

# **CS 8.9 -Using MTSS for Students with Internalizing Emotional/Behavioral Patterns**

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Track: Education-Mental Health Integration and Collaboration

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# Where are you in the implementation process?

Adapted from Eixson & Blase, 2005

## Exploration & Adoption

- We think we know what we need so we are planning to move forward (evidence-based)

## Installation

- Let's make sure we're ready to implement (capacity infrastructure)

## Initial Implementation

- Let's give it a try & evaluate (demonstration)

## Full Implementation

- That worked, let's do it for real and implement all tiers across all schools (investment)
- Let's make it our way of doing business & sustain implementation (institutionalized use)

# Today's Content

- I. Problem Context/History/Rationale
- II. Applying ISF to the Problem
- III. An example

# Problem Context/History/Rationale

# Prevalence

- How prevalent are emotional disorders among school-age children and youth?

Study	Citation	% of sample with any impairment	% of sample with serious impairment
Methods for the Epidemiology of Child and Adolescent Mental Disorders (MECA)	Shaffer et al., 1996	<b>21%</b>	<b>5%</b>
Great Smoky Mountains Study of Youth	Burns et al., 1995	<b>20%</b>	<b>11%</b>
National Health & Nutrition Examination Survey (NHANES)	Merikangas et al., 2010	<b>13%</b>	<b>11%</b>

# “Internalizing” Problems

- Depression
- Anxiety
- Fears/ phobias
- Trauma symptoms

# Internalizing Diagnoses

- Major Depressive Disorder
- Social Anxiety Disorder
- Generalized Anxiety Disorder
- Specific Phobia
- Obsessive Compulsive Disorder
- Reactive Attachment Disorder
- Posttraumatic Stress Disorder

*Under final review, Journal of Positive Behavior  
Interventions*

# Improving Multi-Tiered Systems of Support for Students with “Internalizing” Emotional/Behavioral Problems

Mark D. Weist, Lucille Eber, Robert Horner, Joni Splett, Robert Putnam, Susan Barrett, Kelly Perales, Amanda J. Fairchild, and Sharon Hoover



# Distinguishing Internalizing from Externalizing Problems

- Externalizing problems are highly interactive and social
- By contrast, internalizing problems are notable for what they are not
- Social and academic “treading water” or “disappearing” while others are moving forward
- Examples: requesting to leave events, reduced participation in activities, poor completion of work, frequent trips to the school nurse , withdrawal from peer interaction

# Reducing the Likelihood of Early Identification/Intervention

- A percentage of students with internalizing problems use academic achievement as a coping mechanism; hence, are doing “well” and are even less likely to be identified and offered support/help

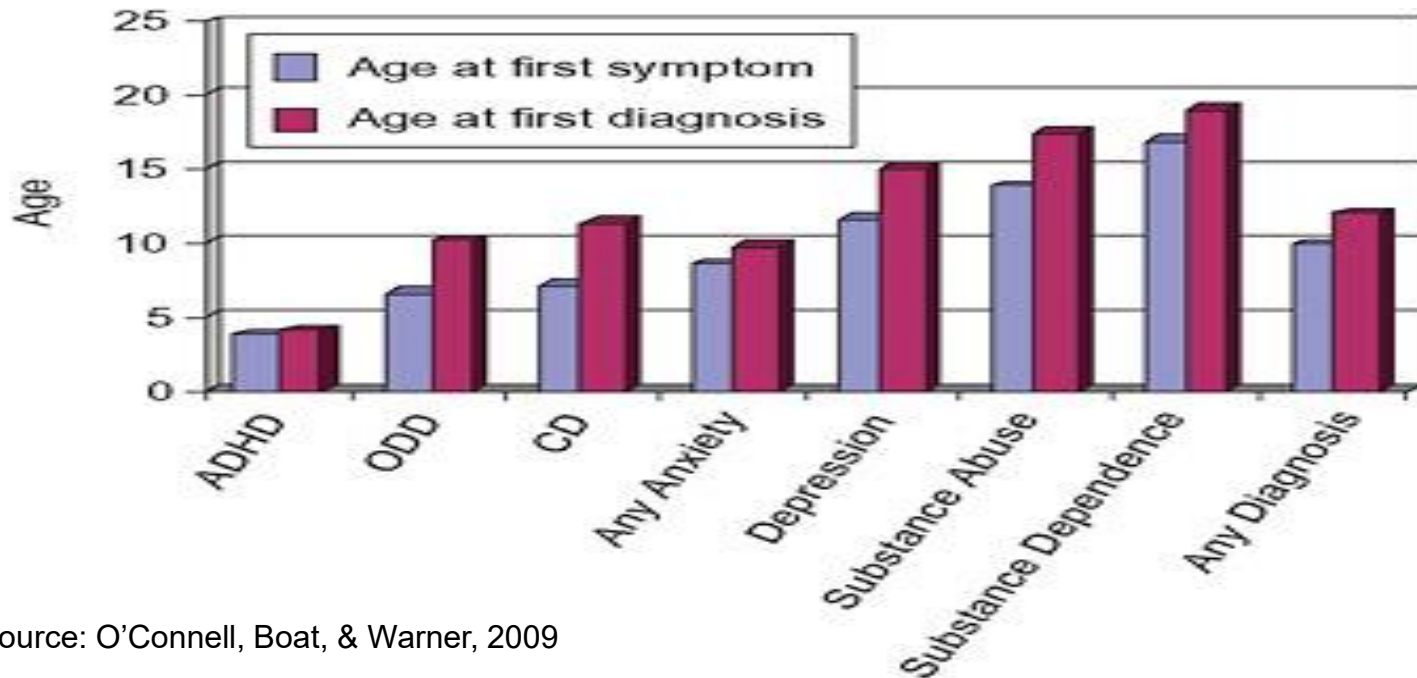
# Seligman (1974) – Learned Helplessness

- Internalizing behavior the result of multiple failed attempts to achieve social outcomes in appropriate ways, results in withdrawal, avoidance and an increase in self-delivered negative messages (e.g., “I can’t do this”)
- Contributes to self-fulfilling prophecies and negative spiraling

# Early Intervention is Critical

- Research suggests that there's a 'window of opportunity' ranging between 2-4 years when prevention is critical

Great Smoky Mountains Study: Age Between First Symptom and Initial Diagnosis



Source: O'Connell, Boat, & Warner, 2009

Bradshaw, C. P., Buckley, J. A., & Jalongo, N. S. (2008). School-based service utilization among urban children with early onset educational and mental health problems: The squeaky wheel phenomenon. *School Psychology Quarterly, 23*(2), 169.

