Integrating School Mental Health PBIS: Action Planning Companion Guide to the SWPBS Tiered Fidelity Inventory (TFI)

www.midwestpbis.org
www.midatlanticpbis.org
(under "Mental Health" Tab)

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- All the ISF Authors and participants

Content

- ISF Overview
  - History, Rationale, Definition, Core Features
- Drill Down: Key themes
  - Engaging stakeholders to work differently
  - Establishing a structure for integrated work
  - Creating a shared system
- School Level: ISF Action Planning Companion Guide
- District Level Workflow – getting started
- Application Examples and 'Practice" with Tools

Big Ideas

- Rationale/need for interconnected systems
- How PBIS can serve as a framework for an expanded continuum of school mental health interventions.
- How changing roles of clinicians, cross-training, and shared decision making can lead to an expanded system of behavioral health support.
- How tools can guide the development and implementation of an ISF.

Key Questions

- Can we expand the effectiveness of the school-based continuum if we include a broader group of school/community mental health providers?

- Can we enhance the continuum with a greater array of EBP's to meet the needs of more students with greater effectiveness ?

Assessing "Current Status" of Your District:

1. Just getting started with establishing a District Leadership Team?

2. Have a District Leadership Team and want to add Community Partners?

3. Already have a District and Community Leadership Team?

Assessing "Current Status" of your Schools:

1. Just getting started with installing PBIS?

2. Implementing PBIS, need to boost fidelity?

3. Implementing PBIS with fidelity, want to enhance with Mental Health Integration (ISF)?

HISTORY & RATIONALE

Partnerships are needed:

- One in 5 youth have a MH "condition"
- About 70% of those get no treatment
- School is "defacto" MH provider
- Juvenile Justice system is next level of system default
- Suicide is 4th leading cause of death among young adults
- Factors that impact mental health occur *'round the clock'*
- It is challenging for educators to address the factors beyond school
- It is challenging for community providers to address the factors in school

Confusion about what constitutes effective support?

- Exclusion (or placements) seen as "intervention"
- Not so great interventions
- Confuse label and team as " intervention"
- Confuse paperwork with intervention
- Not so great fidelity
- Not enough resources

PBIS is

Framework for enhancing adoption & implementation of

Continuum **of evidence-based interventions** to achieve

Academically **& behaviorally** important outcomes for

All students

SCHOOL-WIDE POSITIVE BEHAVIOR SUPPORT FRAMEWORK:

Tertiary Prevention: Specialized Individualized Systems for Students with High-Risk Behavior

Secondary Prevention: Specialized Group Systems for Students with At-Risk Behavior

Primary Prevention: School-/Classroom-Wide Systems for All Students, Staff, & Settings

~5%

~15%

~80% of Students

- **Students**
- **Staff**
- **Parents/Families**

Advantages

- Promotes effective decision making
- Improves climate & learning environment
- Changes adult behavior
- Reduces punitive approaches
- Reduces OSS and ODRs
- Improves student academic performance

Experimental Research on SWPBIS

Bradshaw, C.P., Koth, C. ... (2009). Altering school climate through school-wide Positive Behavioral Int... effectiveness trial. *Prevention Science, 10*(2), 100-1...

Bradshaw, C.P., Ko... ...Behavioral Intervention... ...*...terly, 23*(4), 462-...

Bradshaw, C. P., ...Intervention... elementar...

Bradshaw, C.P., ...Behavioral... trial. *Educ...*

Bradshaw, C., W... child behavior...

Horner, R., Sug... ...list controlle... *...of Positive...*

Horner, R. H., ... support. *Focus ...*

Ross, S. W., E... *Journa...*

Waasdorp, T., B... Supports on... *Pediatric Adolescent Medi...*

Bradshaw, C. P., Pas, E. T., Goldweber, A., Rosenberg, M.,... ...ehavioral Interventions and
        Supports with tier 2 coaching to student support teams: The PBISplus Model. Advances in School Mental Health Promotion, 5(3),
        177-193. doi:10.1080/1754730x.2012.707429

Freeman, J., Simonsen, B., McCoach D.B., Sugai, G., Lombardi, A., & Horner, (submitted) Implementation Effects of

SWPBIS Experimentally Related to:
1. Reduction in **problem behavior**
2. Increased **academic performance**
3. Increased **attendance**
4. Improved perception of **safety**
5. Reduction in **bullying behaviors**
6. Improved **organizational efficiency**
7. Reduction in **staff turnover**
8. Increased perception of **teacher efficacy**
9. Improved **Social Emotional competence**

PBIS Provides a Solid Foundation…. but More is Needed…

- Many schools implementing PBIS struggle to implement effective interventions at Tiers 2 and 3

- Youth with "internalizing" issues may go undetected

- PBIS systems (although showing success in social climate and discipline) often do not address broader community data and mental health prevention.

A Foundation…. but More is Needed…

- Many schools implementing PBIS struggle to implement effective interventions at Tiers 2 and 3

- Youth with "internalizing" issues may go undetected

- Not enough staff and resources

- PBIS systems (although showing success in social climate and discipline) often do not address broader community data and mental health prevention.

School Mental Health
School and Community Partners
Broader Range of EBP
Emphasis on Family System

"SMH provides a full continuum of mental health promotion programs and services in schools, including enhancing environments, broadly training and promoting social and emotional learning and life skills, preventing emotional and behavioral problems, identifying and intervening in these problems early on and providing intervention for established problems.

School mental health promotion programs should be available to all students, including those in general and special education, in diverse educational settings, and should reflect a shared agenda - with families and young people, school and community partners actively involved in building, continuously improving, and expanding them"

Need for Interconnected Systems: Challenges

Constraints on School-Employed Mental Health Staff

- Too few of them, with ratios for school psychology, counseling and social work far below recommendations of national organizations

- Status quo, narrowed functioning of positions (e.g., school psychology – evaluation, counseling – academic advising; social work – crisis management)

- Pressures related to "gatekeeping"

Need for Interconnected Systems: Challenges

Ad hoc and weak connections of community mental health providers to schools

- Need for community partners to be integrated into school teams;

- Need funding/support for partners to function at Tier 1 and 2, vs only "co-located" at Tier 3

- Need for systematic MOUs to clarify roles and functions of integrated teams/'work'

Development of ISF

- 2002-2007: Site Development with PBIS Expansion (informal and independent)
- 2005: CoP focus on integration of PBIS and SMH
- 2008: ISF White Paper: formal partnership between PBIS and SMH
- 2009- 2013 Monthly calls with implementation sites, national presentations (from sessions to strands)
- 2009-2011 Grant Submissions
- June 2012- September 2013 ISF Monograph
- Monograph Advisory group
- 2015: ISF Learning Community, SOC Webinar Series
- 2016: RCT Grant awarded
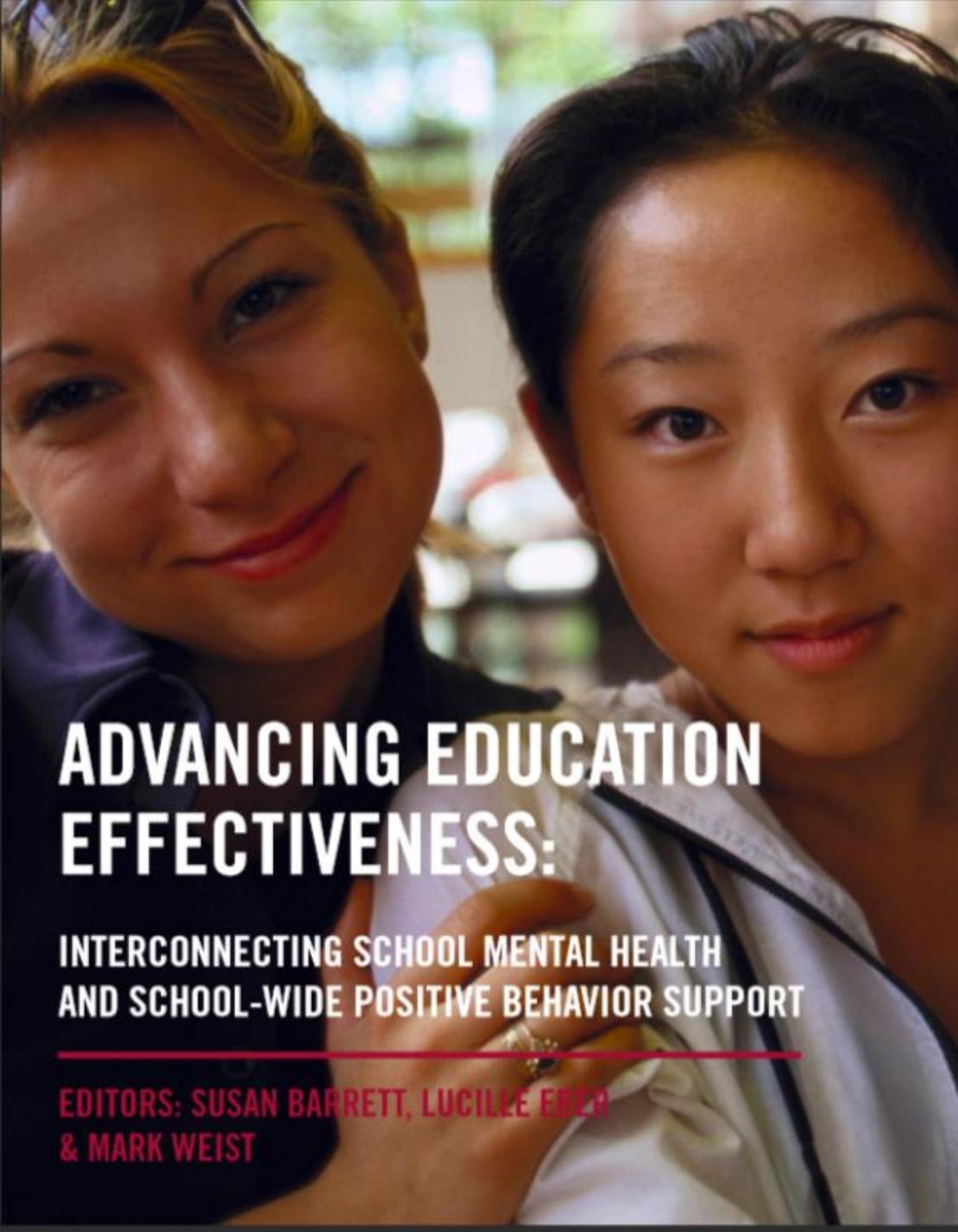
Advancing Education Effectiveness: Interconnecting School Mental Health and

School-Wide Positive Behavior Support

Editors: Susan Barrett, Lucille Eber and Mark Weist

pbis.org

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IDEA Partnership NASDSE

WHAT IS ISF?

DEFINITION
CORE FEATURES,
BIG MESSAGES

An Interconnected Systems Framework

- A <u>Structure</u> and <u>process</u> for education and mental health systems to interact in most effective and efficient way.

- guided by <u>key stakeholders</u> in education and mental health/community systems

- who have the <u>authority</u> to reallocate resources, change role and function of staff, and change policy.

ISF Defined

- <u>Structure</u> and <u>process</u> for education and mental health systems to interact in most effective and efficient way.

- Guided by <u>key stakeholders</u> in education and mental health/community systems

- Who have the <u>authority</u> to reallocate resources, change role and function of staff, and change policy.

ISF Defined

- Tiered prevention logic
- Cross system problem solving teams
- Use of data to decide which evidence based practices to implement.
- Progress monitoring for both fidelity and impact.
- Active involvement by youth, families, and other school and community stakeholders.

ISF Core Features

- **Effective teams** that include community mental health providers

- **Data**-based decision making

- Formal processes for the selection & implementation of **evidence-based practices** (EBP)

- **Early access** through use of comprehensive screening

- Rigorous **progress-monitoring** for both fidelity & effectiveness

- Ongoing **coaching** at both the systems & practices level

What Does it Mean to Integrate?

Change in routines and procedures?
(e.g. who needs to be available to participate in team meetings?)

Change in how interventions are selected and monitored?
(e.g. team review of data/research vs individual clinician choice?)

Change in language we use?
(e.g. identifying specific interventions vs generic terms such as "counseling" or "supports"?)

Changes in Roles/functions of staff?
(e.g. clinicians coordinating/overseeing some interventions that non-clinicians deliver?)

Common Pitfalls

- MH counselor "sees" student at appt.

- Clinicians only do "mental health"

- Case management notes

An Interconnected MTSS

- MH person on teams all tiers

- Contribute to integrated plan

- Contribute to fidelity & data

Why Integrate: PA Example

- Mental Health CSBBH Teams collect functional and behavioral outcomes to guide treatment

- Outcomes are collected from a variety of stakeholders including youth, family, and school partners

- Gathering and reporting outcomes can improve care and the activities are integrated into care

Comparison of Schools with MH/PBIS (ISF) and Schools with Only MH Teams in Schools

- Significant improvement over time for child and family functioning at all schools

- For PBIS schools, higher report of family functioning than non PBIS schools

- Therapeutic Alliance ratings were higher in the PBIS schools.

G. Elementary Major ODRs per 100 Students

Line chart: Major ODRs per 100 students

Year	Major ODRs per 100 students
2009-10	90.31
2010-11	44.88
2011-12	50.40
2012-13	44.57
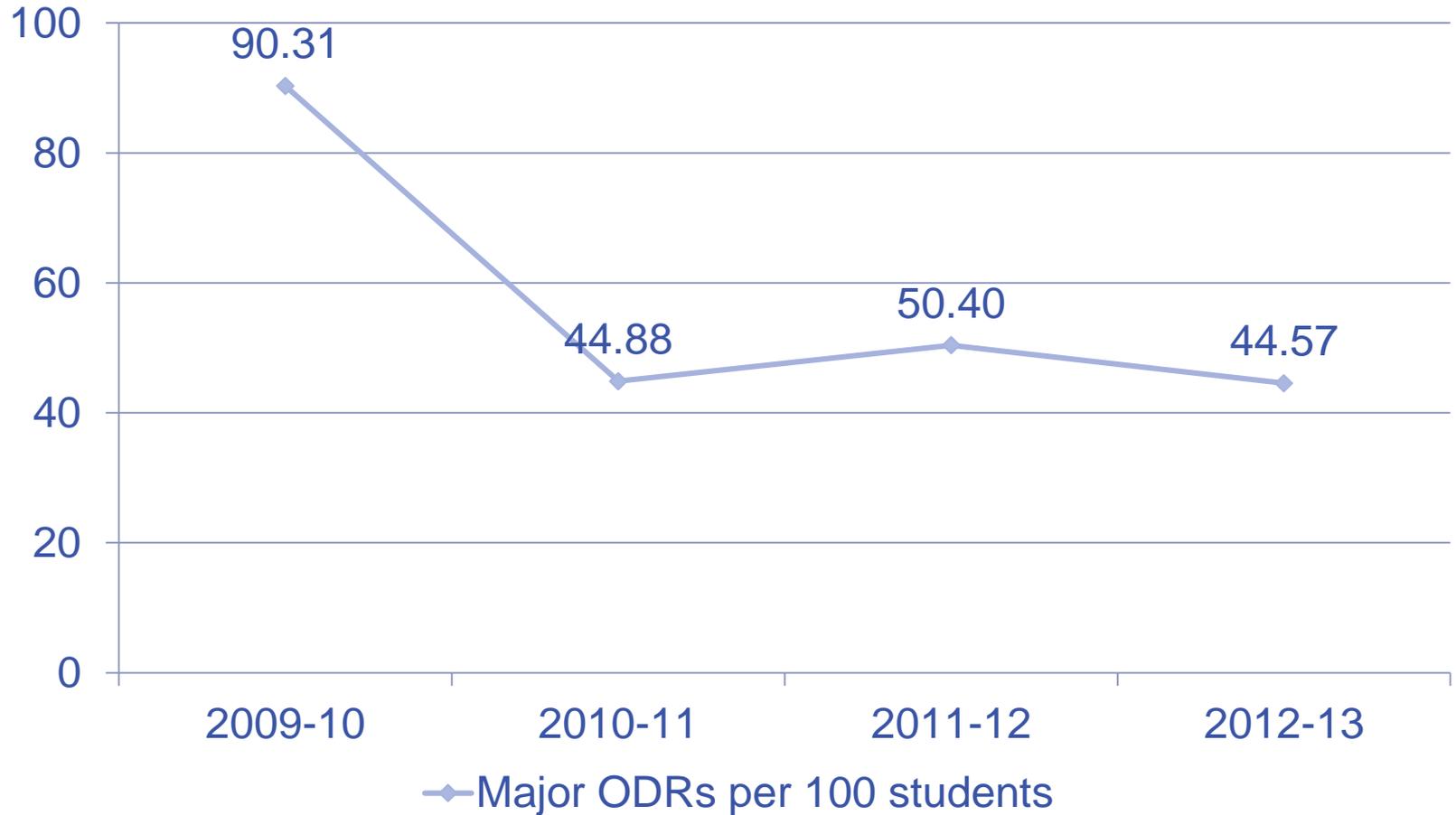
G. Elementary Students with 6+ ODRs
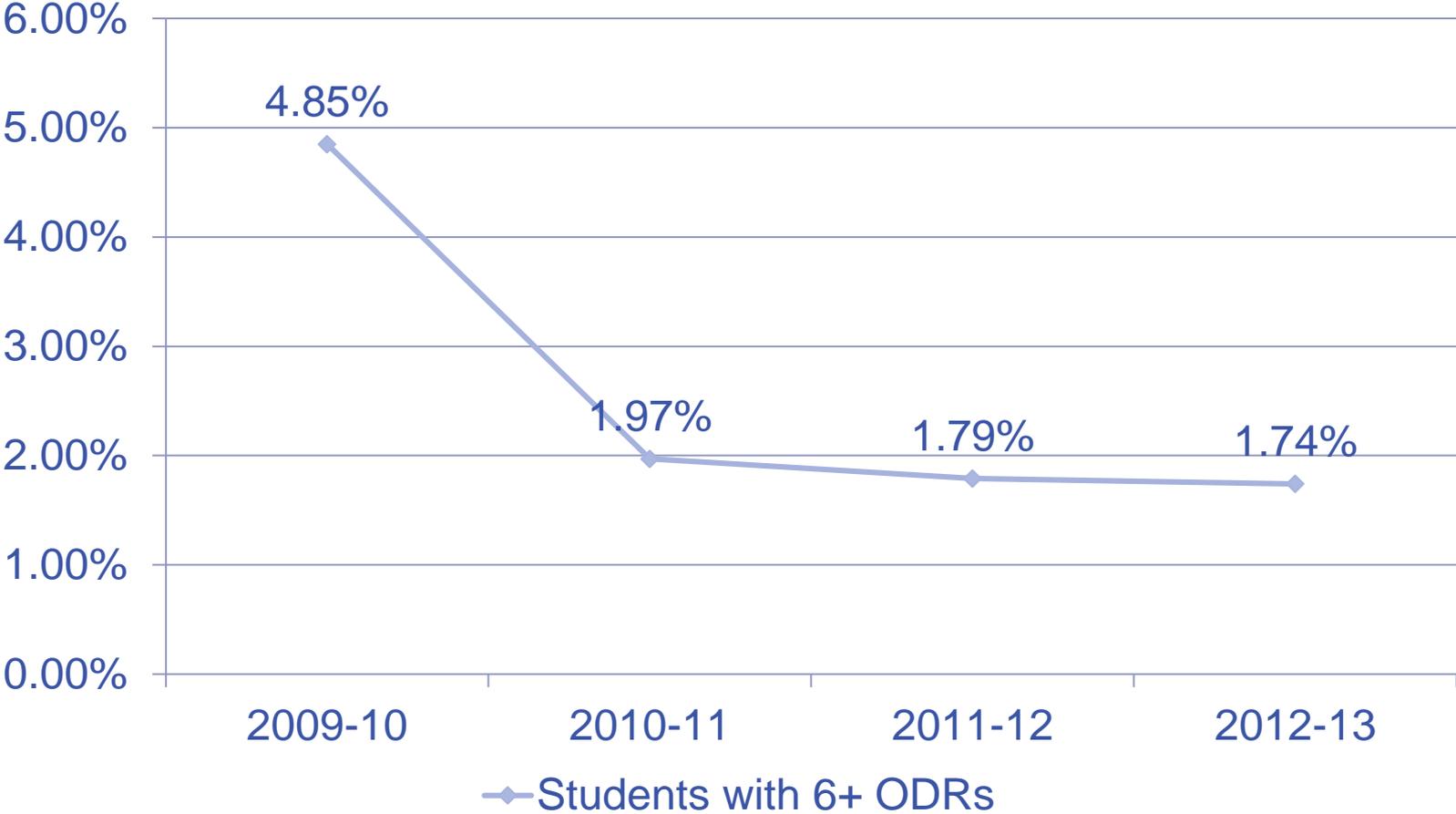
1. Single System of Delivery

- One committed and functional team with authority guides the work, using data at three tiers of intervention
- MH participates across ALL Tiers
- Evidence Based Practices/ Programs integrated at each tier
- Symmetry (of process) at District and Building level
  - District has a plan to integrate MH at all buildings
  - Plan is based on community and school data
- Plan to build "social emotional" capacity across staff
  - Training and Coaching in place for ALL staff (community and school employed)
  - Staff are competent and confident in identifying, intervening and/or referring

2. Access is NOT enough

All work is focused on ensuring positive outcomes for ALL children and youth and their families.

