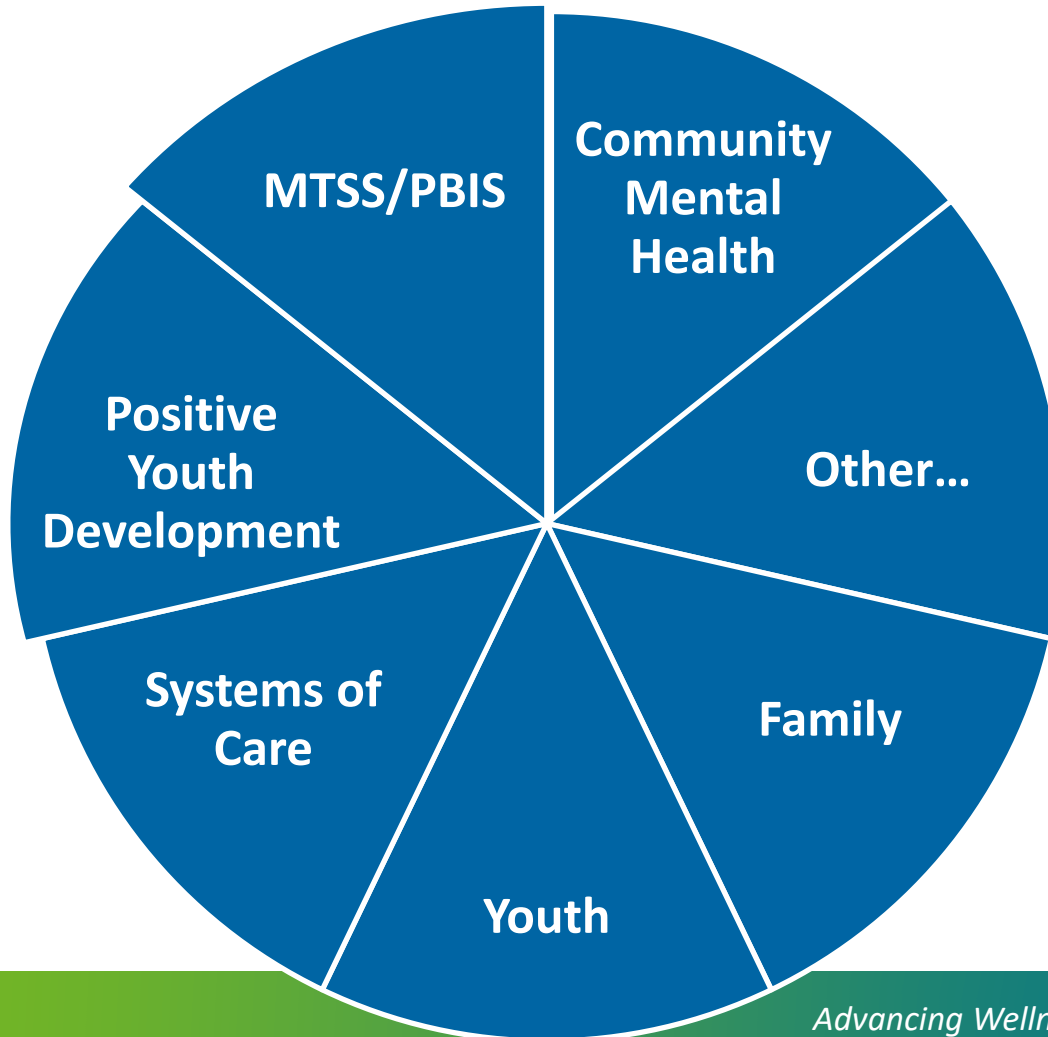
Ensuring Team Effectiveness...