	Received Mental Health Services	Received Special Education Services
Externalizing	85%	75%
Internalizing	65%	40%

# Key Intervention Targets for Internalizing Problems

- Psychoeducation
- Self-monitoring
- Problem solving
- Cognitive restructuring
- Activity scheduling (pleasurable, instrumental, exercise)
- Social skills
- Relaxation
- Exposure

# Goal Oriented Thinking

- What is my goal?
- Is what I am doing right now help me reach my goal?
- If not, what can I do different
- Let me try that
- How am I doing now?

# Challenges to focus on Internalizing problems

- Less visible problems less likely to be focused on generally and especially in the very busy environment of schools
- Lack of Tier 1 examples
- Staff generally not trained or supported for effective identification and intervention with these youth



# Joni Splett et al. (under review)

- Comparison of universal screening to traditional school identification
- 3744 students (from larger study funded by NIJ)
- 72% neither screener or school identified
- 18.4% screener only identified
- 3.7% school only identified (6.4% identified by both)
- **180% greater rate of identification with screener**
- School only more likely to be male and acting out

# Latent Profile Analysis

- Examine dataset to uncover underlying classes, where
  - class is a categorical latent variable
  - Variables used to create classes are continuous
  - Procedure similar to cluster analysis, except classes arise from a latent variable
- Objective: Identify classes of behavior underlying student screener scores
  - Behavioral and Emotional Screening System, BESS Subscales (Internalizing Risk, Externalizing Risk, Adaptive Scales)
  - Ratings from 5979 students in K – 5<sup>th</sup> grade collected from 2 states
    - Roughly 1000 students per grade
  - 51% male, 49% female
  - Diverse sample; Largest groups: 46% Caucasian, 33% African American, 16% Hispanic

# Latent Profile Analysis

- Uncover classes of students, grouped by behavioral patterns across BESS subscales (Mplus v. 7.4 software used)

## Classification Based upon:

- Internalizing Risk Index (IRI), Externalizing Risk Index(ERI), Adaptive Risk Index (ARI) raw scores used as input for the LPA
- Gender, Race, Grade level used as covariates to predict class membership

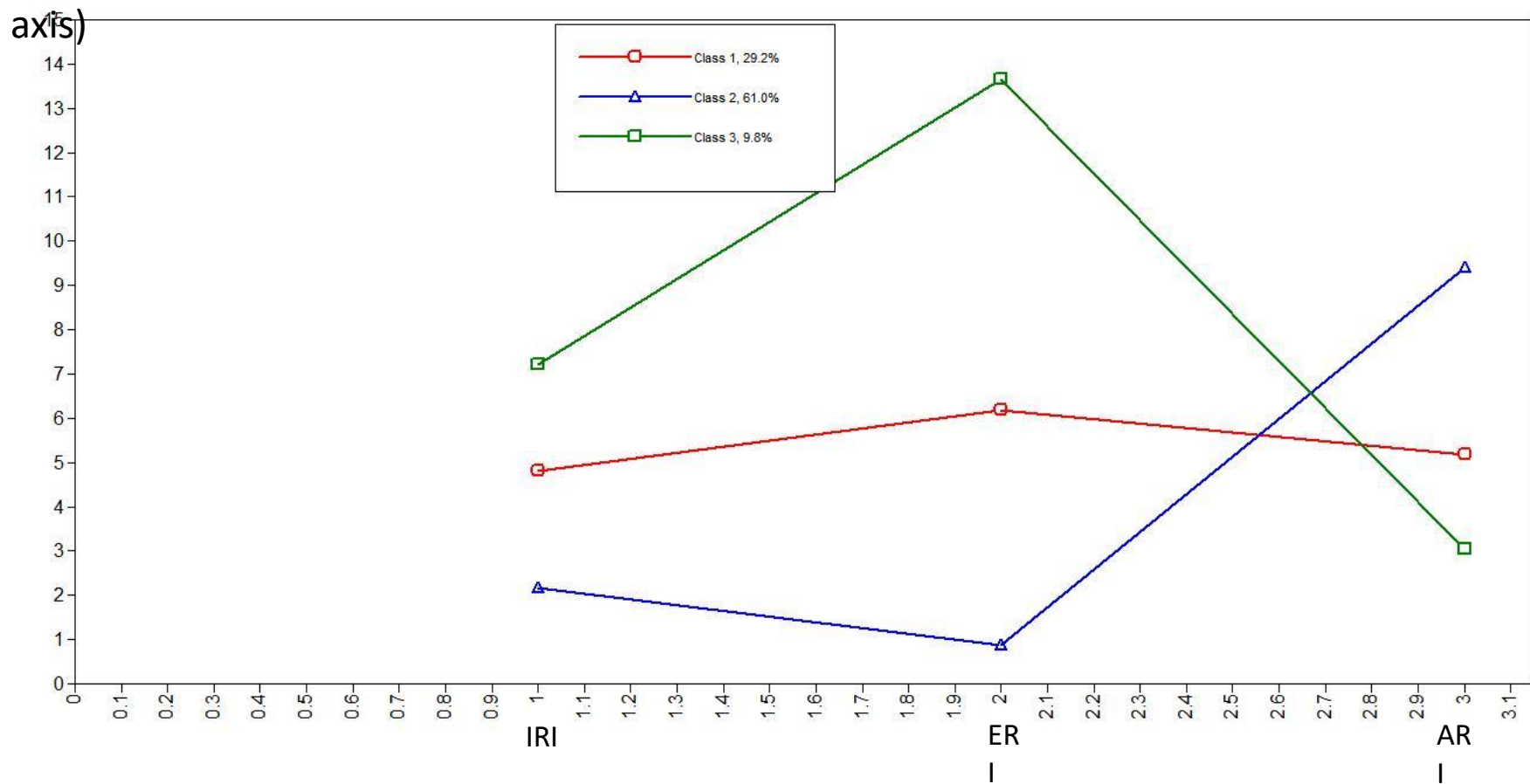
Final Class Solution Chosen by: Class definitions, Class size, Classification percentages, Statistical indices (Entropy, BIC, LMR Test)