- Interventions matched to presenting problem using data, monitored for fidelity and outcome
- Teams and staff are explicit about types of interventions students and youth receive (e.g. from "student receives counseling" to "student receives 4 coping skills group sessions)
- Skills acquired during sessions are supported by ALL staff (e.g. staff are aware that student is working on developing coping skills and provides prompts, pre-corrects, acknowledges across school day)

Child Outcomes Survey (COS) Family Functioning (n= 285 youth 11 schools)
DATA linked to specific intervention

COS Family Functioning
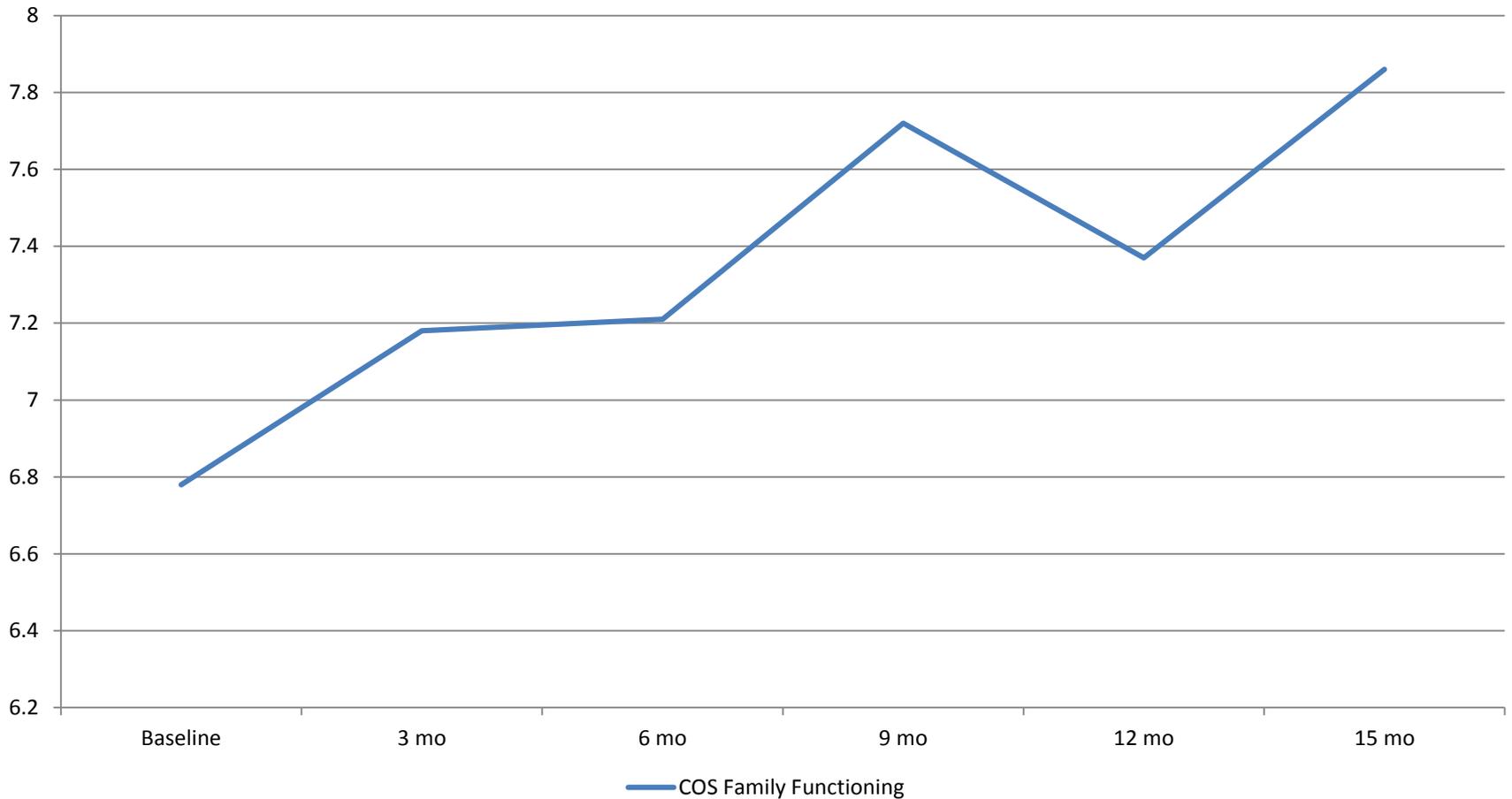
Child Outcomes Survey (COS) Child Functioning(n= 285 youth 11 schools):
DATA linked to specific intervention
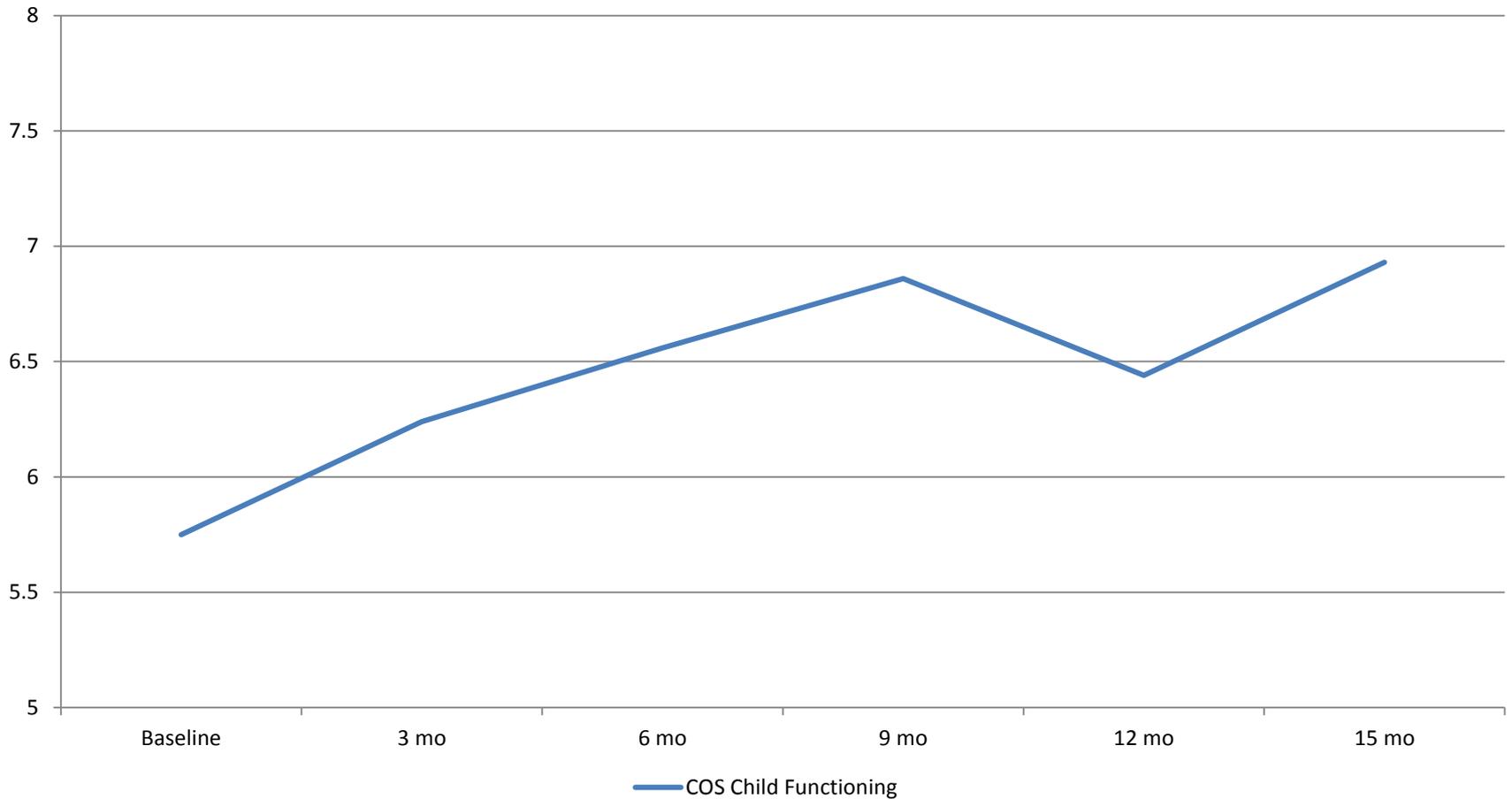
Measuring Fidelity:
ISF Implementation Inventory

- Tool designed and piloted to measure fidelity of ISF implementation in schools

- Benefits:
    - To assist school and community partners in their installation and implementation of ISF
    - To assess baseline and/or ongoing progress on critical features of ISF implementation
    - For action planning

3. Mental Health is for ALL

- Positive school climate and culture serves as protective factor. Social/emotional/behavioral health addressed with same level of attention and concern as is our children's academic and cognitive achievement.

- Social behavior skills taught and reinforced by ALL staff across ALL settings, and embedded in ALL curriculum

- Behavior examples used to explicitly teach what behaviors look like and sound like across school settings.

EBP =Teaching Skills
(same for social/emotional as for academics)

Define simply

Model/**demonstrate** w/ range of examples

Practice in range of natural settings

Monitor & provide positive feedback & **reinforcement**

Based on **data, adjust** instruction & reteach
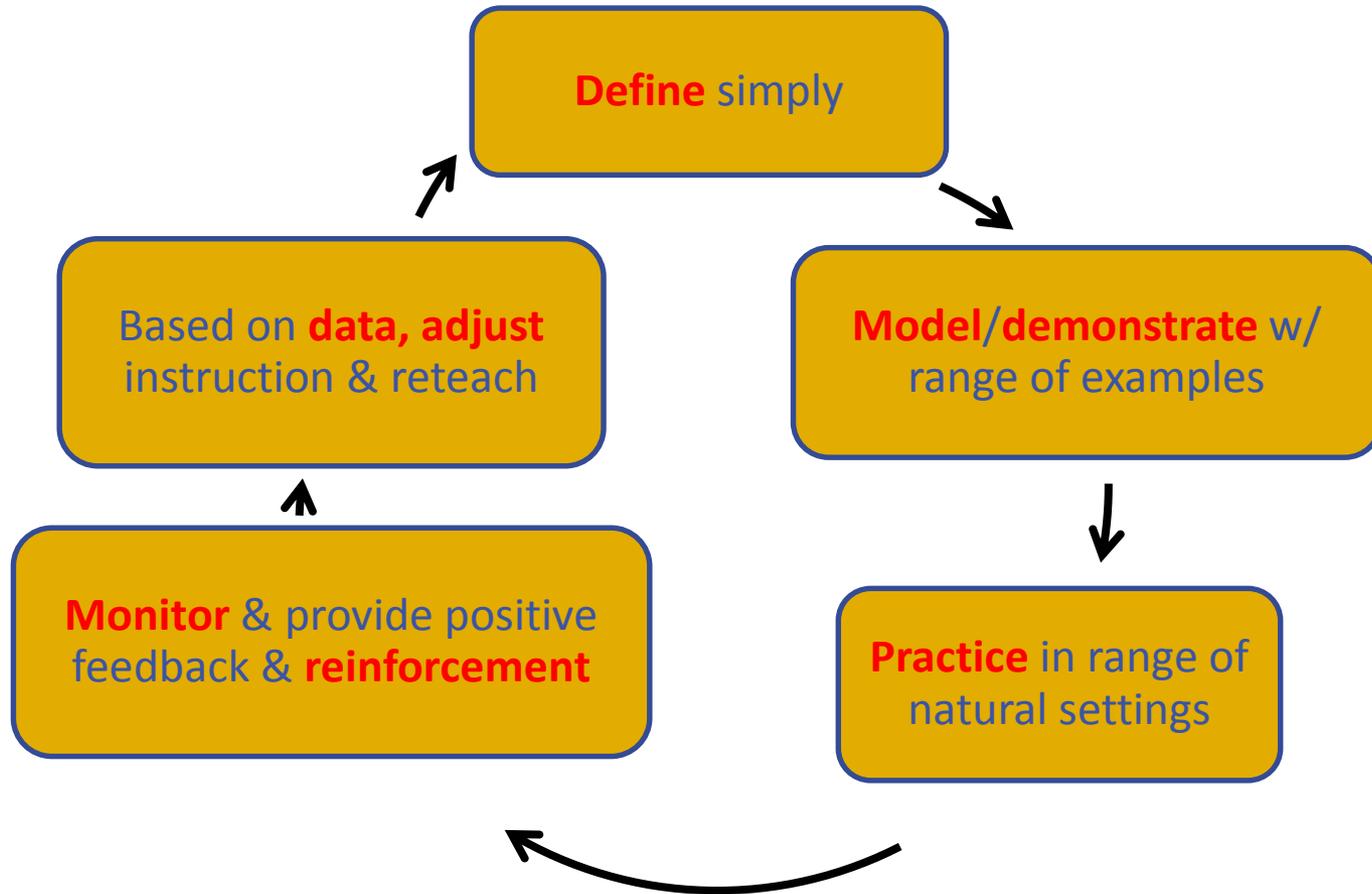
Where Do Specific "MH" Interventions Fit?

- That depends on the data of the school and community

  Examples of Expanded View of data:

  - Child welfare contacts,
  - Violence rates
  - Incarceration rates
  - Deployed families,
  - Homeless families,
  - Unemployment spikes

Multiple Evidence-Based Interventions of Varying Intensity

- Install foundational interventions School-wide
- Ensuring identification, monitoring, and selection process are in place
- Identifying additional interventions that might be needed such as:
  - Trauma Informed Interventions
  - Coping Cat
  - Check and Connect

4. Installed and aligned with core features of MTSS framework.

- Teams
- Data-based Decision- making
- Continuum of linked EBP's
- Screening
- Progress monitoring
- Ongoing PD/coaching

Are these features in place (or partially/in progress) in your district?

MTSS: Teams Representative of All Stakeholders

- Integrated teams representative of all stakeholders including families and students;
- Apply data-based decision making;
- Have a formal process for selecting and implementing evidence-based practices;
- Ensure early access through comprehensive screening;
- Progress monitor for both fidelity and effectiveness;
- Ensure coaching.

Family and community

Family and community

Community

Family and community

Universal Team

Plans SW & Class-wide supports

Secondary Systems Team

Uses Process data; determines overall intervention effectiveness

Problem Solving Team

Standing team with family; uses FBA/BIP process for one youth at a time

Tertiary Systems Team

Uses Process data; determines overall intervention effectiveness

Universal Support

CICO

SAIG

Group w. individual feature

Brief FBA/BIP

Brief FBA/ BIP

Complex FBA/BIP

WRAP RENEW

MTSS: Data-based Decision Making at Each Tier

- Fidelity and outcomes
- Adjust action plans based on data
- Blended data
- Outcome measures commensurate with complexity of presenting 'problem'

School Name: _____ **Total School Population as of October 1:** _____

Interventions	Check-in Check-out (CICO)		Social/Academic Instructional Groups		Individualized Check-In/Check-Out, Groups & Mentoring		Brief FBA/BIP (Functional Behavior Assessment/Behavior Intervention Planning)		Complex FBA/BIP		Person Centered Planning (Wraparound, RENEW, Family Focus)	
	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding
July												
August												
September												
October												
November												
December												
January												
February												
March												
April												
May												
June												

Data-based Decision-rules for defining "response to intervention": Please list below your data-based decision-rule/s to determine youth 'response' for each of the six levels of intervention. Ex. Students received 80% or better on Daily Progress Report for 4 consecutive weeks.

Responding to Check-in Check-out (CICO):

Responding to Social/Academic Instructional Groups:

Responding to Individualized CICO, Groups & Mentoring:

Responding to Brief FBA/BIP:

Responding to a Complex FBA/BIP:

Responding to Person Centered Planning:

USDOE-OSEP Tertiary Demo Project
#H326M0060010

Social/Academic Instructional Groups

Group 1 Name:		Group 2 Name:		Group 3 Name:		Group 4 Name:		Group 5 Name:		Total for Social/Academic Instructional Groups:	
# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding

Data-based Decision-rule/s for defining "response to intervention":

Responding to Group 1:

Responding to Group 2:

Responding to Group 3:

Responding to Group 4:

Responding to Group 5:

Individualized CICO, Group with Individualized Feature, & Mentoring

Type/Name 1:		Type/Name 2:		Type/Name 3:		Type/Name 4:		Type/Name 5:		Total for 3rd Type of Tier 2 Interventions	
# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding	# Students Participating	# Students Responding

Data-based Decision-rule/s for defining "response to intervention":

Responding to Type 1:

Responding to Type 2:

Responding to Type 3:

Responding to Type 4:

Responding to Type 5:

USDOE-OSEP Tertiary Demo Project

#H326M0060010

Tier 2/Tier 3 Tracking Tool

WISCONSIN
PBIS Network

IDEA CFDA 84.027

Instructions: Fill in the boxes that are shaded blue.

Total Enrollment:

Social/Academic Instructional Groups	# of Students Participating	# of Students Responding	Response Rate	Please list below
Name of Social/Academic Instructional Group			#DIV/0!	
Name of Social/Academic Instructional Group			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	
			#DIV/0!	

Tier 2 Interventions	# of Students Participating	# of Students Responding	Response Rate	Please list below your d Example: Students rece
Check-in Check-out			#DIV/0!	
Social/Academic Instructional Groups	0	0	#DIV/0!	Completed above.
Individualized Check-in Check-out, Groups & Mentoring			#DIV/0!	
Brief Function-based Interventions			#DIV/0!	

Tier 3 Interventions	# of Students Participating	# of Students Responding	Response Rate	Please list below your data Example: Students received
Complex/Multiple-life-domain FBA/BIP			#DIV/0!	
Wraparound Support			#DIV/0!	