Effective Team Structures Concerns:

- Team Composition and Membership
- Team Roles and Fluent Facilitator
- Team Mission
- Team Meeting Schedules
- Group Norms
- Defining Consensus

Coming Together to Achieve a Common Goal: Partnering and Teaming



Engaging partners/sharing info:

- 
- **Prioritizing meeting time**
 - Planning and follow-up
 - Maximize meeting time by using other venues for information sharing (e.g., meeting folder, workgroups, email list, etc.) and adhering to the agenda
 - Conduct ongoing evaluation and problem solving of the meeting itself
 - **Feedback, learning, and consensus reaching activities**
 - Technology (e.g., Plickers, Padlet)
 - Feedback forms
 - Group activities
 - Facilitated discussions using templates and advanced organizers
 - Ongoing evaluation
 - Professional development



Data-based Problem Solving Prerequisites



System to efficiently and effectively collect, record and graph data

Resources and expertise to review and analyze data

Monthly review and analysis of discipline and outcome data

Action Plan updates based on data review and analysis



PROFESSIONAL DEVELOPMENT AND COACHING

Focus on Professional Development

Initial Trainings Skill Building

- Second Step
- Mental Health Friendly Classroom
 - MH Awareness and TIC

Ongoing Coaching Support Job Embedded:

- Grade Level PLCs
- School Leadership Team Meetings
- Use of program fidelity tools to monitor implementation and target future PD

Explicit Instruction

Modeled Instruction

Guided Practice

Independent Practice with Feedback

What is Systems Coaching?

Systems Coaching (v.): application of a set of skills that builds the **capacity** of school/district leadership teams to implement MTSS aligned with the school/district improvement plan(s) in order to enhance student outcomes

What does this mean?

- Not necessarily a person, but a set of skills & activities coordinated by a leadership team
- *Leadership & Coaching* are BOTH required for sustainable change. A reciprocal relationship must exist between leadership & coaching to produce desired outcomes at any level of the educational organization.

Fact Sheet

Systems Coaching and Leadership

Introduction

A Multi-Tiered System of Supports (MTSS) is an evidence-based framework designed to educate ALL students in an efficient and effective manner. MTSS uses a data-based problem-solving process to develop, implement, and evaluate academic and behavior instruction and interventions tailored in varying intensities to meet individual student needs. This fact sheet is a collaboration with Florida's Problem Solving & Response to Intervention (PS/RI) Project and Florida's Positive Behavior Support (PBBS) Project, funded by the Florida Department of Education and the University of South Florida.

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Content vs. Systems Coaching

Systems coaching has emerged as an evidence-based practice. Content coaching focuses on mathematics, and data, the one-on-one (coach) classroom practices to improve individual or small group implemented reform efforts (March 8).

Systems coaching to develop the capacity of district implementation.

Systems coaching requires systems coaching to be content to sustain long-term outcomes. The District, the district and school strategic plans are one coaching at the school.

The Relationship Between Leadership and Systems Coaching

Leadership is a person (Lathwood, 2010). One (Lathwood) is used within the system. The

1. Vision, focus
2. Focus on each
3. Relationship
4. Expert provide
5. Investment in

Systems Coaching: A Model for Building Capacity

A Collaborative partnership between the Florida Problem Solving/Response to Intervention (PS/RI) Project, the Florida Positive Behavior Support, A Multi-Tiered Support System (FLPBS, MTSS) Project, and the Florida Departments of Education

Amanda L. March and Brian T. Gaunt

2013

Leadership + Coaching = Sustainable Change

Leadership Characteristics:

- Vision, focus, consistent message of implementation
- Focus on schools
- Relationships based on respect & shared responsibility
- Expert problem-solving
- Investment in Effective PD

Coaching Responsibilities

- Effective interpersonal communication
- Data-based problem-solving
- Content Knowledge
 - Organizational Change
 - Integrated multi-tiered system
 - ***Academic/Behavior/Social Emotional Instruction***
 - Families/Communities
- Team Facilitation
- Support leadership
- Provide PD
- Evaluate impacts

Lessons Learned: Need to Identify...



Coaching assets/champions to promote integration of Mental Wellness

How professional development will occur and utilize job embedded coaching?