# LPA 3 Class solution:

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

- Considering covariates (using Class 2 as a baseline)
  - No impact of grade
  - Males have a higher odds of being in class 1 or class 3 than females
  - Minority children higher odds of class 1 or class 3 membership

# LPA Plot of BESS Subscales by Class (raw scores on Y-axis)



# More fine-grained analysis

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

# More fine-grained analysis 2

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

# Applying ISF to the Problem



# The ISF: Building a Comprehensive System

## ISF Defined

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

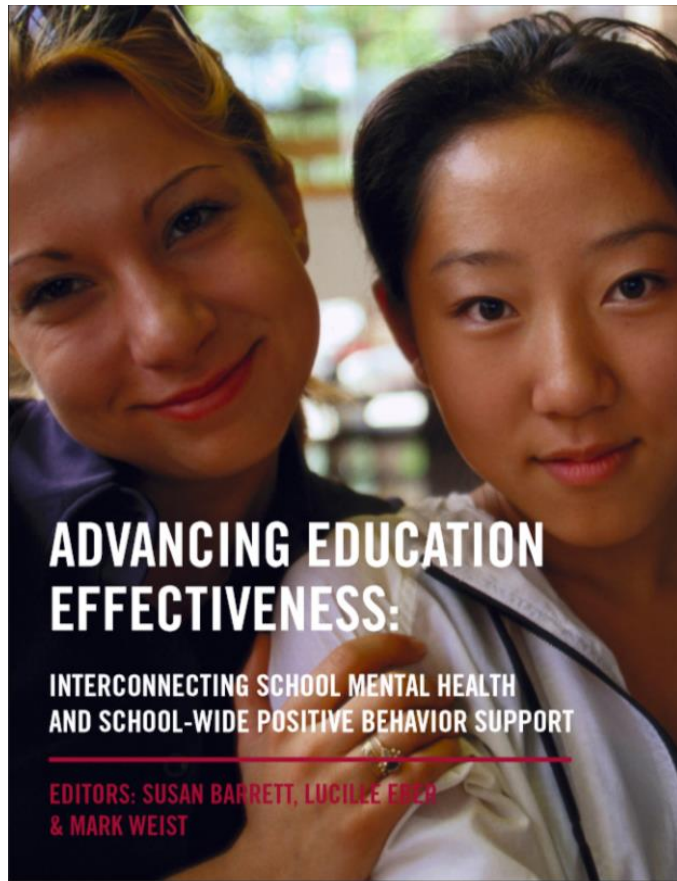
# Where We've Been:

- 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
- 2016: Targeted Work Group Webinars (8)
- 2017: Targeted Work Group Webinars continuing, knowledge development sites across country

# Where We Are Headed:

- 2017-18 TWG webinars and knowledge development sites continue
- Training/TA curriculum and workbook available online
- Other resources, tools, examples also available
- In process of developing “Monograph Volume 2: An Implementation Guide”

# The ISF: Building a Comprehensive System



## Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide Positive Behavior Support

*Editors: Susan Barrett,  
Lucille Eber and Mark Weist*

[pbis.org](http://pbis.org)

[csmh.umaryland](http://csmh.umaryland)

*IDEA Partnership NASDSE*

# The ISF:

## Building a Comprehensive System

### ISF Core Features

- **Tiered Prevention** logic
- **Cross-system teams** that include community/mental health providers, youth/family voice
- **Data**-based decision making
  - Formal processes for the selection & implementation of **evidence-based practices (EBP)**
  - Rigorous **progress-monitoring** for both fidelity & effectiveness
  - Ongoing **coaching** at both the systems & practices level
- **Early access** through use of comprehensive screening