September Response Rates

http://tinyurl.com/hzr9ufy
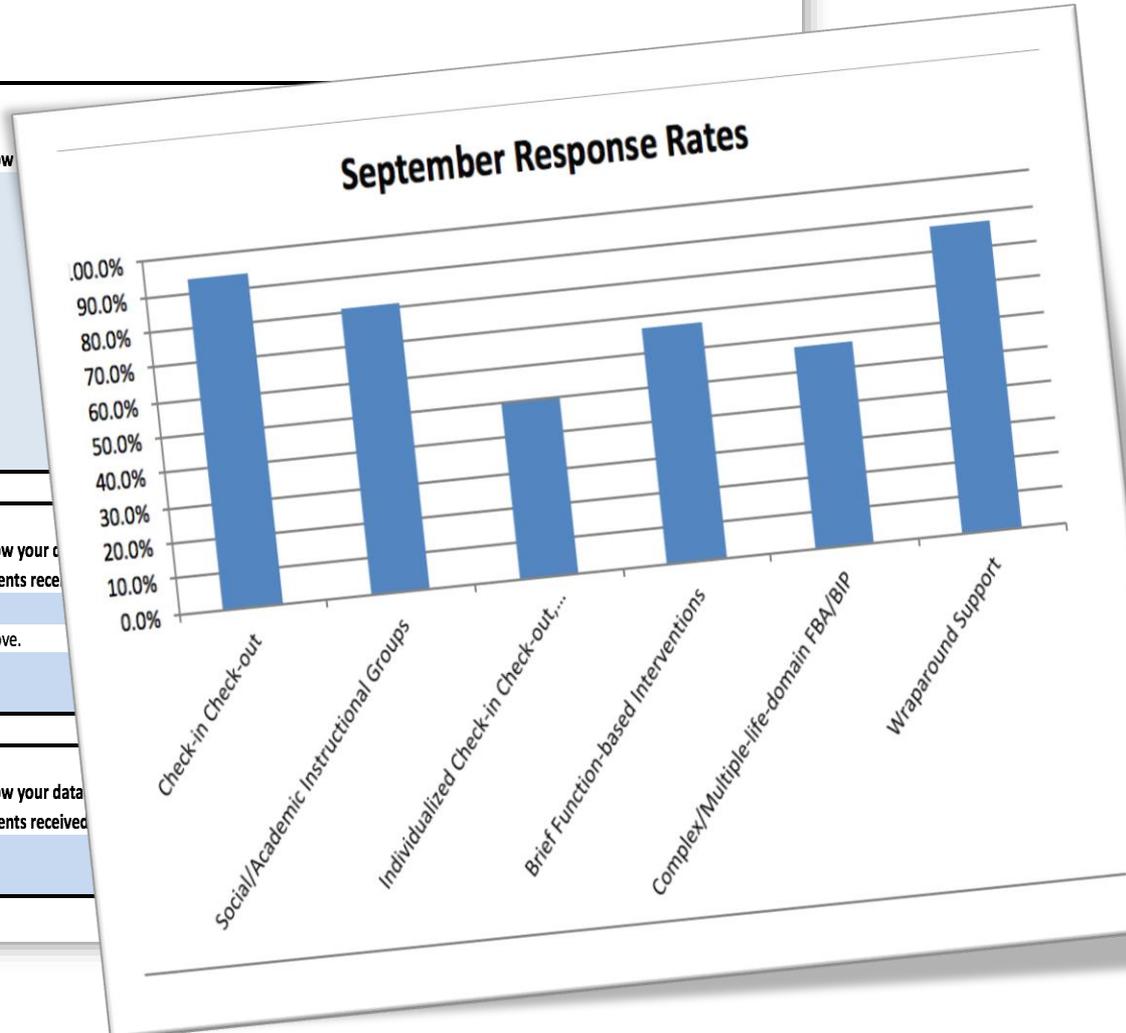
"New" Data Points to Consider?

Student Voice

"I feel connected to my school"

Pre-Test

- ■ Strongly Disagree
- ■ Disagree
- ■ Neither Agree nor Disagree
- ■ Agree
- ■ Strongly Agree
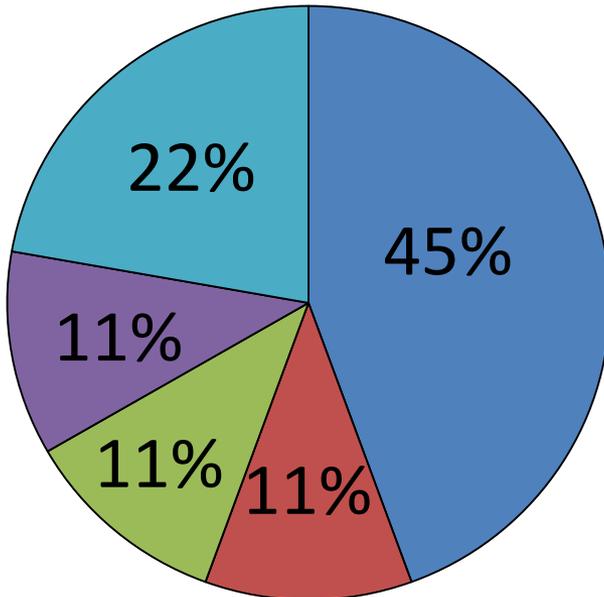
Post-Test

- ■ Strongly Disagree
- ■ Disagree
- ■ Neither Agree nor Disagree
- ■ Agree
- ■ Strongly Agree

Pre-Test: 45%, 22%, 11%, 11%, 11%

Post-Test: 45%, 33%, 22%
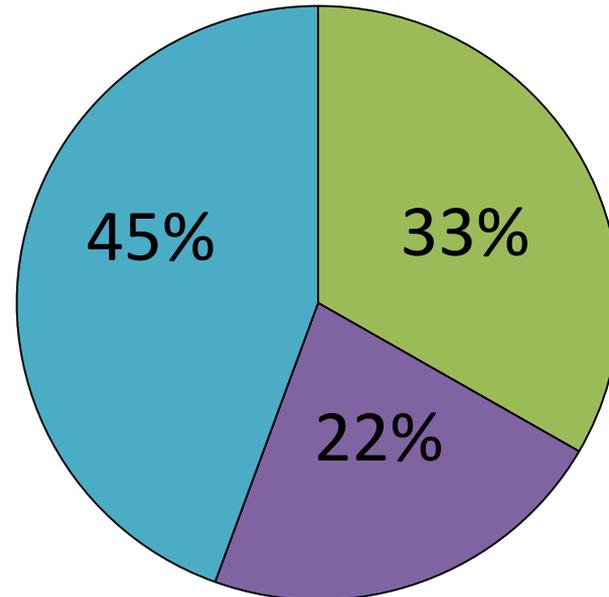
MTSS: A Continuum of Evidence-Based Practices (EBP's) linked across Tiers

- A formal process for selecting and implementing evidence-based practices
- Team process (not individual clinicians)
- Interventions linked across Tiers with dosage and specificity of interventions increasing from lower to higher tiers

Rundlett MS Pyramid of Interventions

Tier 3: Individualized Supports -Structured Interventions for the few students with the greatest need
- Complex Functional Behavioral Assessment (FBA) and Behavior Support
- 3 R (Respectful, Relevant, Realistic) Plan(s)
- Individualized Family and Youth-Driven Planning and Support
- Community Supports (WRAP, DCYF, Mental Health, and Child and Family Services)
- Enhanced Academic Seminar

A Few Students >5%

Tier 2: Behavioral Interventions & Supports- Supports for some students who struggle with meeting the expectations
- Simple Behavior Support Plans
- Simple Functional Behavioral Assessments (FBA)
- Targeted Counseling,
- Coping CAT
- Academic Seminar
- Check In/Check Out,
- Mentoring
- Recovery Room

Some Students >15%

Individualization and Intensity of Interventions Increases

Tier 1 Interventions & Supports- Structured Behavior Interventions for all students
- PRIDE Expectation Matrix,
- PRIDE Classroom Expectations & PRIDE Classroom Lessons
- Guidance Services,
- Homeroom Guidance
- Continuum of Discipline Responses
- Student/Parent Conferences,
- Before & After School Program (21C)
- Project Success (Substance Use)

ALL Students 100%

A CONTINUUM OF RESTORATIVE PRACTICES

A CONTINUUM OF SWPBIS PRACTICES

Intensive Intervention

Return from suspension
Administrative transfer or school crime diversion:
- Victim offender meetings
- Family/community group conferences
- Restitution

Early Intervention

Alternatives to suspension:
- Youth/peer court
- Peer mediation
- Conflict resolution training
- Restitution

Prevention & Skill Building

Peace-keeping circles for:
- Morning meetings
- Social/emotional instruction
- Staff meetings

Intensive Intervention

- Function-based support
- Wraparound support

Early Intervention

- Check-in/ Check-out
- Social Skills Curricula

Prevention & Skill Building

- Define and teach expectations
- Establish consequence system
- Collection and use of data

~5%

~15%

~80% of Students
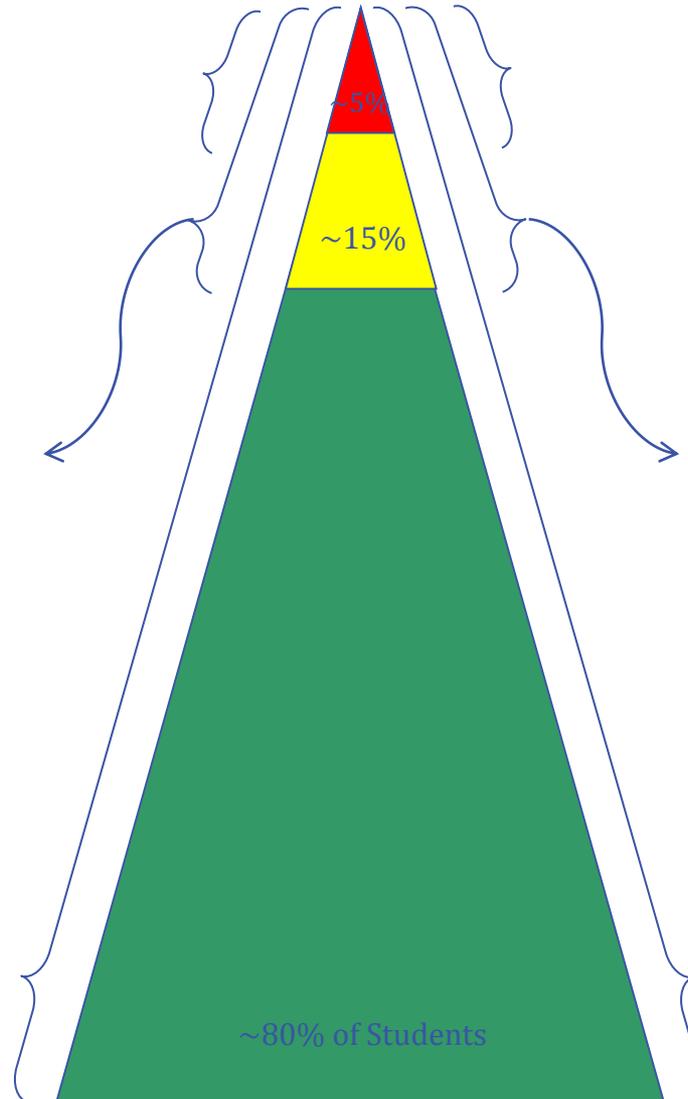
MTSS: Comprehensive Screening/Early Access

- Screening coordinated across all Tiers
- Screening results used by teams
- Screen for internalizing and externalizing issues

MTSS: Progress Monitoring

- Access is not enough…
- Fidelity
- Effectiveness
- Tools/process aligned with continuum
  - commensurate with complexity of need/Tier
  - Linked across Tiers (ensure fidelity as well as transference & generalization;)
- Linked to PD and Coaching

MTSS: Ongoing PD/Coaching

- Ensure fluency, fidelity, effectiveness
- Adaptable structure
- Ongoing refinement of implementation
- Sustainability

Elgin U-46 School District Example
53 school buildings

- Community partners are sitting on Tier 1 and Tier 2 teams as active team members
  - 20 Community Partners
    - i.e: Boys & Girls Club, Police Department, Hospice, Family Services, Girl Scouts, Community Crisis Center, YMCA, etc.
  - 57 providers trained in PBIS/Social Academic Instructional Groups
- Community partners regularly attend district PBIS trainings with school staff
- School district is partnering with local mental health agency to integrate restorative practices into the PBIS framework
- Community partners are facilitating interventions (i.e. social skills groups, mentoring, RENEW)
- (other ISF core features include : Universal Screening, progress monitoring student outcomes and intervention fidelity, and ongoing coaching at systems and practices levels)

Quick Reflection

- Similarities/Differences with Vision/Systems in your district?

- Does your District have a current district-level leadership team that has responsibility for overseeing/supporting MTSS in all schools?

- Are there community/family representatives on this team?

Assessing "Current Status" of Your District:

1. Just getting started with establishing a District Leadership Team?

2. Have a District Leadership Team and want to add Community Partners?

3. Already have a District and Community Leadership Team?

Assessing "Current Status" of your Schools:

1. Just getting started with installing PBIS?

2. Implementing PBIS, need to boost fidelity?

3. Implementing PBIS with fidelity, want to enhance with Mental Health Integration (ISF)?

Break!

MISSION

The mission of the U-46 School and Community Alliance is to create, integrate and leverage existing and new school/community partnerships that develop a full continuum of systematic interventions <u>based on data</u>. It encompasses three intervention tiers:

- Systems for promoting healthy development and preventing problems

- Systems for responding to problems as soon after onset as is feasible

- Systems for providing intensive care

How to Get Started and Keep Moving Forward

- Applying Implementation Science
- Engaging community partners
- Engaging families and youth
- Selecting EBP
- Using data to monitor fidelity and outcomes
- Increasing staff competence and confidence
- Communication with district level staff

Social Transformation and Wayfinders

- Ability to look at overall organization and see the way it shapes behavior and continually adjust

The term wayfinding itself is taken from an ancient wisdom tradition that enabled Micronesian master navigators to travel vast distances on the open ocean. Using finely-tuned observations of the stars, the sun, the clouds, the ocean swells, and other signs of nature for clues as to direction and location of a vessel at sea, these master navigators were voyaging with pinpoint accuracy for thousands of years before the invention of European navigational instruments. By continuously monitoring the environment they knew where they were, relative to where they had come from. Wayfinders were the navigators who held their vessels to be fixed points on a star compass - the art and science of wayfinding enshrined in their ability to visualize a destination until it became visible on the horizon. These mental constructs ensured they did not get lost.

Integrated Thinkers and Knowledge Management

- From student deficit to system deficit
- Whole Child Approach
- Equal Priority
- Learning Environment
- Differentiated Instruction, Behavior Science
- Brain Development
- Impact of trauma, ADHD, hunger
- Implicit Bias
- Healthy Workforce

Resource Mapping:
Applying the Three-Tiered Logic to Your School

Tier 3

Practices, Initiatives, Programs for a _FEW_

Tier 2

Practices, Initiatives, Programs for _SOME_

Tier 1

Practices, Initiatives, Programs for _ALL_
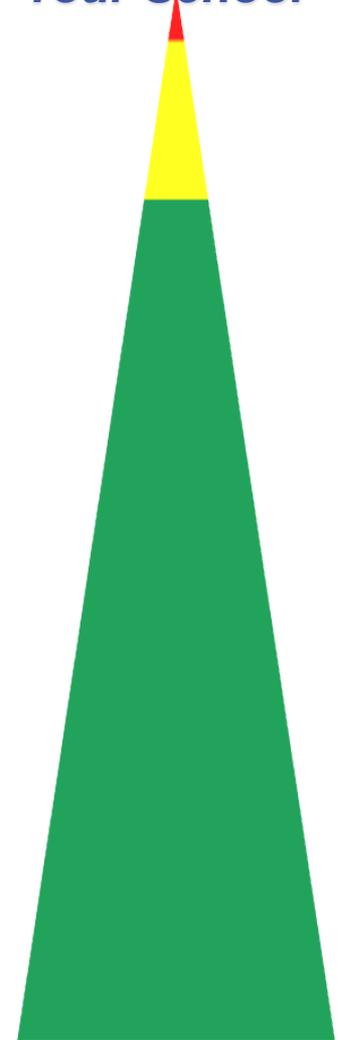
Systems attend to adult learning

Implementation with fidelity is best achieved when the **system** intentionally creates learning and support for **adults** who are using the **practices**.
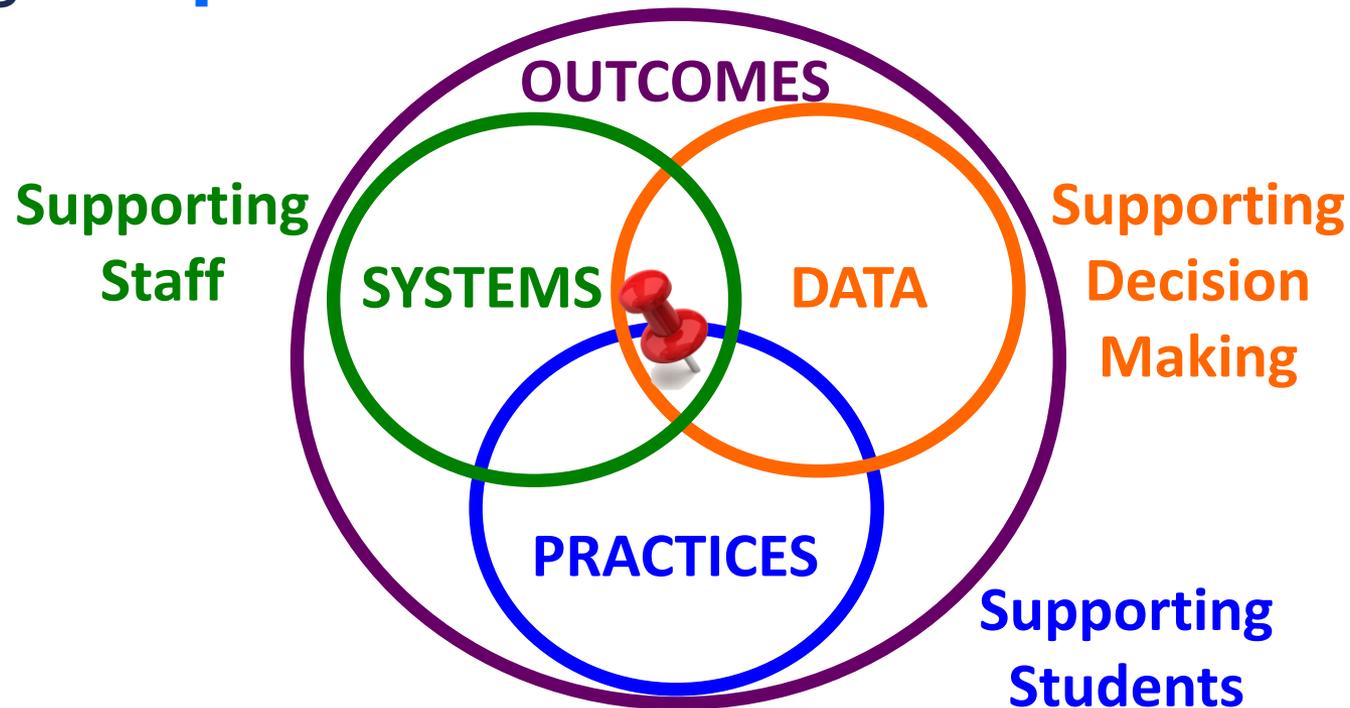
Implementation Science

- ISF Implementation is not a single event
- A mission-oriented process involving multiple decisions, actions, and corrections- *Continuous Improvement/Regeneration*
- Uses stages to make the process of change doable
- Anchored to tiered framework
- Always connected to strategic plan

The Need to Be Plan-ful:

Implementation occurs in stages:

- Exploration-Adoption
- Installation
- Initial Implementation
- Full Implementation
- Innovation
- Sustainability

2 – 4 Years

Fixsen, Naoom, Blase, Friedman, & Wallace, 2005
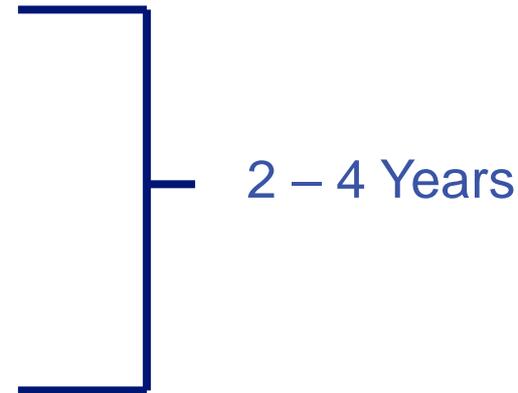
Establish a Structure for Integrated Work

- Establish a "way of work". Move away from "more is better".