Skills will teams need to promote integration within a MTSS

The current process in your district/school for selection of an Evidenced Based Practices

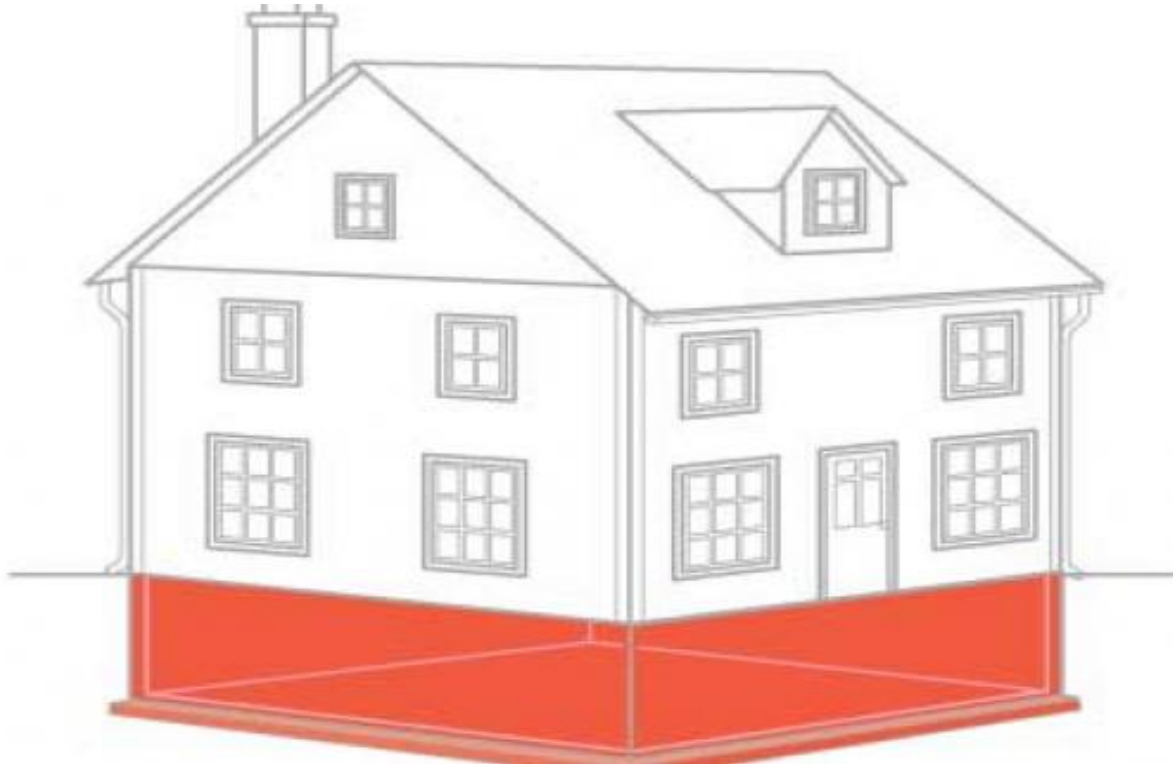
Pilot Schools with Best Outcomes

- Focused PD Efforts & Ongoing Leadership Team Meetings
- Data Access and Use is consistent focus
- Administrator buy in and support of team as leaders
- Connection to School Improvement
- Increased PBIS Fidelity is continued focus