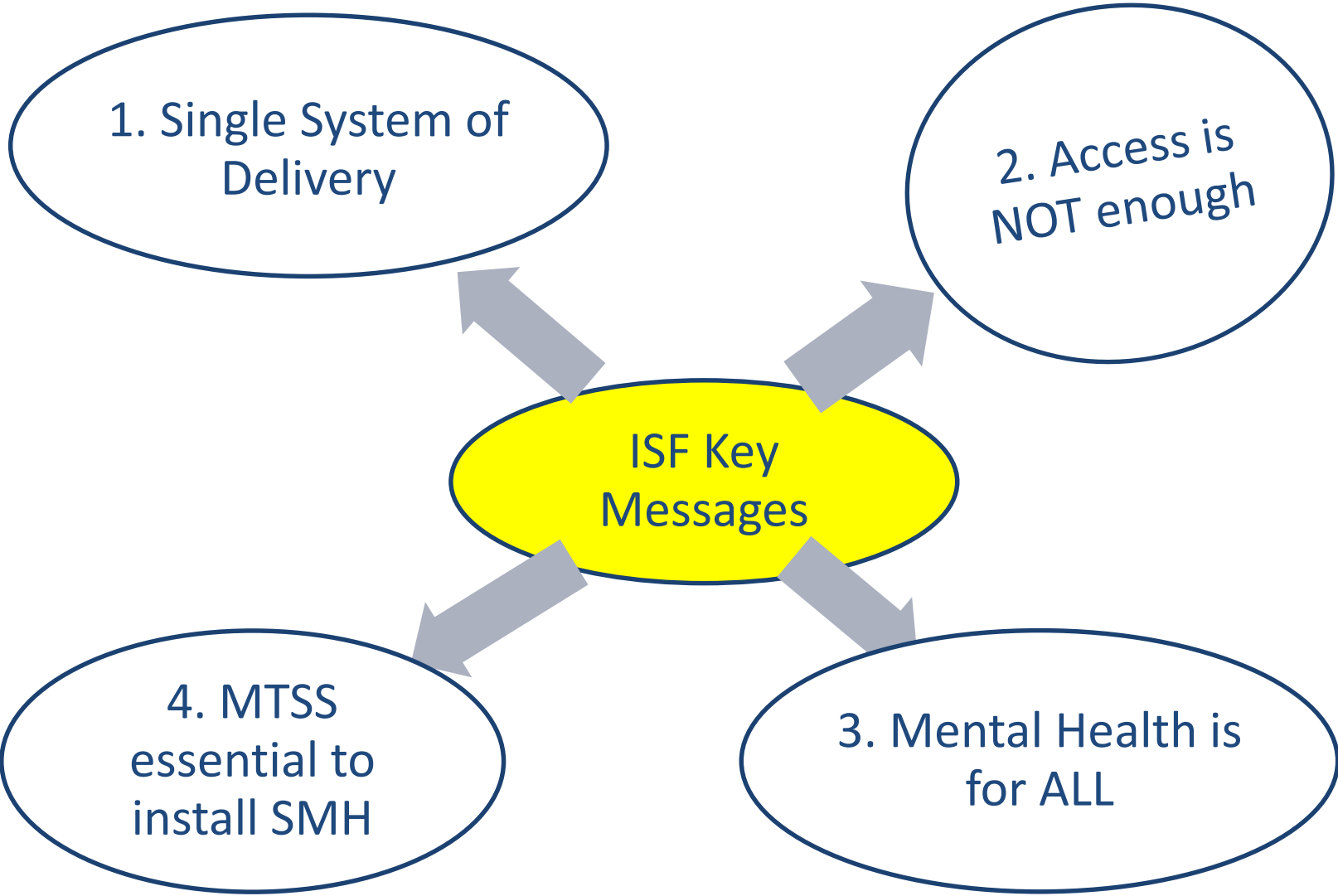
1. Single System of Delivery

2. Access is NOT enough

ISF Key Messages

3. Mental Health is for ALL

4. MTSS essential to install SMH



# Tier I: PBIS Commitment and Structure

PBIS can/needs to establish the positive and preventive school-wide social culture that is effective for those students who are less overt in their patterns of problem behavior.



# Tier I: PBIS Commitment and Structure

Focus first on the core features of effective schools

## ISF Core Features

- **Tiered Prevention** logic
- **Cross-system teams** that include community/mental health providers, youth/family voice
- **Data-based** decision making
  - Formal processes for the selection & implementation of **evidence-based practices (EBP)**
  - Rigorous **progress-monitoring** for both fidelity & effectiveness
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- **Early access** through use of comprehensive screening

Bully Prevention  
Trauma Informed Care  
Anxiety Reduction  
Depression

**Predictable** social expectations

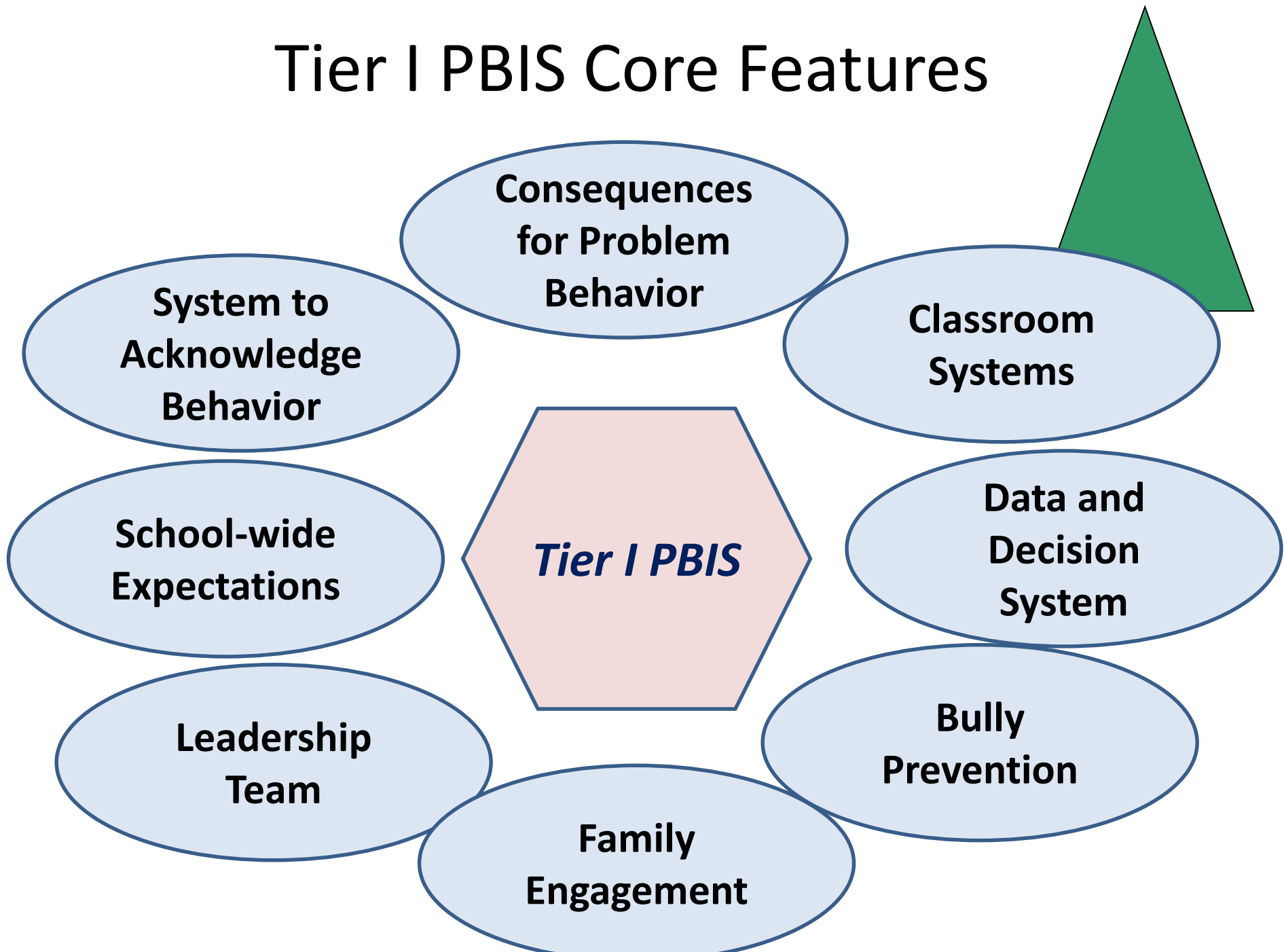
**Consistency** across people, place, time