- Utilize a formal process for selection and implementation (data/practices/systems)

- New emphasis on "sustainability" and "efficiency" have heightened attention on the need for effective systems of alignment.

  - (Greenwald, Poulos, & Horner, 2015)

New Roles to Consider:

Coordinator   vs.   ## Facilitator

Coordinator

- Organizes and/or oversees the specific interventions such as CICO, Skill groups

- Roles may include: scheduling meetings, reviewing & collecting data to share during team meetings, curriculum development, training, mentoring, etc…

Facilitator

- Directly provides intervention support services to youth/families

- Roles include: meeting with students for CICO, running groups, delivering mentoring support, etc.

Engaging Stakeholders to Work Differently

- Need buy-in from all participants
  - "What's In It For Me?"
- Need a mission statement and/or common goals to "rally" around
  - Helpful to look at community data in addition to school data (are there issues with substance abuse, gangs, violence, trauma, poverty, etc.)
- Need key decision makers at the table

Social Beings

- We thrive in environments that are safe, feel valued, have social connections and have the skills to be successful

- Mental Health = Skills to navigate life social skills across settings (home, work, school, neighborhood, community) across life span

Evidence Based= Skill acquisition across domains

Selection of EBP is a Formal Process and Routine

MTSS =Core Features or Way of Work

✓Stakeholder Based Leadership
✓Training and Coaching with performance feedback
✓Data to continuously monitor fidelity and impact
✓Early screening with increase and adaptive supports layered and connected

Practice   Practice   Practice

Adaptive to fit ALL
Large Urban Districts
Small Rural

TOOLS that may be useful…

Monograph: Appendices

District/Division Community Level:
❖ Team Implementation Planning Guide

School Level
❖ Survey on School Readiness for Interconnecting Positive Behavior Interventions & Supports & School Mental Health (Anello & Weist, 2013)

❖ ISF companion for TFI Action Planning

❖ Consumer Guide to Selecting Evidenced Based Mental Health Services within a SWPBS model
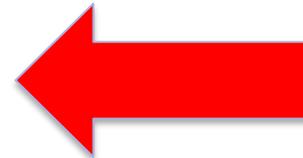
ISF Tools At A Glance

Name of Tool	Implementation Level	Description/Purpose	Authors/Citation	Considerations for Use
Survey on School Readiness for Interconnecting Positive Behavior Interventions and Supports and School Mental Health	School	The purpose of the survey is to evaluate readiness to interconnect PBIS and SMH; that is, delivering SMH services through the PBIS framework. Readiness includes perceptions of all those involved (teachers, students, administrators, family members, etc.), feasibility of implementing changes, and types of available resources.	Vittoria Anello and Mark Weist	**Who:** Teachers, Students, administrators, family members **When:** Exploration Phase: Prior to initial implementation **Access for Use:** ISF Monograph http://www.pbis.org/common/cms/files/Current%20Topics/Final-Monograph.pdf
Selecting Mental Health Interventions within a PBIS Approach	School	When a data indicates a need for a new initiative, this guide, checklist and case examples should be used to determine the best fit and will also guide teams to install systems features like data decision systems as well as training and coaching features that increase intervention fidelity and positive outcomes for children, youth and families.	Robert Putnam, Susan Barrett, Lucille Eber, Tim Lewis, and George Sugai	**Who:** School Community Team who include stakeholders who are responsible for selecting and installing new initiative **When:** Data determines need for new initiative **Access for Use:** ISF Monograph http://www.pbis.org/common/cms/files/Current%20Topics/Final-Monograph.pdf
Implementation Guide Topics: • Funding • Evaluation Tools • District Community	District/Community	This guide can is used when topics such as funding, evaluation and integrated teaming becomes a barrier to an integrated approach. The questions promote dialogue around current funding status	ISF Development Team (Barrett, Eber and Weist 2011)	**Who:** DCLT **When:** Exploration Phase **Access for Use:** ISF Monograph http://www.pbis.org/common/cms/files/Current%20Topics/Final-Monograph.pdf

Name of Tool	Implementation Level	Description/Purpose	Authors/Citation	Considerations for Use
Resource Mapping in Schools and School Districts: A Resource Guide	District/Community and School	Resource mapping offers a method to link regional, community, and school resources with an agreed upon vision, organizational goals, specific strategies for addressing problems, and expected outcomes so that youth and families have access to the full array of services that they need. As a result of resource mapping, community partners, school staff, families, and youth have more flexibility, autonomy, choice, and a better understanding of the resources and services that are available within a school and the larger community.	Lever, N., Castle, M., Cammack, N., Bohnenkamp, J., Stephan, S., Bernstein, L., Chang, P., Lee, P, & Sharma, R. (2014). *Resource Mapping in Schools and School Districts: A Resource Guide.* Baltimore, Maryland: Center for School Mental Health.	**Who: DCLT, SLT** **When:** Exploration Phase to identify and organize resources and services available within community and schools. **Access for Use:** https://csmh.umaryland.edu/Resources
ISF Action Planning Companion Guide to SWPBIS-TFI	School	Assist schools implementing PBIS and using the Tiered Fidelity Inventory to enhance current implementation to include ISF approach.	Barrett, Perales, & Eber, 2015	**Who**: Systems Planning Team **When**: Completed during annual action planning and reviewed quarterly to assess progress toward goals during PBIS/ISF Team meetings. **Access for Use**: Upon request to Targeted Workgroup Leaders
ISF Implementation Inventory	School	The ISF Implementation Inventory is intended to serve as an efficient and valid assessment of ISF implementation for the purposes of ongoing evaluation and action planning**.**	ISF National Leadership Team	**Who**: PBIS/ISF Systems Planning Team **When:** The ISF Implementation Inventory is first completed individual by members of the school leadership and/or PBIS/ISF teams and then reviewed aggregately at a team meeting for discussion and action planning **Access for Use**: Participate in validation study splett@coe.ufl.edu

Interconnected Systems Framework
Action Planning Companion Guide

SW-PBS Tiered Fidelity Inventory

Purpose of the School-wide PBIS Tiered Fidelity Inventory

- The purpose of the School-wide PBIS Tiered Fidelity Inventory is to provide an efficient and valid index of the extent to which PBIS core features are in place within a school.
  - Tier I (Universal PBIS)
    - Whole School Universal Prevention
  - Tier II (Targeted PBIS)
    - Secondary, Small Group Prevention
  - Tier III (Intensive PBIS)
    - Tertiary, Individual Support Prevention
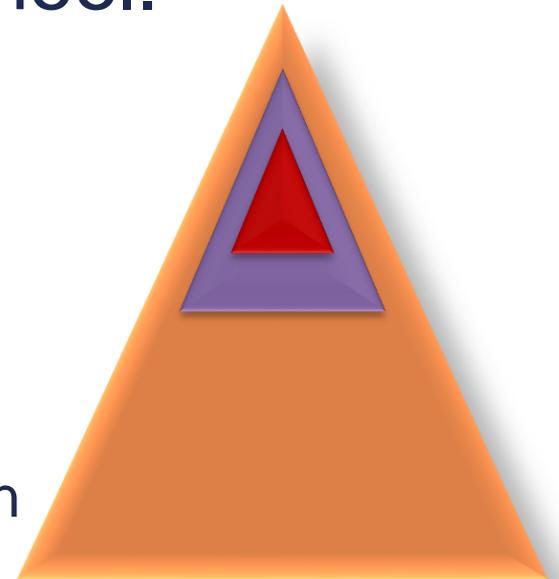
ISF Action Planning Companion Guide to SWPBIS TFI

- The purpose is to guide action planning for integration of Mental Health into PBIS

- Not for use in scoring the TFI
  - (at this point, the ISF enhancements do not impact PBIS fidelity measures; to measure ISF fidelity, consider piloting the ISF II)

Tier I

School-wide PBIS
Tiered Fidelity Inventory
with ISF Enhancements

1.1 Team Composition

Subscale	Tiered Fidelity Inventory: Tier I Features
Teams	**1.1 Team Composition**: Tier I team includes a Tier I systems coordinator, a school administrator, a family member, and individuals able to provide (a) applied behavioral expertise, (b) coaching expertise, (c) knowledge of student academic and behavior patterns, (d) knowledge about the operations of the school across grade levels and programs, and for high schools, (e) student representation.
	PBIS Big Idea: Effective PBIS teams are knowledgeable, representative of stakeholders, and have administrative authority. **ISF Big Idea:** Community Partners, including family representatives, can provide an expanded view/context of how the students' lives outside of school are to be considered and can enhance the Tier 1 Team's ability to promote healthy social emotional functioning for ALL students.
ISF Enhancement	*ISF leadership teams include community employed and school employed staff with mental health expertise. Teams also include families and students as active leaders.*
	Community partners' roles at Tier 1 are clearly defined through a memorandum of understanding (MOU).

1.1 Team Composition: SMHP Example

Cohort 2: SMHP Kickoff Day

1.2 Team Operating Procedures

Subscale	Tiered Fidelity Inventory: Tier I Features
Teams	**1.2 Team Operating Procedures:** Tier I team meets at least monthly and has (a) regular meeting format/agenda, (b) minutes, (c) defined meeting roles, and (d) a current action plan.
	PBIS Big Idea: Teams with defined roles, consistent procedures, and an ongoing action plan make effective and efficient decisions. **ISF Big Idea:** Community partners, including family/student representatives, with clearly defined roles can improve ongoing action plans for efficient and effective improvement of social/emotional health of all students.
ISF Enhancement	*Team review relevant community data, along with school data as they establish measureable goals that include mental health outcomes (climate data/ family and student surveys).*
	Teams address potential barriers (funding, policy, roles of personnel) and engage in problem solving such as review role and utilization of school and community employed clinicians (e.g time studies to determine how school and community staff time is funded, prioritized and assigned).

Vermont Joint House/Senate Resolution
(J.R.H 6) 2013

Whereas, following the mass shootings at the Sandy Hook Elementary School in Newtown, Connecticut, we, as a nation, have had time to reflect collectively on who we are and how best to respond to the slaughter of the innocents, and

Whereas, the General Assembly rejects the singular response of meeting force with force, and

Whereas, alternatively, the General Assembly embraces a Vermont

commitment that the mental, physical, and nutritional health of our students and their caregivers is addressed with the same level of attention and concern as is our students' academic and cognitive achievement, and

Whereas, Vermont schools must offer a learning environment that

encourages all students to attain mastery of academic content, to practice generosity, to experience belonging, and to realize independence in their daily lives, now therefore be it

Resolved by the Senate and House of Representatives:

That the tears of Sandy Hook and our nation will not fall on fallow ground but will give rise to a rededication to our goal of maintaining safe and healthy schools, and be it further

Resolved: **That the General Assembly declares Vermont to be a state in which equity, caring, and safety, both emotional and physical, are evident in all of our schools' practices.**

School Data → Community Data Student and System level

- Academic (Benchmark, GPA, Credit accrual etc)
- Discipline
- Attendance
- Climate/Perception
- Visits to Nurse, Social Worker, Counselor, etc
- Screening from one view

- Community Demographics
- Food Pantry Visits
- Protective and Risk Factors
- Calls to crisis centers, hospital visits
- Screening at multiple views

1.3 Behavioral Expectations

Subscale	Tiered Fidelity Inventory: Tier I Features
Implementation	**1.3 Behavioral Expectations**: School has five or fewer positively stated behavioral expectations and examples by setting/location for student and staff behaviors (e.g., school teaching matrix) defined and in place.
	PBIS Big Idea: School-wide expectations are a brief, memorable set of positively-stated expectations that create a school culture that is clear, positive, and consistent. **ISF Big Idea:** School-wide expectations foster skill building, positive relationships, and focus on teaching social and emotional competencies.
ISF Enhancements	*Families, students and community participate in development of the expectations*
	All elements of the social emotional curriculum including community enhancements are linked the behavioral expectations

What does our curriculum look like?

Teaching Matrix	SETTING						
	All Settings	Hallways	Playground	Cafeteria	Library/ Computer	Assembly	Bus
Expectations Respect Ourselves	prepared.	Walk.	Have a plan.	Eat all your food. Select healthy foods.	...n one ...co...	...n one	Watch for your stop.
Respect Others	Be kind. Hands/feet to self. Help/share with others.	Use normal voice volume. Walk to right.	Play safe. Include others. Share equipment.	Pra... good	Whisper. Return books.	Listen/watch... Use appropriate applause.	...et ...e. Sta... in your seat.
Respect Property	Recycle. Clean up after self.	...perly. Put litter in garbage can.		Replace tray & utensils. Clean up eating area.	Push in chairs. Treat books carefully.	Pick up. Treat chairs appropriately.	Wipe your feet. Sit appropriately.

1. Expectations

2. NATURAL CONTEXT (Locations)

3. Rules or Specific Behaviors

Specific Behaviors + Social-Emotional Skills

Expectation	Specific Behavior or Social Emotional Skill
Be Safe	Keep hands and feet to self
	I tell an adult when I am worried about a friend.
Be Respectful	Use the signal to ask a public or private question.
	Make sure everyone gets a turn.
Be Responsible	Turn in all work on time
	Check in with my feelings during the day

# Specific Behaviors + Pro-Social Skills

Specific Behaviors

- Throw paper in the waste can
- Use the right side of the stairway
- Bring all materials to class
- Keep hands, feet, and other objects to yourself

Pro-Social Skills

- Choose kindness over being right; pick up trash even if it isn't yours
- Encourage others; tell peer they did a good job

Teaching Matrix	INCORPORATE Coping Strategies for Managing Stress						
	All Settings	Halls	Playgrounds	Lunch	Library/ Computer	Assembly	Bus
Respect	Be on t... Ch...		Have a plan.	**Invite those sitting alone to join in**			Watch for your stop.
Achieving & **O**rganized	Be kind. Hands/feet to self. Help/share with others.	Use normal voice volume. Walk to right.	Share equipment. Include others.	**Have a lunch plan and choose quiet or social lunch area** **Invite friends to join me**	Whisper. Return books.	Listen/watch. Use appropriate applause.	voi... Stay in your seat.
Responsible	Recy...		...nt ...in garb... can.	**Use my breathing technique** **Listen to my signals**	Push in chairs. Treat books carefully.	Pick up. Treat chairs carefully.	Wipe your feet.

1. Expectations

2. NATURAL CONTEXT (Locations)

3. Rules or Specific Behaviors

Expectations

TEACHING MATRIX

C. Alton Lindsay Middle School
SCHOOL-WIDE BEHAVIOR EXPECTATIONS

	Arrival & Dismissal	Hallway	(Restroom)	Cafeteria	Classroom
S afety First	· **Walk** directly to my designated area · **Stay** in my area · **Talk** softly · **Keep** hands, feet, and belongings to myself	· **Wa**... des...	...eet, ...s to ...privacy	· **Enter and exit** with a pass or my teacher · **Throw away** my trash and tray · **Clean** up after myself	· **Listen** · **Follow** directions the first time given · **Ask** appropriately for help · **Clean** up after myself · **Follow** lab rules and procedures

W ork Together Respectfully	· **Respect** the space of others	· **Walk quietly** in a single, straight, and silent line so that others can continue learning and working
		· Walk to the right side of the hallway
			· **Conserve** supplies:
			  - 2 squirts of soap
			  - 2 pushes/turns on the paper towel dispenser
			  - Dispose of trash in the trash can
				· **Move away** from conflict or distractions
				· **Ask** for help when needed
				· **Be patient**
				· **Stay** in line
					· **Accept** feedback and discipline from staff by listening, asking questions, and following directions the first time.
					· **Be ready** to learn
					· **Be present** and **focused**
					· **Encourage** others

A ccept Responsibility	· **Keep** to your own business	· **Remain** quiet in **QUIET ZONES** · **Carry** my own belongings · **Keep** lockers locked · **Walk** directly to my designated area	· **Flush** · **Wash** my hands · **Use** appropriate fixtures · **Go**	· **Maintain** a clean space and conversation · **Keep** food on my tray or in my mouth	· **Attend** class daily and on time · **Clean** up after myself · **Be prepared** for instruction with all necessary materials

G uide Me	· Teachers will **supervise groups of students** at all times
	· Teachers will ensure that they **know the location of all students**
		· Teachers will **enforce safety**
		· Teachers will **monitor students by being at their doors and in the hallways**
			· Teachers will **stand by bathrooms** to monitor the noise and behavior from the hallway	· Teachers will **arrive on time and pick up students on time**
				· Teachers will walk students directly into the cafeteria
					· Teachers will **supervise groups of students** at all times
					· Teachers will **be prepared for class**
					  - Lesson plans posted
					  - Engaged and present
					  - Observable outcomes

G uide Me

Teaching Matrix

	INCORPORATE BULLY PREVENTION / INTERVENTION						
	All Settings	Halls	Playgrounds	If you see Disrespect	Library/Com...	Assembly	Bus
Respect	Be on t... Q... Have a plan.			**STOP:** Interrupt & model respect, rather than watch or join in	...compl...		Watch for your stop.
Achieving **&** **O**rganized	Be kind. Hands/feet to self. Help/share with others.	Use normal voice volume. Walk to right.	Share equipment. Include others. / Invite those who are alone to join in.	**WALK:** Invite people who are being disrepected to to join you and move away.	Whisper. Return books.	Listen/watch. Use appropriate applause.	...vo... Stay in... your seat.
Responsible	Recycle. C...	...in garb... can.	...nt	**Stop:** Interrupt, Say "that's not ok." **Walk:** Walk away Don't be an audience **Talk:** REPORT to an adult	Push in chairs. Treat books carefully.	Pick up. Treat chairs carefully.	Wipe your feet.

Expectations

1. Expectations

2. NATURAL CONTEXT (Locations)

3. Rules or Specific Behaviors

PBIS Matrix for Home

I am respectful
Listen to my parents
Be truthful to my parents
Play cooperatively
Speak nicely to others

I am responsible
Put away my toys, bike, and equipment
Help with jobs at home
Follow my parents' directions
Share Thursday folder with parents

I am safe
Play safely with others
Stay in designated areas
Stay away from strangers
Wear bike helmet and equipment

I am prepared
Finish homework and share with parent
Pack backpack at night for school the next day
Go to bed on time
Get up and get ready for school when called

	Getting up in the morning	Getting to school	Clean-up time	Time to relax	Homework time	Mealtime	Getting ready for bed
H HELP OUT							
O OWN YOUR BEHAVIOR							
M MANNERS COUNT							
E	**V**	**E**	**R**	**Y**	**D**	**A**	**Y**

How do we help our children and youth look at differences in school, home and community?

Elements of Culture	My values growing up	My values now	What my school values	How my students and families might be different	How this difference may create conflict
Appropriate personal space					
Appropriate voice level					
Appropriate dress					
Appropriate response to insults					

Culturally Responsive Adaptation: Personal Matrix

(Leverson, Smith, McIntosh, & Rose, in prep)

- Aka "behavior dictionary"

- Tool to assist in "code-switching"

- The tweak:
  - Take school expectations and…
    - Add differences at home
    - Add differences in community

- Use **after** tailoring expectations to students, families, and community

Expectation	At SCHOOL it looks like…	At HOME it looks like…	For MYSELF, this looks like…	In my NEIGHBORHOOD it looks like…
Be Safe	• **Keep hands and feet to self** • **Tell an adult if there is a problem**			
Be Respectful	• **Treat others how you want to be treated** • **Include others** • **Listen to adults**			
Be Responsible	• **Do my own work** • **Personal best** • **Follow directions** • **Clean up messes**			

Expectation	At SCHOOL it looks like…	At HOME it looks like…	In my NEIGHBORHOOD it looks like…
Be Safe	• Keep hands and feet to self • Tell an adult if there is a problem	• Protect your friends and family • Don't talk back	• Stick up for your friends • Don't back down • Look the other way
Be Respectful	• Treat others how you want to be treated • Include others • Listen to adults	• Do exactly what adults tell you to do • Don't stand out • Don't bring shame	• Text back within 30 seconds • Be nice to friends' parents • Share food
Be Responsible	• Do my own work • Personal best • Follow directions • Clean up messes	• Help your family out first • Own your mistakes • Share credit for successes	• Have each other's backs • Own your mistakes • Check in about what to do
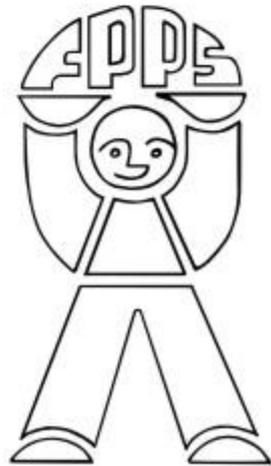
Sustaining PBIS Implementation Community-wide

- External Coach from the community setting

- Monthly Community-wide Leadership Team mtgs.