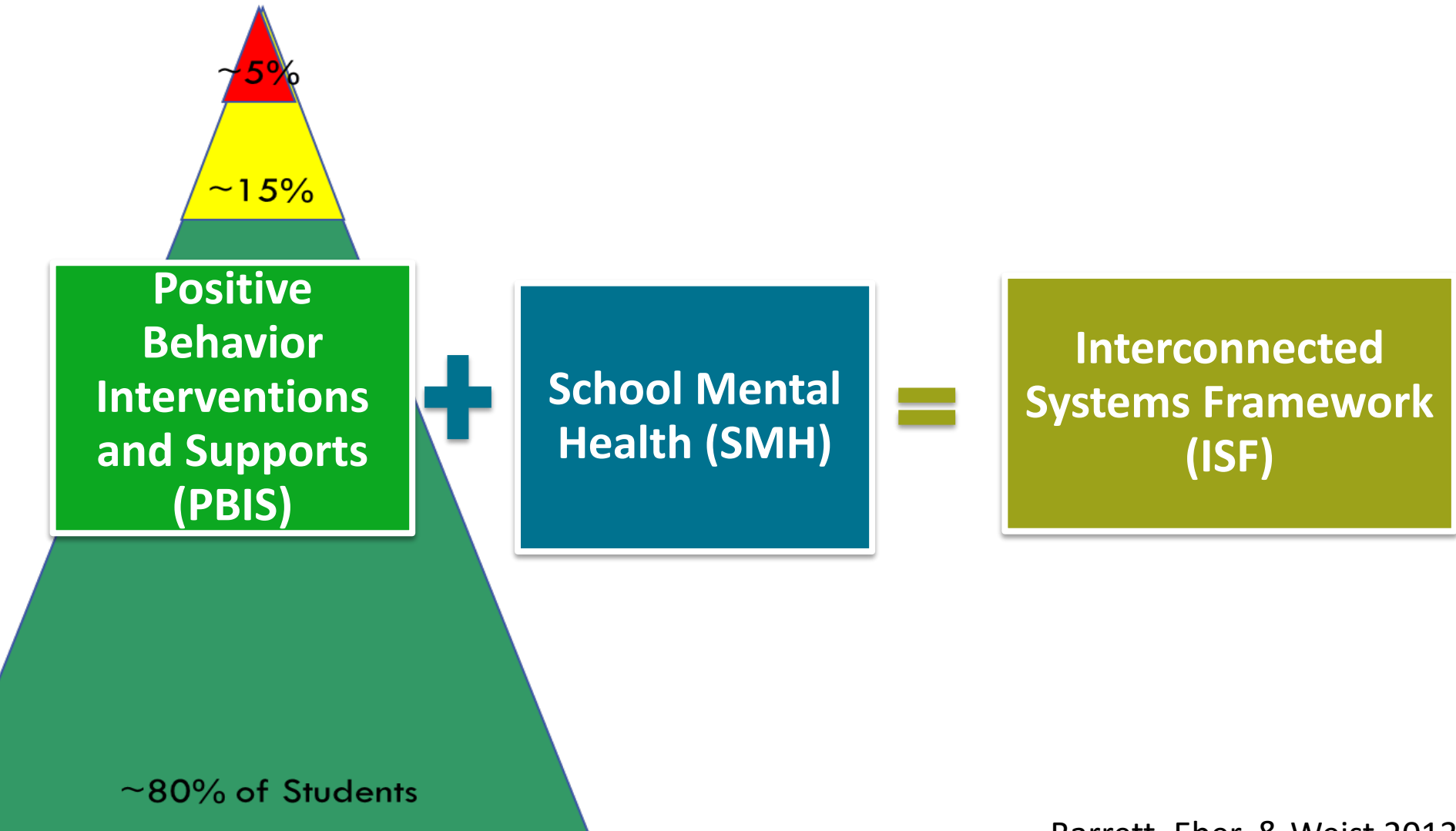
Pilot Schools with Limited Outcomes

- Reactive approach
- Leadership changes, lack of stakeholder buy in
- Lack of PD time for initial skill development
- Challenges with Data Access and use

EVALUATE THE CAPACITY OF YOUR CURRENT PBIS FRAMEWORK



Integrating PBIS and Mental Health



Evaluating Your Tier I System

Are we meeting ALL of our student needs?

Overall student population and needs of various subgroups (proportionality)

Is data used to initially identify Risk and Resilience Factors

Yes

How do we maintain implementation of successful practices as part of Tier I System