**Positive** and Welcoming

**Safe**  
(Both actually and perceptually)



# Tier I PBIS Core Features

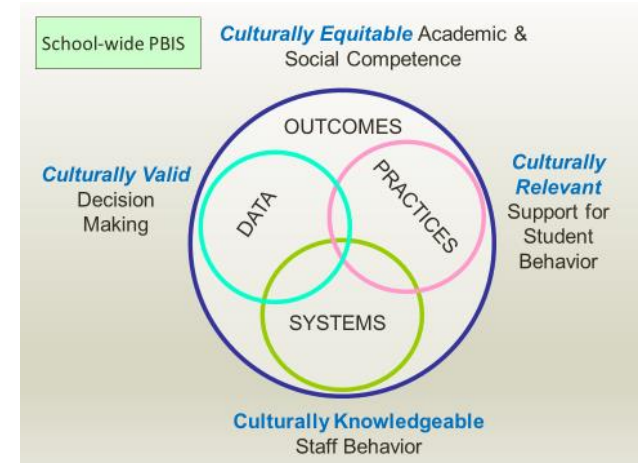


# Tier I: PBIS commitment and structure

## *Many ways to achieve core features*

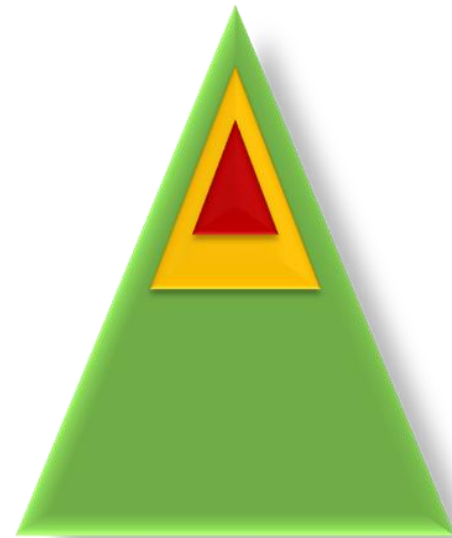
1. PBIS is a framework not a curriculum
  - Restorative Practices
  - Social/Emotional Skill Instruction
  - Etc

***Remember the systems!***

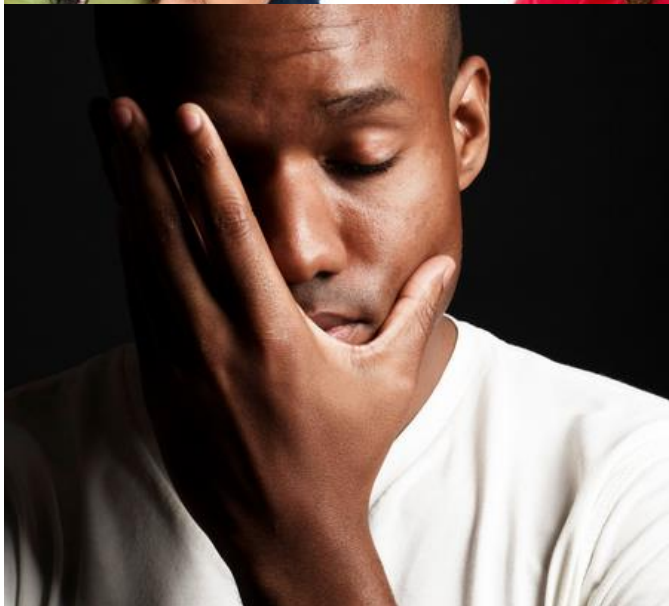


## *Messages from community health*

1. Primary prevention is essential
2. Primary prevention is insufficient



# Broaden Use of Data: Focus on Internalizing Issues



# Time Out of Class Form

**Name:** \_\_\_\_\_

**Location**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

Playground      Library  
 Cafeteria      Bathroom  
                             A      B      C