- Monthly Community-wide Coaches meetings

- Annual assessment of implementation

- Family/Community Forum/s

- On-going training (new summer staff at pool/park etc.)

- Picnic and other community events

1.4 Teaching Expectations

Subscale	Tiered Fidelity Inventory: Tier I Features
Implementation	**1.4 Teaching Expectations:** Expected academic and social behaviors are taught directly to all students in classrooms and across other campus settings/locations.
	PBIS Big Idea: Active and explicit teaching of school-wide expectations clarifies concepts for students and adults, allows for practice and performance feedback, and reduces misunderstandings regarding what is appropriate at school. **ISF Big Idea:** A review of both community and school data, supported by family input, leads to the selection of school-wide social emotional instruction that promotes overall wellness for all students.
ISF Enhancements	*Team uses community data and student and family perception data/focus groups to inform development of student expectations as well as staff expectations for the teaching matrix. Staff expectation should explicitly state how staff support ALL students develop social emotional skills*
	Social emotional instruction has an evidence base and is implemented with fidelity for all students

Instructional Process for Skill Acquisition

Academic Enablers

-Organizational Skills

-Study Skills

-Group Process

-Time Management

Social/Emotional

-Communication Skills

-Healthy Relationships

-Managing Stress

Academic Content

-Academic Standards

-Graduation Requirements
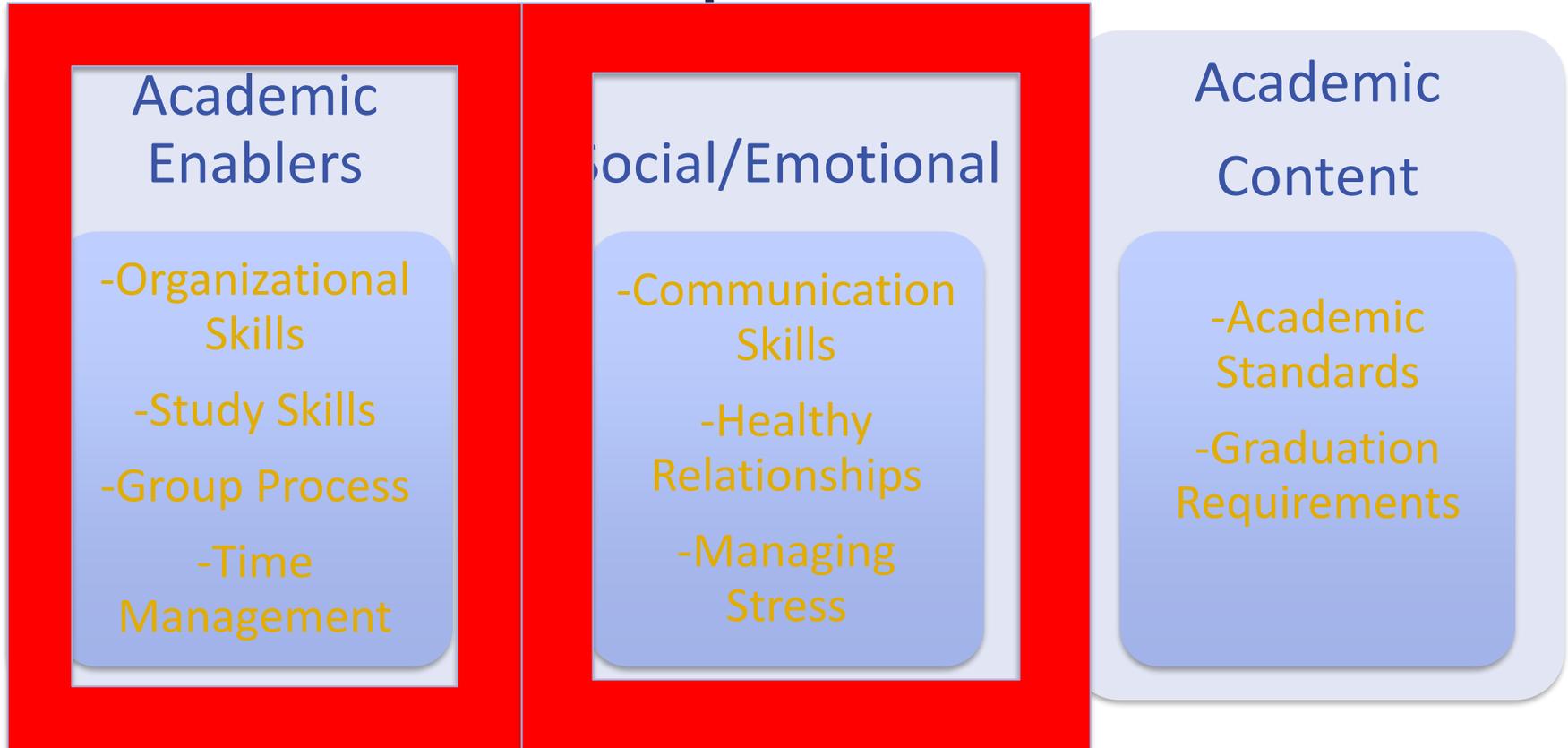
And…if we ask employers
"What are the skills you are looking for in a potential employee?"

So what are the skills required to succeed in college, career and life?

How? …An Instructional Process for Academics
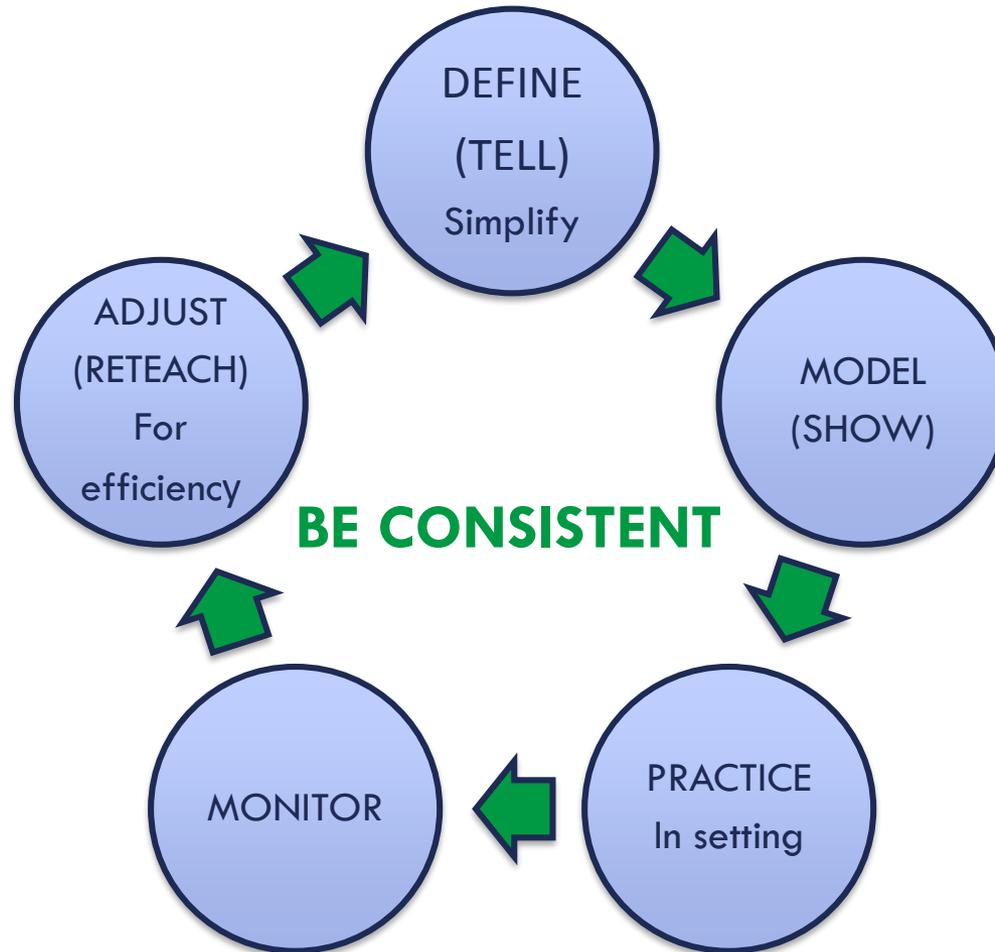
How?... The Same Process for Social Emotional Behavior

DEFINE (TELL) Simplify

MODEL (SHOW)

PRACTICE In setting

MONITOR

ADJUST (RETEACH) For efficiency

BE CONSISTENT
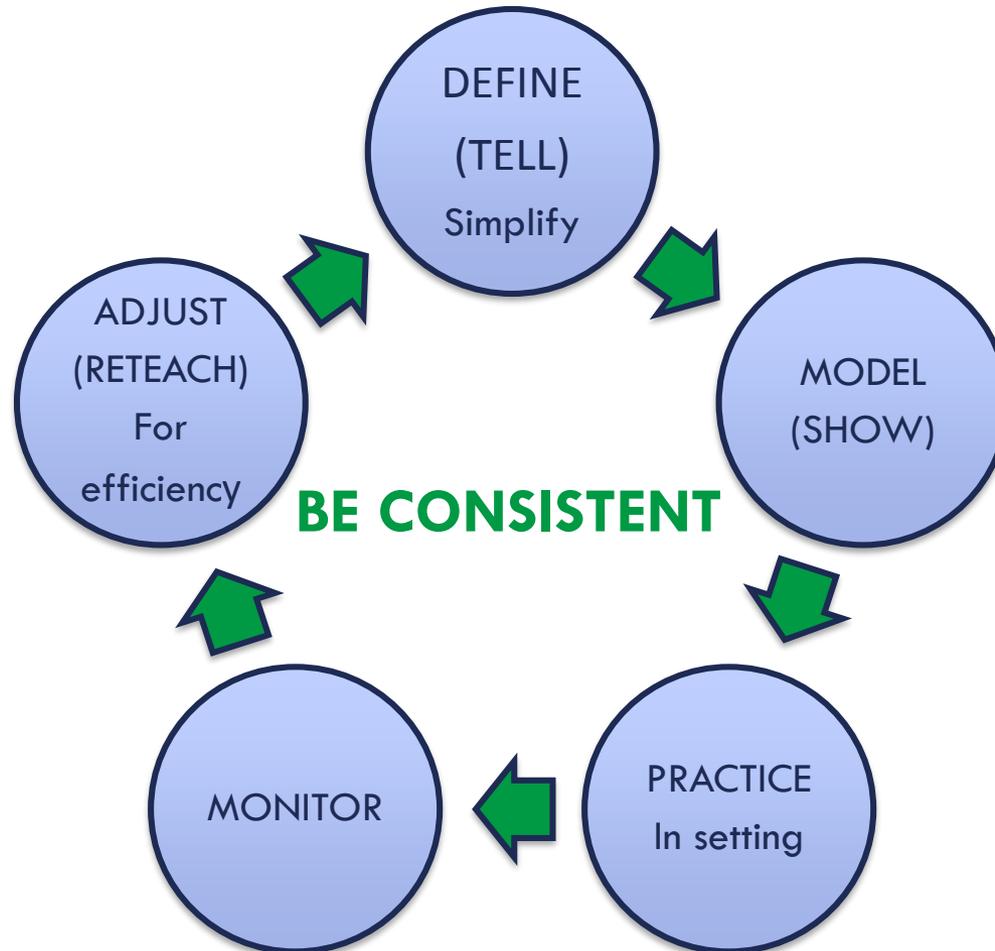
Where?... Teach in Context

…in the cafeteria

…in the restrooms

The Cafeteria: Creating a Positive Mealtime Experience

- Support staff considering the cafeteria as a place to embed services in the natural context
  - Teaching how to socialize in the cafeteria
  - Teaching healthy eating habits
- Team approach that involves admin, teachers, café supervisors, food service personnel, students and families

RETHINKING SCHOOL LUNCH

"To create an inviting dining ambience that encourages healthy interaction and healthy eating— a place that students enjoy, that makes the lunch period a time they look forward to, and that helps them feel safe and valued at mealtime."

(Center for Ecoliteracy, 2010)

How will we teach behavior?
When will we teach behavior?

Kick-off events
- Teaching staff, students and families the expectations and rules

On-going Direct Instruction
- Data-driven and scheduled designed lessons
- Pre-correction
- Re-teaching immediately after behavioral errors

Embedding into curriculum

Booster trainings
- Scheduled and data-driven

Continued visibility
- Visual Displays – posters, agenda covers
- Daily announcements
- Newsletters

McFarland Elementary Campus Presents

Disagreement diagram

Be Safe

Be Kind

Be Responsible

Teasing

What does it look like?

Intent is playful, not hurtful

Everyone is participating equally

Your child should

Ask them to stop if teasing becomes uncomfortable

Conflict

What does it look like?

Disagreement between two or more students.

Equal balance of power

Your child should

Work through problem solving steps. Ask an adult for help if needed.

Mean Moment

What does it look like?

Intent is to hurt someone's feelings

Single (rather than repeated) event

Balance of power could be equal

Your child should

Work through problem solving steps. Tell an adult

Bullying

What does it look like?

Intent is to hurt someone's feelings

Ongoing, rather than single

Unequal balance of power

Your child should

Tell an adult

1.5 Problem Behavior Definitions

Subscale	Tiered Fidelity Inventory: Tier I Features
Implementation	**1.5 Problem Behavior Definitions**: School has clear definitions for behaviors that interfere with academic and social success and a clear policy/procedure (e.g., flowchart) for addressing office-managed versus staff-managed problems.
	PBIS Big Idea: Explicit definitions of acceptable versus unacceptable behavior provides clarity to both students and staff and is a critical component of identifying clear procedures for staff to respond to inappropriate behavior objectively. **ISF Big Idea:** Community, family/student input to the definitions of acceptable vs unacceptable behaviors expands the view of behavioral definitions and increases likelihood of cultural relevancy and student engagement.
ISF Enhancements	*The school team develops a clearly documented and predictable system for managing disruptive behavior that represent community family/student values and culture.*
	Referral procedures include ways to track students leaving their instructional environment (e.g., visits to the nurse or school counselor) so the needs of youth with internalizing as well as externalizing challenges inform the behavior definition process.

Broaden Use of Data:
Focus on Internalizing Issues

Time Out of Class Form

Name: _____

Date: _____   Time: _____

Teacher: _____

Grade: K 1 2 3 4 5 6 7 8

Referring Staff: _____

Location

Playground   Library

Cafeteria   Bathroom

                   A   B   C

Hallway   Arrival/Dismissal

Classroom   Other _____

Others involved in incident: None   Peers   Staff   Teacher   Substitute

Minor Problem Behavior	Major Problem Behavior	Possible Motivation
Inappropriate language Physical contact Defiance Disruption Dress Code Property misuse Tardy Electronic Violation Other _____	Abusive language Fighting/ Physical aggression Defiance/Disrespect Harassment/Bullying Dress Code Inappropriate Display Electronic Violation Lying/ Cheating Skipping class Other _____	Obtain peer attention Obtain adult attention Obtain items/activity Avoid Peer(s) Avoid Adult Avoid task or activity Don't know Other _____ **Nurse** **School Counselor**

Administrative Decision/Time Out of Class= _____

Loss of privilege Time in office Conference with student Parent Contact	Individualized instruction In-school suspension (_____hours/ days) Out of school suspension (_____days) Other _____

What activity was the student engaged in when the event or complaint took place?

Whole group instruction	
Small group instruction	
Individual work	
Working with peers	
Alone	
1-on-1 instruction	
Interacting with peers	
Other: Please identify below	

1.10 Faculty Involvement

Subscale	Tiered Fidelity Inventory: Tier I Features
Implementation	**1.10 Faculty Involvement**: Faculty are shown school-wide data regularly and provide input on universal foundations (e.g., expectations, acknowledgements, definitions, consequences) at least every 12 months.
	PBIS Big Idea: Faculty voice is essential in establishing and maintaining staff commitment and consistency in implementation. **ISF Big Idea:** Student, family, and community voice is essential in establishing and maintaining commitment and consistency in implementation from all.
ISF Enhancements	*School employed and community employed staff receive professional development to understand and interpret data from one another's systems.*
	Community data (e.g., food pantry visits, calls to crisis centers, juvenile arrests) are included in the review of data provided to all faculty.
	Families and students also have an opportunity to review data and provide feedback.

Other Datasets
Using Census (income, family structure, population)

Positive Assets

- Parks & Playgrounds
- Hospitals
- Community Centers
- Recreation Centers
- Libraries
- Religious Buildings

Potential Risk Factors

- Alcohol Outlets
- Crime
- Vacant Housing
- Fast food outlets
- Lottery/Gambling Outlets

Belonging
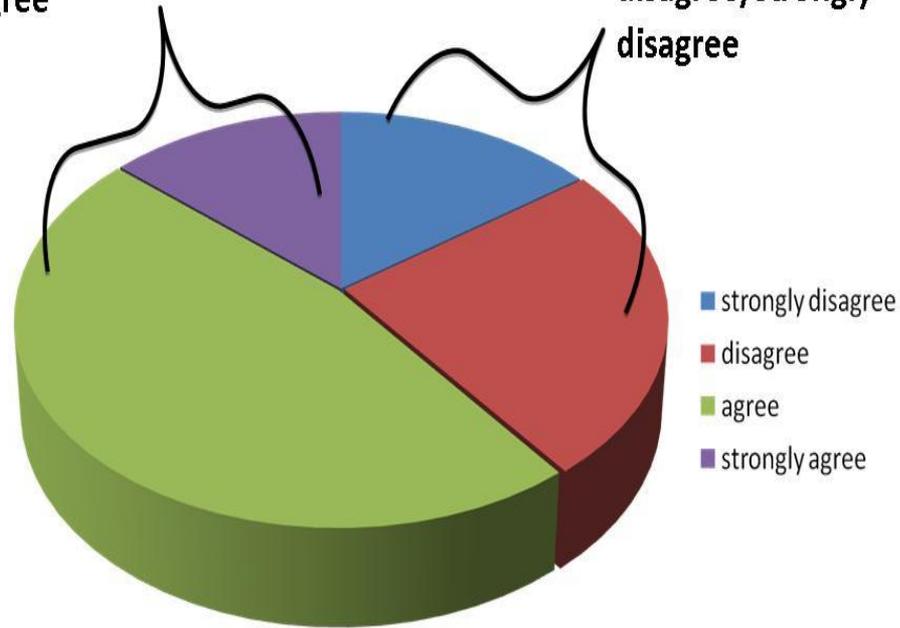
Relationships and Youth Connectedness

ESSENTIAL to children's well being.

- A sample of 2,022 students (999 boys and 1,023 girls) ages 12-14 years was measured at two time points twelve months apart on school connectedness and mental health symptoms (general functioning, depression, and anxiety symptoms). After adjusting for any prior conditions that could have led to mental health problems, the authors of the study reported stronger than previous evidence of the association with school connectedness and adolescent depressive symptoms and a predictive link between school connectedness to future mental health problems.

- 22 Early studies suggest that there are substantial percentages of violent youth who do not perceive themselves to be liked by classmates and who report loneliness.

(Clin, 2006 Adol Psychology)

Pause and Reflect

- Which PBIS Tier 1 feature(s) could be enhanced most easily in your school (s)?

- How could this tool be used with your school(s)?