No

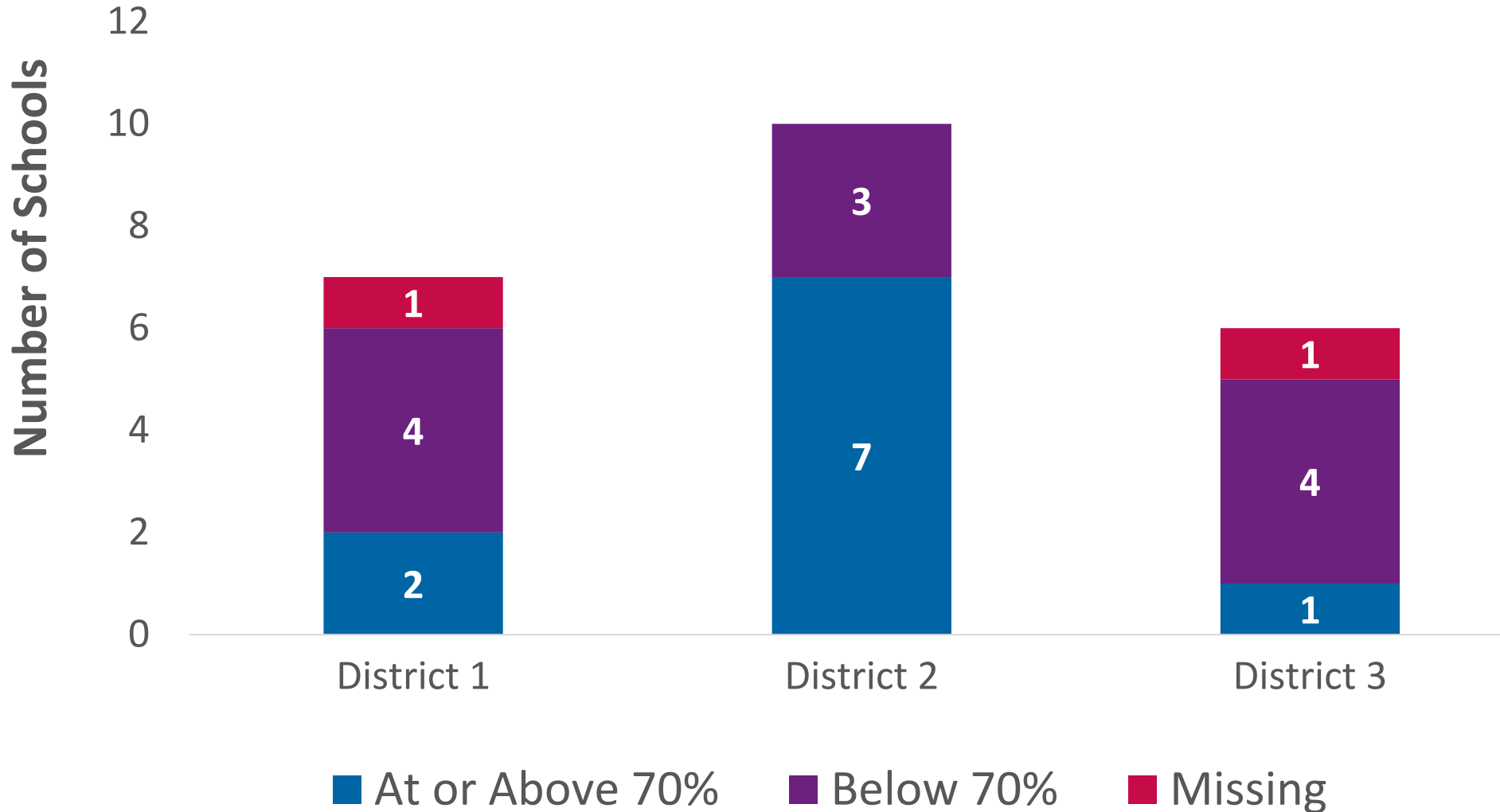
Is our PBIS Framework in place with fidelity?

If not, what supports are needed to increase fidelity?

If yes, what changes need to be made to Tier I System to further support mental wellness