**Teacher:** \_\_\_\_\_

**Grade:** K    1    2    3    4    5    6    7    8

Hallway      Arrival/Dismissal

**Referring Staff:** \_\_\_\_\_

Classroom      Other \_\_\_\_\_

**Others involved in incident:**    None    Peers    Staff    Teacher    Substitute

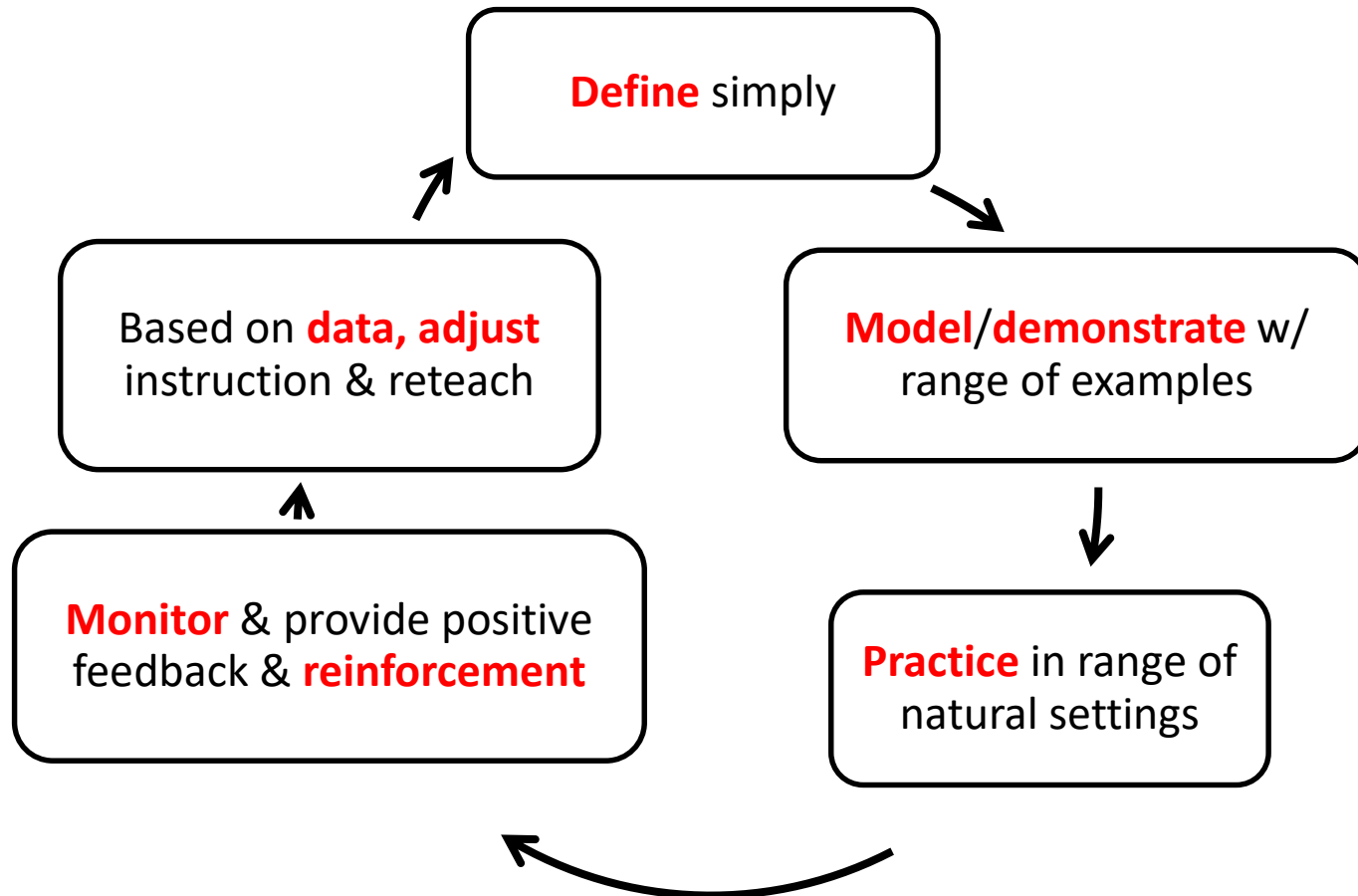
Minor Problem Behavior	Major Problem Behavior	Possible Motivation
Inappropriate language Physical contact Defiance Disruption Dress Code Property misuse Tardy Electronic Violation Other _____	Abusive language Fighting/ Physical aggression Defiance/Disrespect Harassment/Bullying Dress Code Inappropriate Display Electronic Violation Lying/ Cheating Skipping class Other _____	Obtain peer attention Obtain adult attention Obtain items/activities Avoid Peer(s) Avoid Adult Avoid task or activity To know For _____ <b>Nurse</b> <b>School Counselor</b>
<b>Administrative Decision/Time Out of Class=</b> _____		
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	

# Tier I/II/III : Practices

## EBP = Teaching Skills



# Multi-Tiered supports

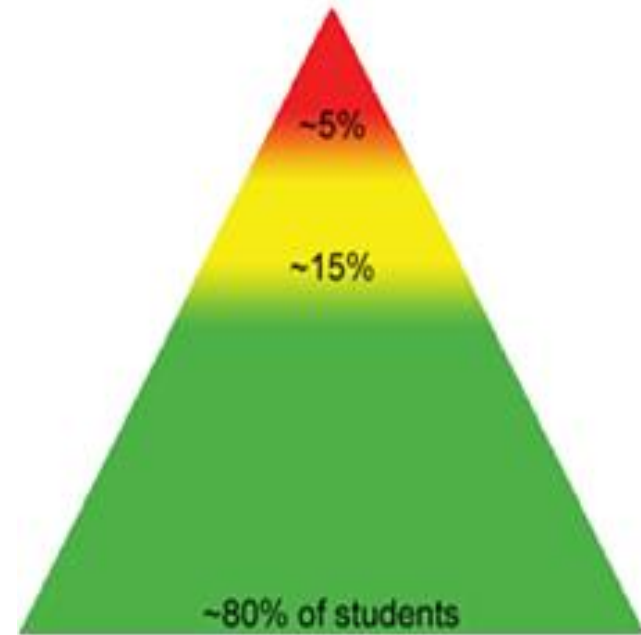
## Which Tier?

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.



# Teaching Matrix

## INCORPORATE Trauma Informed Strategies

Expectations

Respect

Safe

Responsible

1. Expectations

2. NATURAL CONTEXT (Locations)

3. Rules or Specific Behaviors

		All Settings	Halls	Playgrounds	Classroom	Library/ Comput	Assembly	Bus
Respect	Be on time. Obey directions. Have a plan.				Use your words Use safe hands			Watch for your stop.
Safe	Be kind. Hands/feet to self. Help/share with others.	Use normal voice volume. Walk to right.	Share equipment. Include others.	Self Check Use Calming Strategy	Whisper. Return books.	Listen/watch. Use appropriate applause.	Use appropriate applause.	Stay in your seat.
Responsible	Recycle. Don't litter. Use garbage can.			Ask for help Connect with Safe Person	Push in chairs. Treat books carefully.	Pick up. Treat chairs carefully.		Wipe your feet.