ADVANCED ORGANIZER:

Which of the following Tier 2/3 enhanced features may be a good fit for implementation in your school(s)?

- Easiest to install?
- Builds on existing strengths?
- Would provide the most impact with the least amount of effort?

2.1 Team Composition

Subscale	Tiered Fidelity Inventory: Tier II Features
Teams	**2.1 Team Composition**: Tier II (or combined Tier II/III) team includes a Tier II systems coordinator and individuals able to provide (a) applied behavioral expertise, (b) administrative authority, (c) knowledge of students, and (d) knowledge about operation of school across grade levels and programs.
	PBIS Big Idea: Effective PBIS teams are knowledgeable, representative of stakeholders, and have administrative authority. **ISF Big Idea:** Community partners familiar with operations of school and work can san strengthen the promotion of healthy social/emotional functioning for all students.
ISF Enhancements	*Tier II teams include community employed and school employed staff with mental health expertise. Teams also include families and students as active leaders.*
	Tier II team includes those who have the authority to allocate resources, develop policies and commit to necessary and critical changes in how both school and community employed personnel function at the school and student level (i.e. school-based clinicians, etc).

2.2 Team Operating Procedures

Subscale	Tiered Fidelity Inventory: Tier II Features
Teams	**2.2 Team Operating Procedures**: Tier II team meets at least monthly and has (a) regular meeting format/agenda, (b) minutes, (c) defined meeting roles, and (d) a current action plan.
	PBIS Big Idea: Teams with defined roles, consistent procedures, and an ongoing action plan make effective and efficient decisions. **ISF Big Idea:** The inclusion of community data can ensure that action planning is culturally relevant and considers home/school/community context of students.
ISF Enhancements	*Teams review community and school data to informs decisions regarding which evidence-based interventions are selected along the continuum of Tier II supports.*
	Teams review role and utilization of school and community employed clinician and Community partners' roles at Tier 2 are clearly defined through a memorandum of understanding (MOU).

2.3 Screening

Subscale	Tiered Fidelity Inventory: Tier II Features
Teams	**2.3 Screening**: Tier II team uses decision rules and multiple sources of data (e.g., ODRs, academic progress, screening tools, attendance, teacher/family/student nominations) to identify students who require Tier II supports.
	PBIS Big Idea: Quick access to additional supports increases the likelihood of student success. **ISF Big Idea:** Screening for social, emotional, and behavioral concerns; both internalizing and externalizing; allows students to be identified early and linked to the appropriate intervention.
ISF Enhancements	*School-wide screening protocol includes a process to identify both internalizers and externalizers.*
	Data from screening and Tier II decision rules are used to select appropriate evidence-based intervention (e.g., if a small group of students are experiencing anxiety, an intervention specifically aligned to teach coping skills is selected).

Methuen Public Schools Methuen, MA

John Crocker

Comprehensive School Mental Health System
National Quality Initiative Summit
April 26, 2016

Example – Screening for Internalizing Problems

- Two large scale screenings at Methuen High School
  - GAD-7 anxiety screener (January)
  - PHQ-9 depression screener (April)
- Electronic screening using Google forms
- Parent notification and opt-out process in advance
- 100% of students who required follow-up received it within 7 days of the screening

Methuen HS, cont.

- The two screenings yielded the following data:
  - GAD-7 (January)
    - 840 responses (approx. 45% of the high school pop.)
    - 85 students scored in the severe range (10.1% of respondents)
    - 104 students scored in the moderate range (12.4% of respondents)
  - PHQ-9 (April)
    - 853 responses (approx. 45% of the high school pop.)
    - 69 students scored in the severe range (8.1% of respondents)
    - 102 students scored in the moderate range (12.0% of respondents)
  - 8.1% of students scored in the moderate or severe range on both screeners
  - 2.3% of students scored in the severe range on both screeners

2.5 Options for Tier II Interventions

Subscale	Tiered Fidelity Inventory: Tier II Features
Interventions	**2.5 Options for Tier II Interventions**: Tier II team has multiple ongoing behavior support interventions with documented evidence of effectiveness matched to student need.
	PBIS Big Idea: Using evidence-based interventions to address student need increases the likelihood of improved outcomes. **ISF Big Idea:** Implementing evidence-based interventions is ensured when a protocol for selection and assessment of fidelity are aligned with specific behavioral health challenges.
ISF Enhancements	*School employed and community employed staff develop a single continuum of interventions that is evidence-based, matches needs in a culturally appropriate way, increases to match intensity level, and prioritizes family perspective.*
	Which staff deliver which intervention is decided by the team based on skills/fluency of personnel with the each specific evidence-based intervention.

2.6 Tier II Critical Features

Subscale	Tiered Fidelity Inventory: Tier II Features
Interventions	**2.6 Tier II Critical Features**: Tier II behavior support interventions provide (a) additional instruction/time for student skill development, (b) additional structure/predictability, and/or (c) increased opportunity for feedback (e.g., daily progress report).
	PBIS Big Idea: When critical features are in place, students are more likely to respond and have improved success. **ISF Big Idea:** When critical features include both internalizing and externalizing needs, a broader range of interventions will be available to address the needs of ALL students.
ISF Enhancements	*School employed and community employed staff receive professional development regarding their role in Tier II critical features, including the teacher's role in providing prompts, pre-corrects and reinforcement of skills being taught in Tier 2 interventions (e.g. using the Daily Progress Report with all Tier2 interventions)*
	As interventions are selected through a team-based protocol, critical features are addressed specific to each intervention before implementation begins. Linkage to Tier 1 expectations and progress monitoring are clarified.

2.10 Level of Use

Subscale	Tiered Fidelity Inventory: Tier II Features
Evaluation	**2.10 Level of Use**: Team follows written process to track proportion of students participating in Tier II supports, and access is proportionate.
	PBIS Big Idea: Approximately 5-15% of students would benefit from Tier II interventions. **ISF Big Idea:** A review of cross-system data can increase the likelihood that students will receive early access to a wider array of appropriate interventions.
ISF Enhancements	*All Tier II interventions, regardless of if they are delivered by school or community employed, are progress monitored for fidelity and impact through an integrated tier II systems team.*
	School employed and community employed staff install interventions according to data and need (e.g., if a large percentage of students within a building have experienced trauma, a trauma-informed intervention would be appropriate at Tier I vs. a smaller percentage (5-15%) of students, who might receive a targeted intervention within the Tier II continuum).

2.11 Student Performance Data

Subscale	Tiered Fidelity Inventory: Tier II Features
Evaluation	**2.11 Student Performance Data**: Tier II team tracks proportion of students experiencing success (% of participating students being successful) and uses Tier II intervention outcomes data and decision rules for progress monitoring and modification.
	PBIS Big Idea: Making decisions based on data allow the Tier II team to efficiently and effectively monitor intervention fidelity and student outcomes. **ISF Big Idea:** Cross system collaboration and communication enhances the use of student performance data.
ISF Enhancements	*School and community employed staff are proficient at using consistent data gathering tools and processes where possible (e.g. daily progress report) so that communication, systems, and processes can be streamlined.*
	Barriers to intervention success (e.g., that a student was able to access/participate in the intervention) are reviewed and discussed.

2.12 Fidelity Data

Subscale	Tiered Fidelity Inventory: Tier II Features
Evaluation	**2.12 Fidelity Data**: Tier II team has a protocol for ongoing review of fidelity for each Tier II practice.
	PBIS Big Idea: Teams assess fidelity of implementation of the core components of each intervention in order to eliminate barriers and increase the likelihood of positive student outcomes. **ISF Big Idea:** Evaluation of fidelity of implementation can help in the selection/maintenance of interventions and the cancellation of other interventions, thus ensuring that all interventions are carefully matched to data indicating need.
ISF Enhancements	*School employed and community employed staff are in the process of gathering process data for identified evidence-based interventions.*
	School and community employed staff use process/performance data to determine the overall effectiveness of interventions. Both school and community employed staff use a similar process of gathering and analyzing data so that decisions regarding intervention effectiveness can be streamlined.

Tier 3

School-wide PBIS
Tiered Fidelity Inventory
with ISF Enhancements

3.2 Team Operating Procedures

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.2 Team Operating Procedures** Tier III team meets at least monthly and has (a) regular meeting format/agenda, (b) minutes, (c) defined meetings notes, and (d) a current action plan.
	PBIS Big Idea: Teams with defined roles, consistent procedures, and an ongoing action plan make effective and efficient decisions. **ISF Big Idea:** When community data is reflected in action planning process, this broader context can support the needs of students across home, school, and community.
ISF Enhancements	*Community partner roles at Tier III are clearly defined through a MOU.*
	Teams review and utilization of school and community employed clinicians. Staff responsible for implementing individualized Tier III interventions have the credentials, expertise, skill sets needed, and/or receive appropriate professional development.

3.3 Screening

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.3 Screening** Tier III team uses decision rules and data (e.g., ODRs, Tier II performance, academic progress, absences, teacher/family/student nomination) to identify students who require Tier III supports.
	PBIS Big Idea: Quick access to additional supports increases the liklihood of student success. **ISF Big Idea:** Mental health/community and family/student participation in data review can a) provide a broader perspective and b) offer additional screening tools, for ensuring all youth in need of Tier III are identified as soon as possible.
ISF Enhancements	*School and community employed staff participate on Tier III systems teams, along with family/youth, to consider possible screening data, additional screening tools (e.g. trauma screening for individual students) and to review data for students in need of Tier III supports.*
	The integrated Tier III systems team is trained to fluency in and available to facilitate screening tools with individualized families (e.g. "Family Check-up") to assess individualized needs for either school or community-based supports.

3.5 Staffing

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.5 Staffing** An administrative plan is used to ensure adequate staff is assigned to facilitate individualized plans for the students enrolled in Tier III supports.
	PBIS Big Idea: Adequate resources need to be allocated in order to ensure interventions are put into place with fidelity. **ISF Big Idea:** Community providers full participation in the Tier III system can ensure adequate staff are available to partner with school staff to facilitate/deliver individualized interventions with fidelity.
ISF Enhancements	*School employed and community employed clinicians have adequate FTE to deliver evidence--based interventions and ensure adequate supervision to ensure fidelity of delivery of interventions.*
	School employed and community employed clinicians have job descriptions and time allocation/flexible funding that indicate their involvement and participation in Tier III interventions, including conducting function based assessments, developing and implementing behavior support plans, and facilitating individualized interventions *(e.g., person center planning, wraparound, RENEW).*

3.6 Student/Family/Community Involvement

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.6 Student/Family/Community Involvement** Tier III team has district contact person(s) with access to external support agencies and resources for planning and implementing non--school--based interventions (e.g., intensive mental health) as needed.
	PBIS Big Idea: Individual student support plans require a multi--disciplinary approach that spans home, school, and community. **ISF Big Idea:** Community partners with established collaborative relationships with school district and buildings can enhance full engagement of students/families and increase opportunity for interventions and support
ISF Enhancements	*School employed and community employed staff work collaboratively with students/families and other natural and community supports to facilitate comprehensive individualized plans with identified resources and interventions across home, school, and community.*
	MOU's are established to clarify delivery of resources and interventions through community agencies as needed.

3.7 Professional Development

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.7 Professional Development** A written process is followed for teaching all relevant staff about basic behavioral theory, function of behavior, and function--based intervention.
	PBIS Big Idea: Explicit descriptions and professional development ensure a more accurate assessment and that behavior support plans will be implemented with fidelity. **ISF Big Idea:** Cross training with community employed and school employed staff assists everyone in being confident, competent and fluent to consistently deliver evidence--based interventions.
ISF Enhancements	*Both school employed and community employed staff qualifications/skills are assessed to determine Professional development plan and resulting common PD calendar for common trainings.*
	Treatment fidelity is used to evaluate the extent to which both school and community employed staff require additional training and support/supervision.

3.8 Quality of Life Indicators

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.8 Quality of Life Indicators** Assessment includes student strengths and identification of student/family preferences for individualized support options to meet their stated needs across life domains (e.g., academics, health, career, social).
	PBIS Big Idea: Having a strength--based approach with student/family voice and choice encourages a positive, proactive, and contextually relevant support plan. **ISF Big Idea:** Involving community partners increases access to resources and encourages inclusion of student and family community experiences that assist in developing list of strengths/preferences to expedite achieving goals across home, school, and community.
ISF Enhancements	*School, student/family and community partners, work together to identify strengths and needs across life domains and settings.*

3.11 Comprehensive Support

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.11 Comprehensive Support** Behavior support plans include or consider (a) prevention strategies, (b) teaching strategies, (c) strategies for removing rewards for problem behavior, (d) specific rewards for desired behavior, (e) safety elements where needed, (f) a systematic process for assessing fidelity and impact, and (g) the action plan for putting the support plan in place.
	PBIS Big Idea: Behavior Support Plan needs to include multiple components. **ISF Big Idea:** Community partners can contribute a needed perspective in development of a comprehensive behavior support plan.
ISF Enhancements	*Community partners are fluent with FBA process and actively engage in process of developing support plans.*
	Community partners are actively participating in development of a comprehensive behavior support plan.

3.12 Formal and Natural Supports

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.12 Formal and Natural Supports** Behavior support plan(s) requiring extensive and coordinated support (e.g., person center planning, wraparound, RENEW) documents quality of life strengths and need to be completed by formal (e.g., school/district personnel) and natural (e.g., family, friends) supporters.
	PBIS Big Idea: Behavior Support Plan fits unique context of the individual with a person-- centered lens. **ISF Big Idea:** Active participation of community partners provides the expanded view to help guide how other life domains impact the school setting.
ISF Enhancements	*Community partners continuously inform the team of strengths and community resources.*
	The school can consider conducting an internal resource map of the school to identify adults in the building who have skills/interests/hobbies (e.g., tennis, cars, sewing, fashion, etc.) that can be utilized when matching strengths/needs to help meet student goals. If a student presents a goal and a staff member has expertise in this area, he/she could be invited to the team as a fluid team member.

3.14 Data System

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.14 Data System** Aggregated (i.e., overall school--level) Tier III data are summarized and reported to staff at least monthly on (a) fidelity of support plan implementation, and (b) impact on student outcomes.
	PBIS Big Idea: Sharing data with staff increases staff buy--in and leads to their willingness to participate in interventions when appropriate. **ISF Big Idea:** Sharing data with community partners increases buy--in and leads to their willingness to participate in and expand options of interventions when appropriate.
ISF Enhancements	*School employed and community employed staff review data from interventions both for fidelity and impact.*
	This data review informs decisions regarding changes in the goals or plan.

3.15 Data-Based Decision Making

Subscale	Tiered Fidelity Inventory: Tier III Features
Teams	**3.15 Data-Based Decision Making** Each student's individual support team meets at least monthly (or more frequently if needed) and uses data to modify the support plan to improve fidelity of plan implementation and impact on quality of life, academic, and behavior outcomes.
	PBIS Big Idea: Making decisions based on data allows the Tier III team to efficiently and effectively monitor intervention fidelity and student outcomes. **ISF Big Idea:** Cross system collaboration and communication enhances student performance data.
ISF Enhancements	*School employed and community employed staff receive adequate training, coaching, and technical assistance in the implementation of individual student interventions.*
	Barriers to intervention success (e.g., that a student was present to receive access to the intervention) are reviewed and discussed.

Selecting Mental Health Interventions within a PBIS Approach

Which Tier?
Depends on your Data

Tier 3 – **Intensive** mental health supports designed to meet the unique needs of **students who already display a concern** or problem.

Tier 2 – **Targeted** mental health supports provided **for groups of students identified as at risk** for a concern or problem.

Tier 1 – **Universal** supports that all students receive. **Promoting wellness & positive life skills can prevent or reduce** mental health concerns or problems from developing.

~5%

~15%
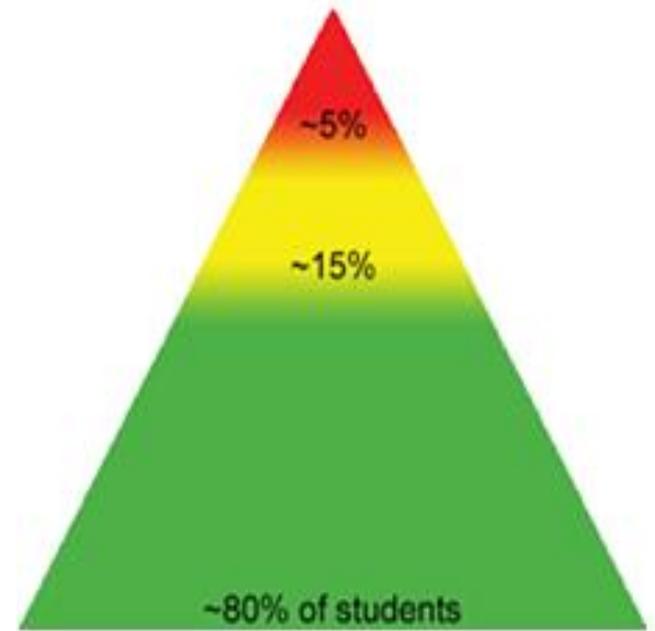
~80% of students

Trauma-sensitive schools

Trauma-sensitive schools

- recognize the prevalence & impact of traumatic occurrence in students' lives &

- create a flexible framework that provides universal supports, is sensitive to the unique needs of students & is mindful of avoiding re-traumatization.

- Adapted from *Helping Traumatized Children Learn*

Nic Dibble, DPI, WI PBIS Leadership Forum 2015

A Trauma-Informed "Core"

Kansas MTSS incorporates **Positive Behavior Supports** (PBIS) and **Social-Emotional Learning** (SEL) to:

- Teach skills
- Elevate relationships and emotional literacy
- Create safe, predictable environments

And avoid the common default mode of mere behavior compliance

Why use the PBIS framework for trauma-sensitive schools?

The fundamental purpose of PBIS is to make schools more effective & equitable learning environments.
Rob Horner, Co-Director of the OSEP Technical Assistance Center for PBIS

Predictable

Consistent

Positive

Safe
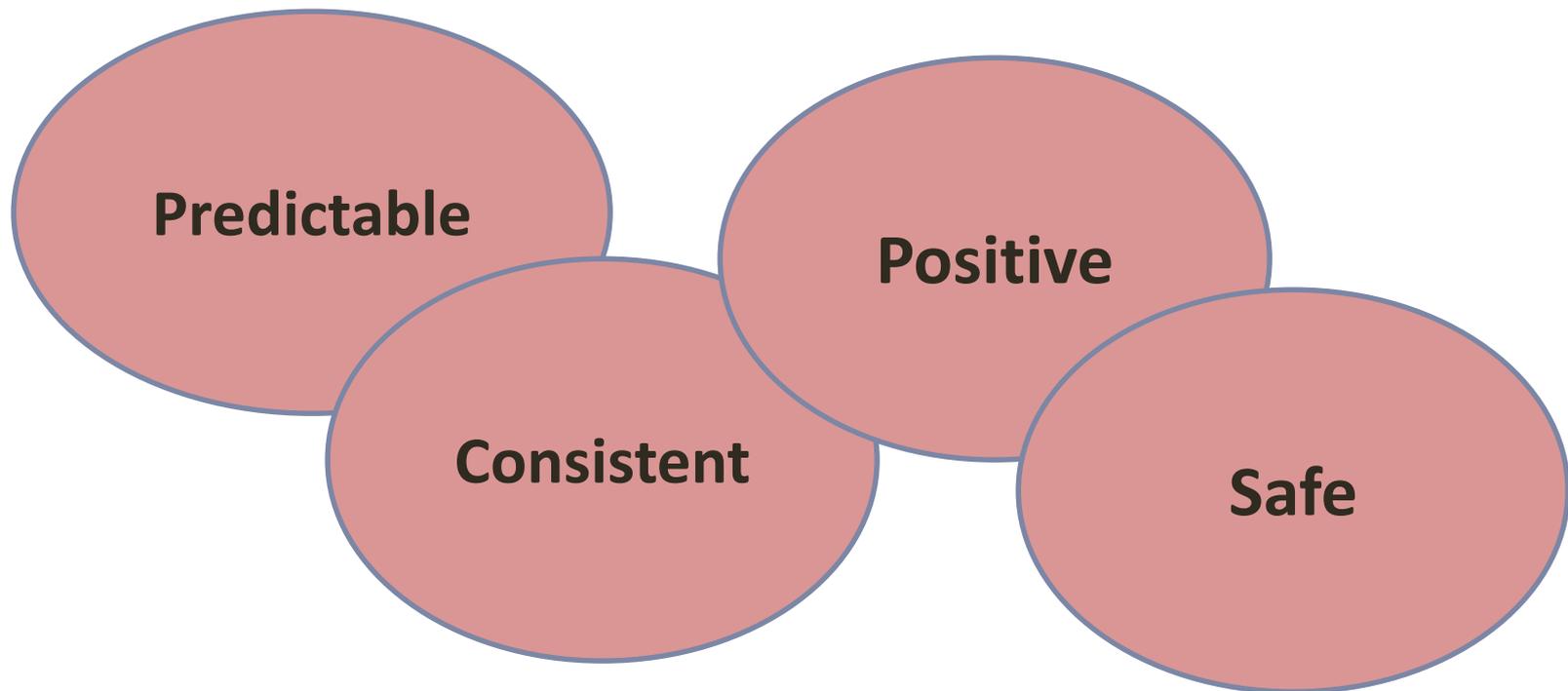
Using the PBIS Framework to Support the Learning of Students Affected by Trauma

Trauma-Informed Care (TIC) Values *

Safety

Empowerment

Collaboration

Trust

Choice

Tier 3

Tier 2

Tier 1

Key Areas *
Academics
Assessment & screening
Behavioral supports
Cognitive skills
Community partnerships
Crisis prevention & response
Educator capacity
Emotional & physiological regulation
Environment, culture & climate
Leadership
Parent & caregiver involvement
Policies
Relationships
Social-emotional learning

Tier 1 – Universal strategies & instruction for all students
Tier 2 – Additional supports for students with milder symptoms of trauma or in high-risk groups
Tier 3 – Intensive & ongoing interventions for students deeply impacted by trauma

* TIC Values & Key Areas apply across all 3 tiers of the PBIS Framework.