Building on the Foundation of PBIS

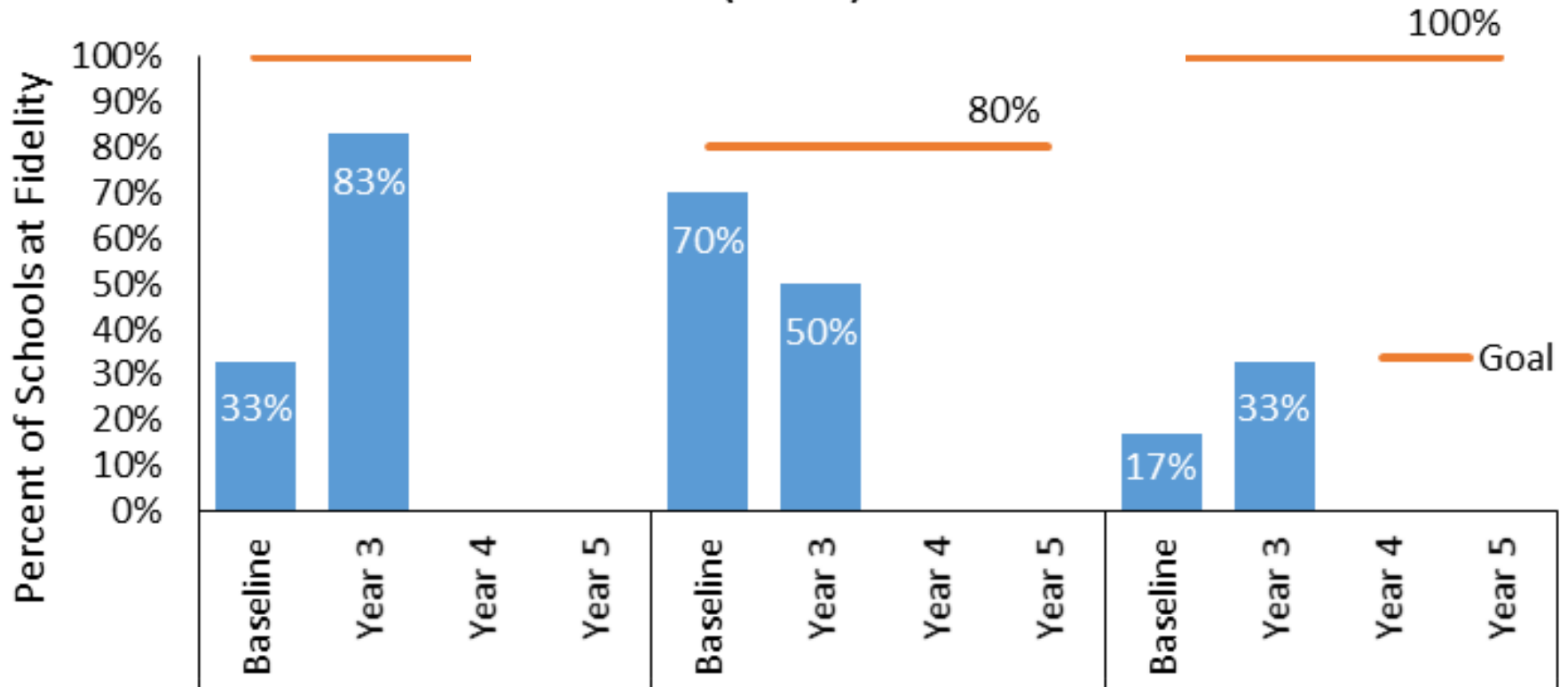
Pilot Schools Baseline Year BOQ



Baseline Fidelity Of Tier I PBIS components

Obj. - Increase the % of schools implementing with fidelity EB MH programs at the Tier 1 level.

Schools at Fidelity on the Benchmarks of Quality (BoQ)



To Integrate & Build on PBIS we Need:



Buy-in To Integrate Mental Health

Regular Meetings, Team Roles, Meeting Structure

Data-based Decision Making Skills

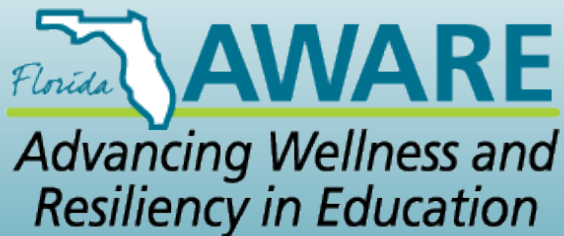
Consistent Tier I Practices-

- What we teach, how and when we teach it
- Reinforcement of what is taught
- Effective and consistent responses to problem behavior

Questions? Comments?

Please contact us!

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**We appreciate you joining
our session.**