# Tier II/III supports

Districts/schools have standard protocol for selecting and installing Evidence-based Practices (EBP)

- Install systems first
- Invest in small number of EBP
- Matched to need (data), culture and context
- Interventions matched to presenting problem using data, monitored for fidelity and outcomes



# Tier II/III Supports

## *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

# Tier II/III Supports

## Demystify Interventions

- Teams and staff are explicit about types of interventions students and youth receive
  - e.g. from “student receives counseling” to “student receives 10 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

# Tier II/III Supports

## **Connect Interventions back to the Core curriculum**

- 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

# “Tier 3 Plan with Trauma-Informed Strategy”

## Daily Progress Report (DPR) Sample

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Teachers please indicate YES (2), SO-SO (1), or NO (0) regarding the student’s achievement in relation to the following sets of expectations/behaviors.

EXPECTATIONS	1 st block	2 nd block	3 rd block	4 th block
<b>Be Safe</b> SOS (slow down, orient, self-check) Use mindfulness	2 1 0	2 1 0	2 1 0	2 1 0
<b>Be Respectful</b> Distract & Self-Soothe Let ‘M Go	2 1 0	2 1 0	2 1 0	2 1 0
<b>Be Responsible</b> Make A Link Make Meaning	2 1 0	2 1 0	2 1 0	2 1 0
Total Points				
Teacher Initials				

Adapted from Grant Middle School STAR CLUB

Adapted from *Responding to Problem Behavior in Schools: The Behavior Education Program* by Crone, Horner, and Hawken

# An Example

# Incorporating Screening Data into Data-Based Decision Making

- Team Based Problem Solving is CRITICAL
- Surveillance team approach
- Numbers will increase
- Increase supports across the Tiers
- Using Triage approach

# Assumptions

- “Screening” process in place
  - Formal Universal
  - Informal- team using data to inform how to match interventions to student need at system level and student level

## ISF Webinars on Screening

- <http://www.midwestpbis.org/interconnected-systems-framework/webinars>
  - <https://midwestpbis.adobeconnect.com/p7pkk5t9w9yv/>
  - <https://midwestpbis.adobeconnect.com/p306425jwti/>

# General Process

- How do teams adapt plan to match to need
  - 43% in elevated risk category v. 20% elevated risk
  - Teach process to drill down and crosswalk
- General trend analysis within screener info and performance data
- Team prioritizes specific skills/strategies
- Use social emotional curriculum
  - Packaged curriculum
  - Free curriculum
- What do all students need? What do students in your school community need?
- Use consumer guide to select EBP



# Sample BESS-3 Data

	A	B	C	D	E	F
1	Student Name	Grade	Gender	Race/Ethnicity	BERI	BERI Risk
2		3	F	White	73	Extremely Elevated
3		1	M	White	76	Extremely Elevated
4		3	M	White	72	Extremely Elevated
5		5	M	White	61	Elevated
6		5	F	White	61	Elevated
7		K	F	White	61	Elevated
8		3	M	White	65	Elevated
9		2	M	White	79	Extremely Elevated
10		5	M	White	65	Elevated
11		3	M	White	71	Extremely Elevated
12		3	M	White	88	Extremely Elevated
13		3	M	White	70	Elevated
14		1	M	White	71	Extremely Elevated
15		5	M	White	64	Elevated
16		3	F	White	77	Extremely Elevated
17		4	F	White	70	Elevated
18		2	M	White	81	Extremely Elevated
19		1	F	White	62	Elevated
20		4	M	Two or More Races	77	Extremely Elevated
21		K	M	White	64	Elevated
22		2	M	White	70	Elevated
23		4	M	White	71	Extremely Elevated
24		K	F	White	61	Elevated
25		3	M	White	72	Extremely Elevated

Sort groups of students by need  
other factors that will impact  
groupings will be age/gender

- Elevated: Depression
- Elevated: Anxiety
- Extremely Elevated: Depression
- Extremely Elevated: Anxiety
- Externalizer Risk
- Adaptive Skills Risk

# Data Crosswalk with other sources

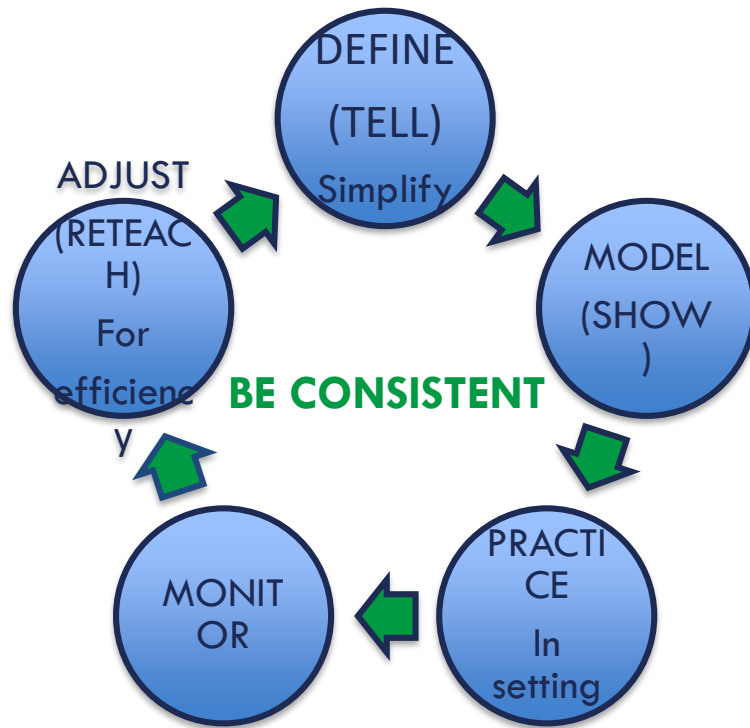
## ALL STAFF- ALL STUDENTS- ALL TIMES

- Data Points and Everyday Behaviors/Interactions
- Attendance, Classwork, HW, Participation, Dress, Affect, Referral Patterns, GPA
- Surveys/Focus Groups
- THEN, TRIAGE
  - Sort Students (Groups)
  - Boost Across Tiers (Layered and Connected)