TIC Values are from Fallot & Harris, Community Connections, www.ccdc1.org

Department of Public Instruction Trauma-Sensitive Schools Resources
http://sspw.dpi.wi.gov/sspw_mhtrauma

Spring 2014: Identified Need

- A small (15) group of students who were asking to go to the office on a daily basis or were frequently absent.
  - Most behaviors were internalizing: anxiety, withdrawal, avoidance of others.
  - These were students who performed academically, not special education eligible.
- School psychologist researched small group interventions for these students.
- Found Coping Cat

Coping CAT is a Cognitive Behavioral Intervention that helps students recognize and analyze feeling related to stress and develop strategies to cope with stress provoking situations. It is an 8 week, group intervention that meets on a weekly basis for 45 minutes.

Modified Coping Cat

Coping Cat small groups (6 students) are co-facilitated by a Riverbend Community Mental Health Counselor and an RMS counselor. Student responsibilities include participating in weekly group sessions, completing homework assignments (using coping strategies), and self-monitoring progress.

Teacher responsibilities include prompting students to use their coping strategies and a willingness to participate in professional development regarding stress management and/or anxiety. Coping Cat instructor responsibilities include implementing the Coping Cat curriculum with fidelity and monitoring student progress with students and teachers.

Pre-post measure: Screen for Child Anxiety Related Disorders (SCARED). Birmaher, Khetarpal, Cully, Brent, & McKenzie,1995.

Pre/Post Coping Cat Students Report on the SCARED (n=18)
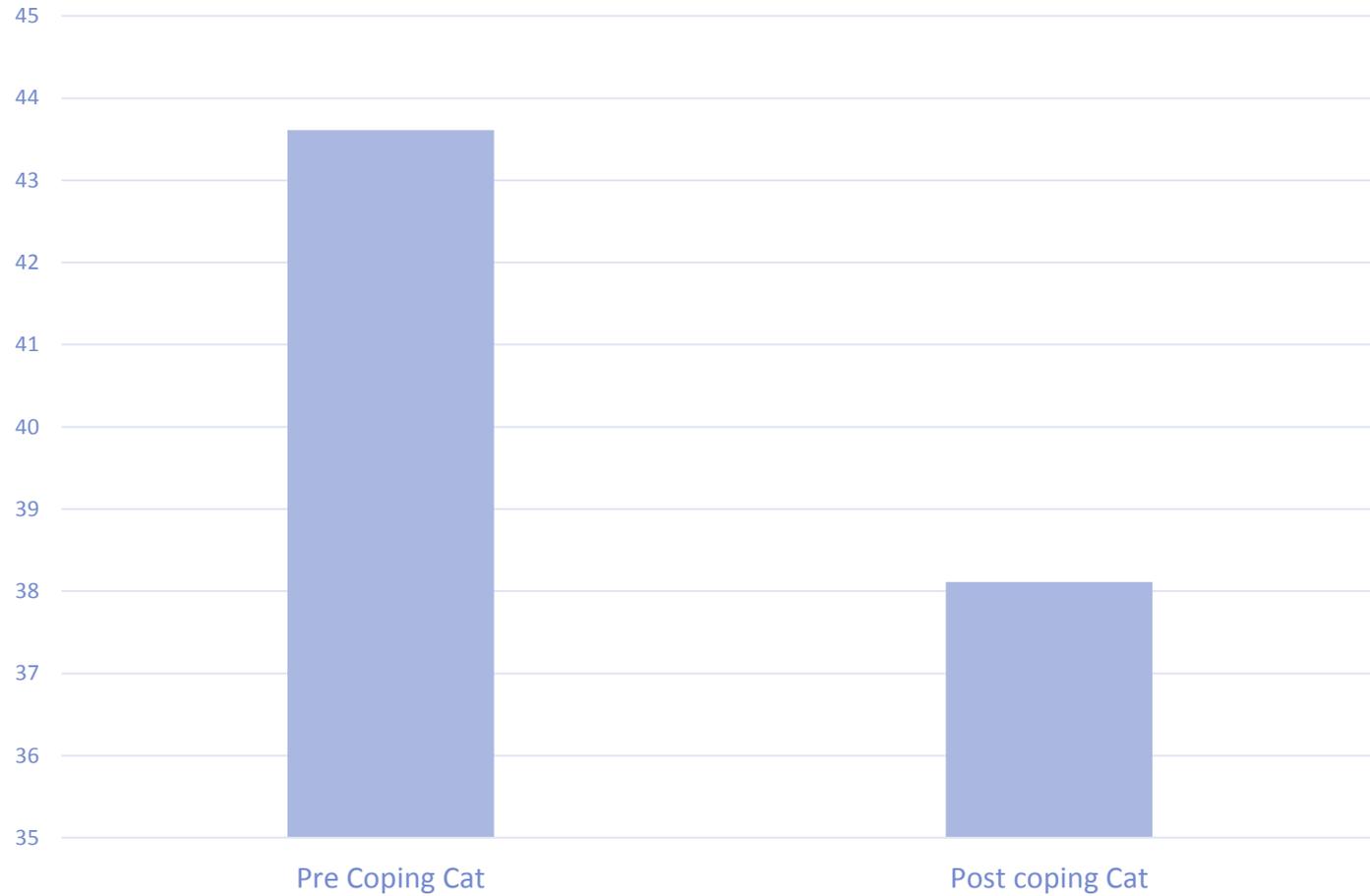
Average Number of Absences per Student (Full Days)

Pre (7 weeks prior to group); During (8 school weeks of intervention); Post (7 weeks after group)
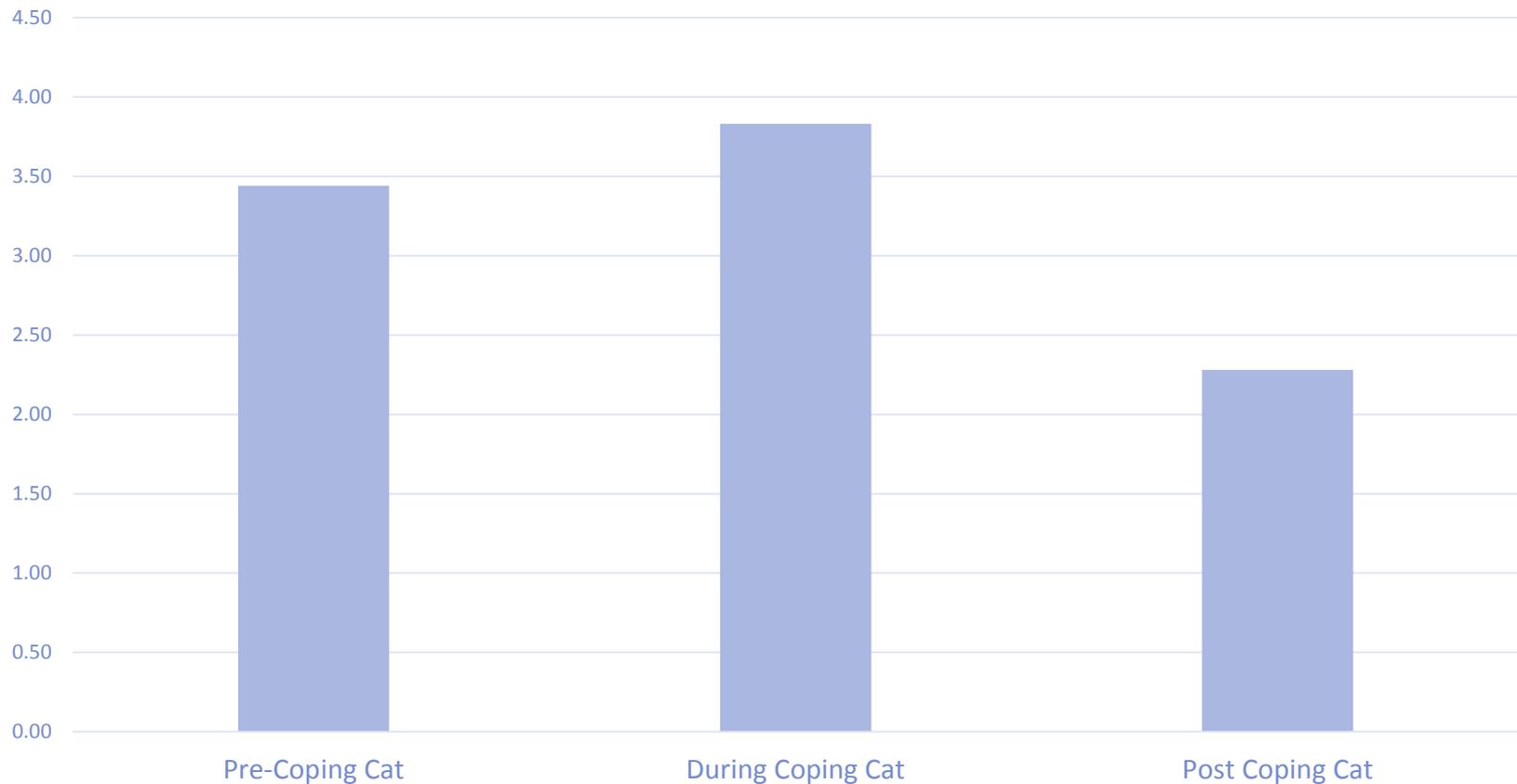
Average Number of Visits to the Nurse (per week)

Pre (7 weeks prior to group); During (8 school weeks of intervention); Post (7 weeks after group)
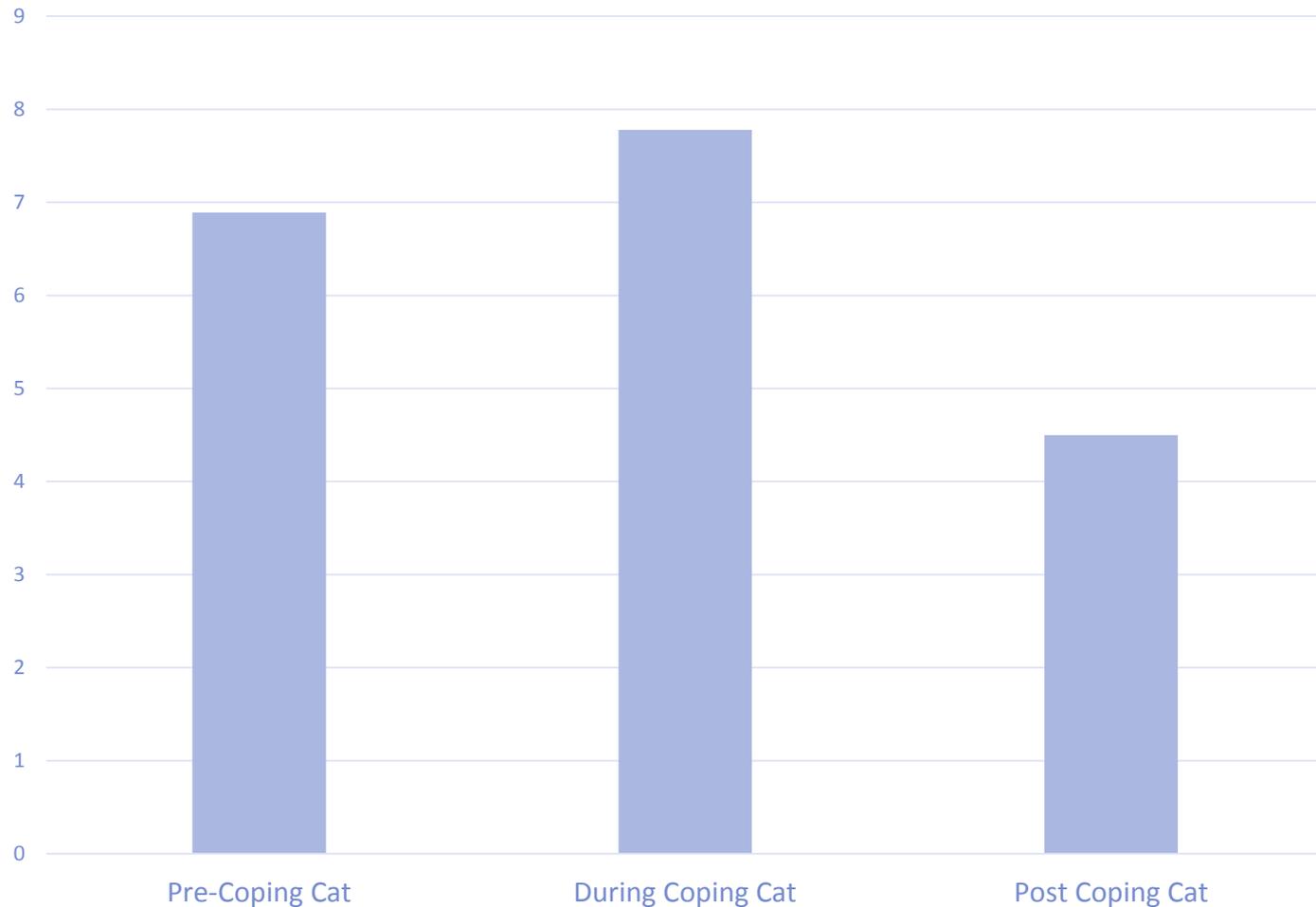
Case Example # 1
8th Grade Female Student
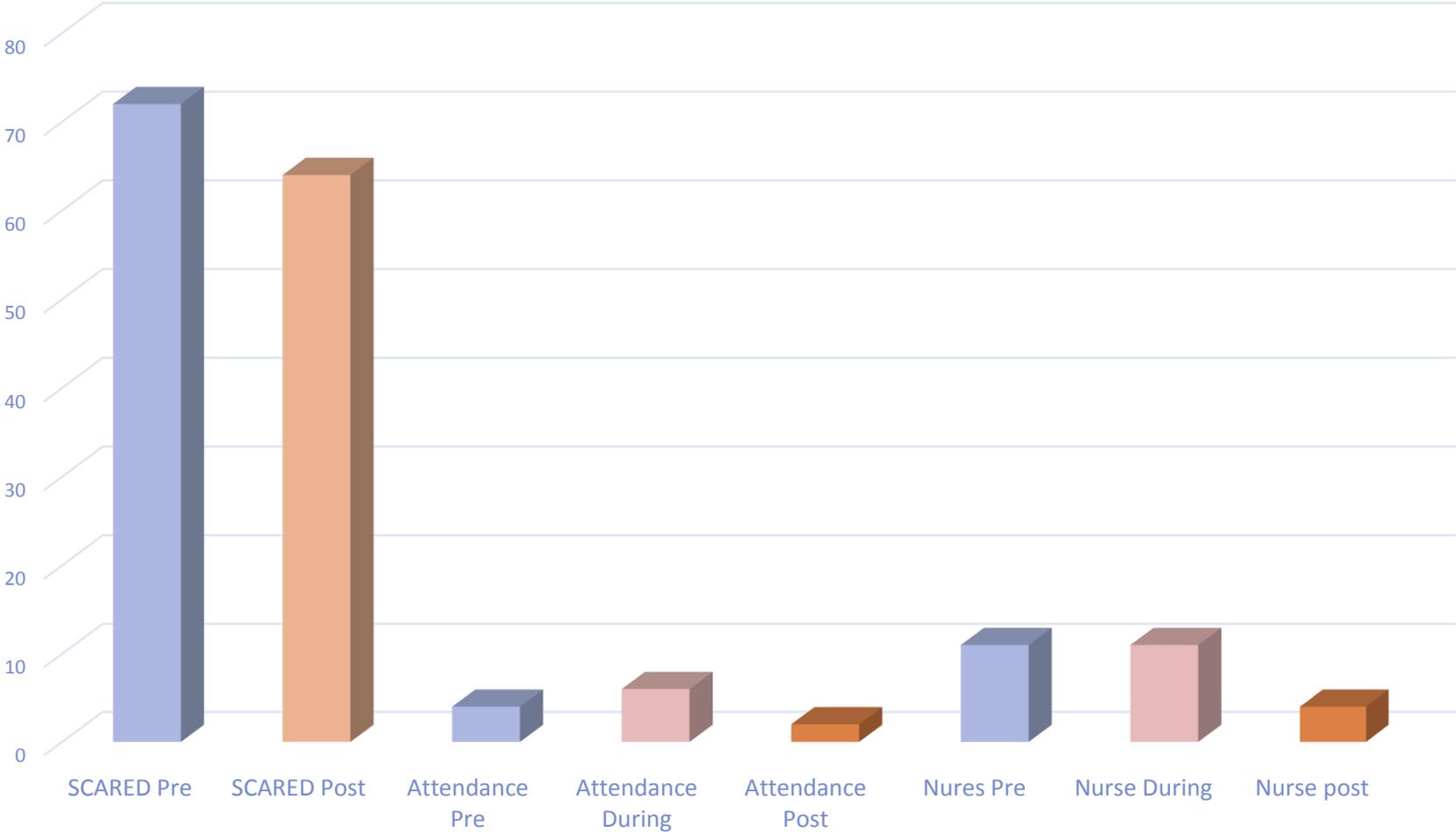
Tool to Shape Team Routine

Consumer Guide to Selecting Evidenced Based Mental Health Services within a SWPBS model

Robert Putnam, Susan Barrett, Lucille Eber, Tim Lewis & George Sugai

Advancing Education Effectiveness: Interconnecting School Mental Health & School-wide Positive Behavior Support, Appendix F, pages 148-9
https://www.pbis.org/common/cms/files/Current%20Topics/Final-Monograph.pdf

Take an inventory (and examine effectiveness and fidelity) of current practices before investing in new interventions or programs.
When data indicates a need for a new initiative, consider using this guide

Purpose

- Many schools and systems are bogged down with too many initiatives/practices and interventions that often lead to poor implementation and an overwhelmed workforce.

- This consumer guide was designed to help integrated system teams interested in expanding the continuum of behavioral supports and mental health services to invest in formalizing a selection process.