# Data Decision Process

- 30% with elevated risk->Tier 1
- Drill Down-teacher reports, climate surveys, student focus groups, morning meetings provide information to prioritize SEB skills
- Revise schedule as needed
- Revise Teaching Matrix to match need
- Determine times to train staff (faculty meeting, grade level meeting)
- Determine times to deliver booster sessions
- Provide opportunities to practice in context
- Use matrix to prompt, teach, pre-correct and acknowledge

# How?... The Same Process for Social Emotional Behavior



# School 1

- 43% indicate elevated risk –internalizing features: mixed. Team reviewed other data sources and noted overall decreasing attendance rate and student survey reports indicating stress/anxiety during lunch
- Team boost teaching coping skills strategies (second step module) for ALL and including in teaching matrix
- Lunch modified to “flexible lunch”- students select lunch area

# School 1

Teaching Matrix-		INCORPORATE Coping Strategies for Managing Stress						
		All Settings	Halls	Playgrounds	Lunch	Library/Comput	Assembly	Bus
Expectations	Respect	Be on...		Have a plan.	Invite those sitting alone to join in			Watch for...
	Achieving & Organized	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 h. Use appropriate applause.	Stay in your seat.
	Responsible	Rec...		garba... in 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 AND SEB Skills

# For other schools, may be a social media concern....

Teaching Matrix		Differentiate Strategies for Using Technology						
		All	...	...	...	...	...	Bus
Expectations	Respected	...	Walk.	Have a plan.	Words matter, pause and reflect before you post	Study, read, compute.	Sit in spot.	...
	Achieving & Organized	Be kind. Hands/feet to self. Help/share with others.	Use normal voice volume. Walk to right.	Share equipment. Include others.	Check your feelings Re-read message	Whisper. Return books.	Listen/watch. Use appropriate applause.	Use a quiet voice. Stay in your seat.
	Responsible	...	Maintain physical space.	Use equipment properly. Put litter in garbage can.	Model for others double check sources and consider feelings of others	Push in chairs. Treat books carefully.	Pick up. Treat chairs carefully.	Wipe your feet.

1. Expectations

2. NATURAL CONTEXT (Locations)

3. Specific Behaviors/Skills



# School 1

- Smaller set of students participating in coping skills group led by staff with specific skills
  - Increased training and coaching for staff delivering intervention
  - All staff provided training and support during faculty mtgs
- Team determines specific module or EBP that is matched to need
  - Continued booster from SEL or specific curriculum
  - Add other features to group (warm up or cool down strategy practiced during session)
  - Identify location, frequency, duration of group
- Layered DPR used for progress monitoring

# Understanding Types of Groups

Monitor Data, Select Practice, Install Systems

Basic

Complex

**REMEMBER to Consider: structure, skills taught, staff skills, location, and frequency  
Matched to student need with instructional focus, skilled staff (i.e. group dynamics,  
content, behavior science, clinical)**

- Academic – Core Curriculum
- Reading Comprehension Skills
- Taught by Reading Specialist
- Inside of the Classroom
- Weekly

- Pro-Social Skills- Core SEL curriculum
- Taught by range of staff with teaching background
- Outside of the Classroom
- 2/week

- Coping Skills- pulled from SEL curriculum
- Add emotional regulation feature
- Taught by staff with technical skills
- Inside of the Classroom
- 2/week

- Coping Power
- Taught by Staff with advanced technical skills
- Outside of the Classroom
- Daily

**“Social & Academic  
Instructional  
Groups”**

(sample coping skills group)

**Daily Progress Report (DPR) Sample**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EXPECTATIONS	1st block	2nd block	3rd block	4th block	5th block	6th block	7th block
<b>Be Safe</b> Label feeling Use deep breathing	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0
<b>Be Respectful</b> Use calm words with peers	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0
<b>Be Responsible</b> Let teacher know feeling temperature if above yellow	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0
Total Points							
Teacher Initials							

# Sample View of IRF

Interventions	Check-in Check-out (CICO)				Social/Academic Instructional or Coping Groups				Individualized Check-In/Check-Out & Mentoring				FBA/BIP				Individual Intervention			
													Assessment/Behavior Intervention Planning				MATCH-ADTC, Treatment Manual, CBT, etc.			
	# Students Participating	% Students Participating	# Students Responding	% Students Responding	# Students Participating	% Students Participating	# Students Responding	% Students Responding	# Students Participating	% Students Participating	# Students Responding	% Students Responding	# Students Participating	% Students Participating	# Students Responding	% Students Responding	# Students Participating	% Students Participating	# Students Responding	% Re
July		0%				0%				0%				0%					0%	
August		0%				0%				0%				0%					0%	
September		0%				0%				0%				0%					0%	
October		0%				0%				0%				0%					0%	
November	25	5%			57	11%				0%				0%			7	1%		
December	26	5%			57	11%				0%			4	1%			7	1%		
January	26	5%			45	9%				0%				0%			5	1%		
February	26	5%			45	9%				0%				0%			2	0%		
March	27	5%			36	7%				0%				0%			2	0%		
April	27	5%			7	1%				0%				0%				0%		

# ISF Spreadsheet (BESS + Early Warning System Data)

Student Name	Behavior Emotional Risk Index	Externalizing Risk Index	Internalizing Risk Index	Risk Index Overall Score	ODRs	Attend	OSS	ESE	Total Risk Score
	Extremely Elevated	Elevated Risk	Elevated Risk	3	10	13	5	N	11
	Elevated	Elevated Risk	Extremely Elevated Risk	2	10	11	3	Y	10
	Extremely Elevated	Extremely Elevated Risk	Extremely Elevated Risk	3	6	7	3	Y	10
	Extremely Elevated	Extremely Elevated Risk	Normal Risk	3	2	13	1	N	10
	Extremely Elevated	Extremely Elevated Risk	Normal Risk	3	10	4	6	Y	10
	Extremely Elevated	Extremely Elevated Risk	Normal Risk	3	5	6	9	N	10
	Extremely Elevated	Extremely Elevated Risk	Extremely Elevated Risk	3	2	18	2	N	10
	Extremely Elevated	Extremely Elevated Risk	Normal Risk	3	2	9	3	N	9

Private Student and Teacher info

# Questions/Dialogue