- It will be important for the system to take an inventory of current practices, examine effectiveness and fidelity of those current practices before investing in new interventions or programs.

- When a data indicates a need for a new initiative, this guide, checklist and case examples should be used to determine the best fit and will also guide teams to install systems features like data decision systems as well as training and coaching features that increase intervention fidelity and positive outcomes for children, youth and families.

Consumer Guide Logic Guiding Questions

- Are need and intended outcome specified?
- Is the most appropriate evidence-based practice selected?
- Is practice adaptable to local context and culture?
- Is support for local implementation developed?
- Is system level continuous progress monitoring and planning in place?

Pause and Reflect

- How could this tool be used with your school(s)?

Role/Function of the DCLT

Funding

Visibility & Dissemination

Political Support

Policy & Systems Alignment

Personnel Readiness & Selection

LEADERSHIP TEAM
Planning, Implementation, & Coordination

Training & Professional Development

Coaching & Technical Assistance

Evaluation & Performance Feedback

Local Content Expertise

Local Implementation Demonstrations
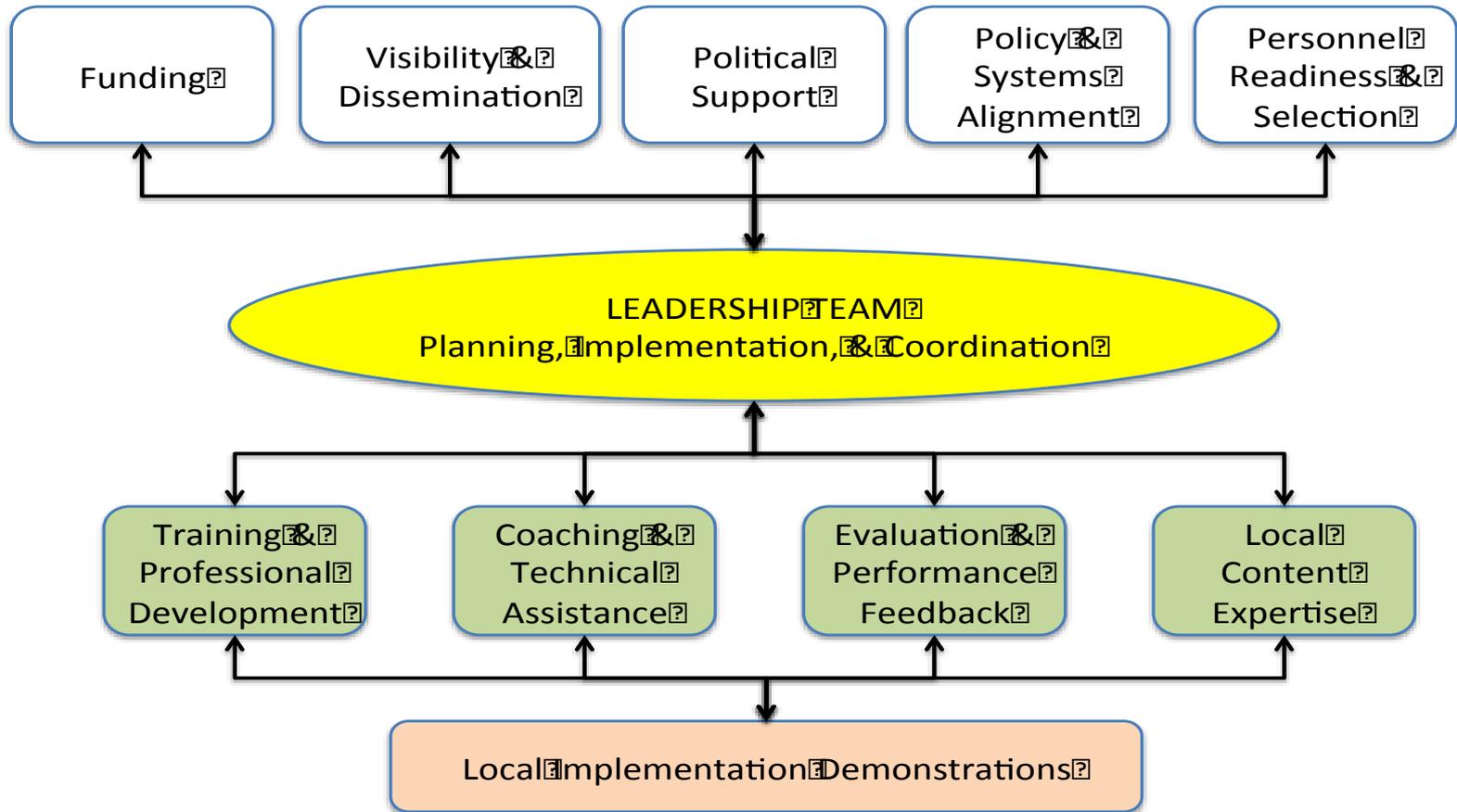
District and Community Leadership Team: Form/Expand Team Membership

Local Integration team identified (membership should include representatives from the following areas to ensure local stakeholders is fully represented).

a.) School System Student Services and Special Education Directors

b.) Local Mental Health Provider

c.) Core Service Agency's Child and Adolescent Coordinator

d.) Juvenile Services Coordinator/Law Enforcement

e.) Coalition of Families offices

f.) Family, Youth and Community members

g.) Local Management Board representative

h.) Social Services representative other to include (where present) Youth MOVE Rep, System of Care Case Management entity or Family Navigator, community health provider, non-public special education school rep, recreation services, local health dept, board of education representative or other stakeholders identified by leadership

Who else should be included? Can this team change job descriptions, re-allocate/flex funding, shape policy and address other organizational barriers that come up?

ISF District Community Leadership Guide

Item	Features	Implementation Activities	Possible Data Sources/ Tools/ Examples
District and Community Leadership Team	DCLT team identified (membership should include representatives from the following areas to ensure local stakeholders is fully represented). a.) School System Student Services and Special Education Directors b.) Local Mental Health Provider c.) Core Service Agency's Child and Adolescent Coordinator d.) Juvenile Services Coordinator/Law Enforcement e.) Coalition of Families offices f.) Family, Youth and Community members g.) Local Management Board representative h.) Social Services representative other to include (where present), Youth MOVE Rep, System of Care Case Management entity or Family Navigator, community health provider, non-public special education school rep, recreation services, local health dept, board of education representative or other stakeholders identified by leadership	**Big Idea #1:** Provide the authority and problem solving needed to overcome organizational barriers and implement the efficiencies needed to functionally interconnect educational, behavioral and mental health supports. This typically requires the difficult process of abandoning long held patterns of "doing business" and creating new models based on the strengths of the schools/district/community, and the changing needs of students and families. **Actions:** 1. Get the right people on the team (cabinet level people with authority to change policy, positions and funding) **Guiding Questions:** • Which voices of with mental health expertise within school system could benefit this team? • Which voices of mental health agency partners could benefit this team? • Consider individuals who are positioned to be social/emotional leaders for the district • In what ways are we ensuring that multiple stakeholder's voices (i.e. staff, MH agencies, parents/families, students, etc.) will stay at the table through the development of systems and overall implementation	**IDEA Dialogue Guide** **OSEP Center on PBIS Implementation Blueprint** **ISF Monograph** **District Capacity Assessment** **Consumer Guide** **Hexagon Tool**

DCLT: Big Idea

- Big Idea #1: Provide the authority and problem solving needed to overcome organizational barriers and implement the efficiencies needed to functionally interconnect educational, behavioral and mental health supports. This typically requires the difficult process of abandoning long held patterns of "doing business" and creating new models based on the strengths of the schools/district/community, and the changing needs of students and families.

Actions

1. Get the right people on the team (cabinet level people with authority to change policy, positions and funding)

Guiding Questions:
Which voices of with mental health expertise within school system could benefit this team?
Which voices of mental health agency partners could benefit this team?
Consider individuals who are positioned to be social/emotional leaders for the district
In what ways are we ensuring that multiple stakeholder's voices (i.e. staff, MH agencies, parents/families, students, etc.) will stay at the table through the development of systems and overall implementation

Actions

2**.** Establish meeting procedures and common way of work (role and function clearly established)

3. Define how evidence-based practices will be selected so the process is transparent.

4.Provide the funding, visibility, and political support needed to allow school teams to travel through the full sequence of adoption stages.

 Adopting an integrated framework is process
that will challenge the assumptions and traditional practices of most school faculty, and mental health systems.

Charting a Course of Action:

Where do you want to be with this?
 (what will it look like and sound like)?

What do you have in place?

What do you need to do to reach your desired outcome?

Primary Purpose of the DCLT

- Reflect and Respond….

MISSION

The mission of the U-46 School and Community Alliance is to create, integrate and leverage existing and new school/community partnerships that develop a full continuum of systematic interventions <u>based on data</u>. It encompasses three intervention tiers:

- Systems for promoting healthy development and preventing problems

- Systems for responding to problems as soon after onset as is feasible

- Systems for providing intensive care

U46 (Elgin IL)
20 Community Partners
57 providers trained in PBIS/SAIG

Boys and Girls Club of Elgin*Centro de Informacion* Community Crisis Center*Crossroads Kids Club* Easter Seals*Elgin Police Department* Family Service Association of Greater Elgin Area*Fox Valley Pregnancy Center*Fox Valley Volunteer Hospice*Girl Scouts of Northern Illinois*Hanover Township Youth and Family Services*Kenneth Young*Renz Center*Streamwood Behavioral Healthcare System*Taylor Family YMCA*The Y*WAYS*West Ridge Community Church*Youth Leadership Academy

Role & Function of District Team Clear and Consistent Leadership

- Define how evidence-based practices will be selected so the process is transparent.- Consumer Guide

- Provide the authority and problem solving needed to overcome organizational barriers and implement the efficiencies needed to functionally interconnect educational, behavioral and mental health supports. This typically requires the difficult process of abandoning long held patterns of "doing business" and creating new models based on the strengths of the schools/district/community, and the changing needs of students and families.

Clear and Consistent Leadership

- Provide the funding, visibility, and political support needed to allow school teams to travel through the full sequence of adoption stages. Adopting an integrated framework is process that will challenge the assumptions and traditional practices of most school faculty, and mental health systems.

- Provide the training, coaching and feedback systems needed to establish personnel with both the specific technical skills needed to deliver integration and the organizational vision to deliver those skills within a unified framework.

Establish a Structure for Integrated Work

- Establish a DCLT with stakeholders who have the authority to reallocate people, funding, resources

- Include an integrated professional development plan for both school and community employed staff

- Focus on cross-system teams that hold themselves accountable with data-based decisions

Alignment Workbook
3 step process

1. Assessing Current Status

2. Deciding to add new initiatives

3. Designing an integrated/aligned/changed plan

Example of Work Flow Checklist

1. Select District and Schools
2. Form or Expand District Team (Workgroup of existing team?)
   - Membership
3. Establish Operating Procedures
4. Conduct Resource Mapping of current programs/initiatives/teams
   - Identify gaps/needs
   - Assess staff utilization
   - Examine organizational barriers
   - Establish priority- measureable outcomes
5. Develop Evaluation Plan
   - District and School Level
   - Tools Identified
   - Economic Benefits
6. Develop Integrated Action plan
   - Identification of Formal Process for Selecting EBP's
   - System for Screening
   - Communication and Dissemination Plan
7. Write MOU- Determine who will implement the plan

Planning for Change

- Examine Current Conditions

- Using 'Resource Mapping' to assess/take an inventory for what your district/school/community already does/has to support youth and their families.

- Integrated Action Plan for priorities

Resource Mapping

- A process for a building and/or district level team to use in order to assess what interventions are currently in place across tiers and where there may be gaps.
  - Assess staff utilization, organizational barriers
  - Establish priorities

- Leads to data sharing, action planning, making informed decisions and the selection of evidence-based practices.

Integrated Action Plan

- School employed and community employed staff share responsibilities and resources

- Uses framework of PBIS and blends in SMH across Tiers to provide full continuum of prevention and intervention based on data and use of EBPs

Scranton School District
SWPBIS
Annual Action Plan
SY 2014-15

Annual Goals:

Goal #1: Sustain and scale Tier One implementation

Action Item	Steps To Be Taken	Who?	By When?	Progress C / IP / NS
Schools implementing Tier One will complete annual assessments	Benchmarks of Quality Self-Assessment Safety	Tier One Team All faculty All faculty	April 15, 2015	
Scranton High and Prescott Elementary will explore implementation of Tier One	Complete self-assessment and safety survey	All faculty	October 1, 2014	
Schools will apply for recognition from PA PBS Network	Complete application and appropriate supporting documentation	Building coaches	November 15, 2014	

C = Complete, IP = In Progress, NS = Not Started

Goal #2: Sustain and scale Advanced Tiers implementation with CSBBH integration

Action Item	Steps To Be Taken	Who?	By When?	Progress C / IP / NS
Schools implementing advanced tiers will complete BAT and develop action plan	BAT completion	Tier Two Team	May 15, 2015	
Identify additional schools to be trained in Tier Two	Review score of BOQ, review data, readiness	DCLT	November 1	
CSBBH staff will continue to participate on the Tier Two teams	CSBBH will provide consultation to school staff CSBBH teams will accept new referrals	CSBBH teams T2 teams	ongoing	

C = Complete, IP = In Progress, NS = Not Started

Goal #3: Explore integration with new School Social Workers

Action Item	Steps To Be Taken	Who?	By When?	Progress C / IP / NS
Identify areas of need through resource mapping to "deploy" social workers	Provide overview to social workers Update resource mapping in identified buildings	Kim M. Building coach	November 1	
School social workers and CSBBH clinicians will co-facilitate SAIGs for targeted students	Meet with Tier Two Teams to identify needs Select evidence based groups to meet needs Identify students to participate in building level groups as indicated	Kim M Sue S T2 Coach MHPs	February 1, 2015	

C = Complete, IP = In Progress, NS = Not Started

Memorandum of Understanding (MOU)

- An agreement between the school district and a community partner organization

- Clearly articulates the roles and responsibilities of each group

- Provides an opportunity to have meaningful dialogue regarding key aspects of the partnership

Element 2: Memoranda of Understanding Between Community Mental Health Centers and School Districts within the SS/HS Framework

- Designed to create collaborative relationships between community-based clinicians and school staff
- Features of the MOUs:
  - Clinicians are supported by the district to participate on Tier 1, Tier 2, and Tertiary Implementation Teams* (community mental health reimbursement is client-specific)
  - Clinicians are supported by the district to help plan and provide school-wide and small group (Tier 2) evidence-based interventions such as….
    - Education for faculty of trauma-informed care.
    - Co-lead Coping Cat groups with school staff.
    - Develop functional behavioral support plans for non-mental health eligible students.
    - Design a facilitated referral process and promote student screening and assessments.

Concord School District MOU with Riverbend Community Mental Health Center

Key components of the concord school district safe schools/healthy students contract with Riverbend community mental health center

Riverbend Community Mental Health will:

- Provide clinical and administrative supervision to Riverbend staff who provide services in the Concord School District
- Bill for services on a monthly basis

Clinician activities will include:

- Participation in school-based teams
- Facilitation school-based psycho-educational groups to promote social, emotional and mental health.
- Provision of consultation, mental health education and prevention information to school personnel.

Concord School District MOU with Riverbend Community Mental Health Center (cont.)

Clinicians will:

- Provide appropriate feedback to assist school staff in the implementation of behavior plans and service planning.
- Facilitate parent education activities.
- Serve as a liaison with Riverbend Community Mental Health Center and facilitate communication and referrals (Facilitated Referral Process)
- Adhere to relevant school related confidentiality regulations and district policies
- Exercise clinical/ethical judgment regarding sharing information with school personnel
- Complete a Monthly Activity Summary for data collection purposes

Concord School District MOU with Riverbend Community Mental Health Center (cont.)

The District will:

- Provide and administrative contact at each school
- Provide Clinicians with adequate workspace, internet access and access to a telephone Assist Clinicians in collection of data
- Collaborate with Clinicians to assess effectiveness of services
- Support the purpose, mission and work of the Clinicians and Riverbend Community Health Center

Quick Reflection

- What elements/features of an interconnected system are evident or emerging in your districts/schools?

- What action/steps could move your school(s) towards more efficient and effective integrated 'behavioral health' system in your state/district/schools?

- Questions/comments?

Summarizing
Resources
Possible Next Steps

A Common Implementation Framework for Social Emotional/Behavioral Health

- **We organize our resources**
  - Multi-Tier Mapping, Gap Analysis
- **So kids get help early**
  - Actions based on outcomes (data!), not procedures
- **We do stuff that's likely to work**
  - Evidence-Based interventions
- **We provide supports to staff to do it right**
  - Fidelity: Benchmarks of Quality
- **And make sure they're successful**
  - Coaching and Support
  - Progress monitoring and performance feedback
  - Problem-Solving process
  - Increasing levels of intensity

National ISF Work Group Webinars

Interconnected Systems Framework (ISF)

Topic	Recording Link
Exploring the ISF for Integrating SOC & Education *Lucille Eber, Midwest PBIS Network, Susan Barrett, Sheppard Pratt Health Systems, & Kelly Perales, Community Care Behavioral Health* An introduction to the Interconnected System Framework (ISF) for efficiently integrating mental health/SOC in schools featuring lessons learned from Pennsylvania's implementation experiences.	March 2015 Webinar March Webinar PPT
Installing ISF-Local Experiences Integrating SOC & Education *Susan Barrett, Sheppard Pratt Health Systems* A review of the core components of the ISF and experiences from SOC/Education efforts in New Hampshire including strategies for work force development, focus for ISF focused leadership teams, and ensuring use of data and evidence-based practices.	April 2015 Webinar April Webinar PPT
Installing ISF: The Role of School & Community-based Clinicians *Lucille Eber, Midwest PBIS Network; Susan Barrett, Mid-Atlantic PBIS Network; Mark Weist, University of South Carolina; Ali Hearn & Sheri Luecking, Midwest PBIS Network; Sharon Stephan & Nancy Lever, University of Maryland* An overview of the changing-role of clinicians within multi-tiered systems of behavioral health in schools.	June 2015 Webinar June Webinar PPT
Innovations with ISF: Integrating Restorative Practices in Schools *Jessica Swain Bradway, Midwest PBIS Network; Susan Barrett, Mid-Atlantic PBIS Network* An overview of integrating Restorative Practices into the SWPBIS frame, following the ISF model of expanded systems, data and practices.	August 2015 Webinar August Webinar PPT

http://www.midwestpbis.org/events/webinar-recordings

ISF Targeted Workgroup Purpose

Selected group from each site to:

1. Learn and interact with other sites

2. Create learning example to serve as national demonstration

3. Access to higher frequency of Technical Assistance

4. Increase ISF Capacity at State/Regional Level

5. Test and Refine ISF Tools

6. Document effort in a Technical Assistance Brief

ISF Targeted Work Group Webinars

June 30, 2015:

https://midwestpbis.adobeconnect.com/p2h0r0t84lz/

July 30, 2015:

https://midwestpbis.adobeconnect.com/p1a4p0b7g4g/

August 28, 2015:

https://midwestpbis.adobeconnect.com/p3a36fu0x45/

September 23, 2015:

https://midwestpbis.adobeconnect.com/p4hc10s2epb

ISF Targeted Work Group Webinars

October 28, 2015:

https://midwestpbis.adobeconnect.com/p1k21tz0u1e/

December 11, 2015:

https://midwestpbis.adobeconnect.com/p5btifgqpol

January 15, 2016:

https://midwestpbis.adobeconnect.com/p6myqem298d/

February 12, 2016:

https://midwestpbis.adobeconnect.com/p7dwku8try5/

Wellbeing

Should central role of education be building and improving wellbeing ?

How would academic achievement improve if we had students, youth, educators in environments that fostered emotional health and wellbeing?

How would that impact healthcare?

Justice system, Poverty, Homelessness, Drug Use? Unemployment?

Protective Factor or Vulnerable Contexts

"Failing School"

"High Achieving School"

Don't mistake academic label as an indication of "health"

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