School Mental Health Virtual Learning Series

November 2021-June 2022



Cultural Responsiveness, Anti-Racism and Equity (CARE)
Best Practices in School Mental Health (SMH):
Early Intervention and Treatment (Tiers 2 & 3)

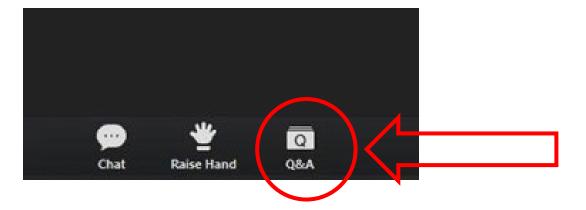
June 1, 2022



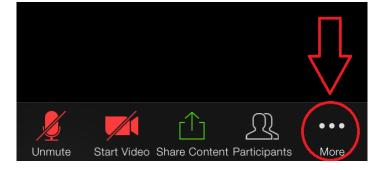
Technology Support

- Slides will be posted on the NCSMH website (<u>www.schoolmentalhealth.org</u>)
- Please type questions for the panelists into the Q&A box.
- Use chat box for sharing resources, comments, and responding to speaker

Web



Mobile App





THE DANYA INSTITUTE



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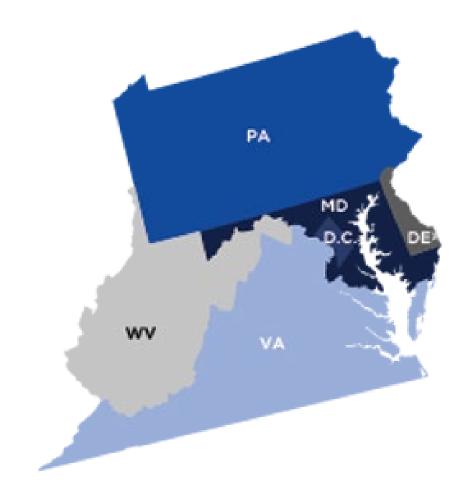


Kris Scardamalia NCSMH Faculty

Central East Geographical Area of Focus

HHS REGION 3

Delaware
District of Columbia
Maryland
Pennsylvania
Virginia
West Virginia





What Does Central East MHTTC Do?

Actions

- Accelerate the adoption and implementation of evidence-based and promising treatment and recovery-oriented practices and services
- **Strengthen** the awareness, knowledge, and skills of the behavioral and mental health and prevention workforce, and other stakeholders, that address the needs of people with behavioral health disorders
- Foster regional and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community
- Ensure the availability and delivery of publicly available, free of charge, training and technical assistance to the behavioral and mental health field





National Center for School Mental Health

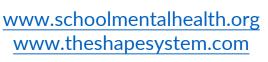
MISSION:

Strengthen policies and programs in school mental health to improve learning and promote success for America's youth

- Focus on advancing school mental health policy, research, practice, and training
- Shared family-schools-community mental health agenda

Directors: Drs. Nancy Lever & Sharon Hoover

Faculty: Tiffany Beason, Ph.D. Jill Bohnenkamp, Ph.D., Elizabeth Connors, Ph.D., Britt Patterson, Ph.D., Sam Reaves, Ph.D., Kris Scardamalia, Ph.D., Cindy Schaeffer, Ph.D.













School Mental Health Webinar Series

Objectives

- Gain increased awareness of high quality, sustainable multi-tiered system of school mental health supports and services
- Support trauma-informed systems in schools
- Discover the impacts of social determinants of health on student academic and social-emotional-behavioral success
- Learn to provide more culturally responsive and equitable services and supports
- Hear perspectives on school mental health from school, district and state levels
- Obtain insight into how youth, families, schools and communities can best work together to address student mental health needs



Aijah Goodwin, Ph.D.



Jennifer Lease, LCSW-C



Dana Cunningham, Ph.D.



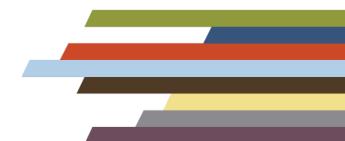
Shawn Orenstein

Welcome!



Objectives

- Increase understanding of best practices in school mental health early intervention and treatment
- Gain understanding of how to use the SHAPE System to assess the quality of your school mental health early intervention and treatment at the school and/or district level
- Increase knowledge of and reflect on how cultural responsiveness, anti-racist, and equity (CARE) considerations fit into school mental health early intervention and treatment
- Be able to list three strategies to better integrate CARE into school mental health early intervention and treatment



Overview of School Mental Health Quality Domains and Indicators

School Mental Health National Quality Assessment Overview of Domains and Indicators





Quality Domains

- Teaming
- Needs Assessment and Resource Mapping
- Mental Health Promotion for All (Tier 1)
- Early Intervention and Treatment Services and Supports (Tiers 2/3)
- Screening
- Impact
- Funding and Sustainability

Teaming

- · Multidisciplinary teams
- · Youth and family partnership
- Community partnerships
- · Addresses all tiers
- · Avoid duplication and promote efficiency
- Best practices for meeting structure/process
- Delineated roles/responsibilities
- Effective referral processes to school and community services
 Data-based decisions to determine student interventions
- Data sharing

Needs Assessment/ Resource Mapping



- Assess student mental health needs
- Assess student mental health strengths
 Use needs assessment results to select plan and impli-
- Use needs assessment results to select, plan and implement services and supports
- Conduct resource mapping to identify existing services and supports
- Use resource map to select, plan and implement services and
- Align existing services and supports

Mental Health Promotion Services & Supports

- Tier 1 Services and Supports:
- · School Climate
- Positive Discipline Practices
- Teacher and School Staff Well-Being
 Mental Health Literacy
 Positive Behaviors and Relationships
 Social Emotional Learning
- Determine whether services and supports are
- Ensure fit with strengths, needs, cultural, and linguistic
- Ensure adequate resources for implementation
- · Provide interactive training and ongoing supports
- Monitor fidelity

Early Intervention and TIERS 2&3 Treatment Services & Supports

- · Provide access to needed services and supports
- · Determine whether services are evidence-informed
- Ensure all services and supports are evidence-informed
- Ensure fit with strengths, needs, cultural, and linguistic considerations.
- Ensure adequate resources for implementation
- · Provide interactive training and ongoing supports
- Monitor fidelity
- Ensure intervention goals are SMART
 Monitor student progress across tiers
- Implement a systematic protocol for emotional and behavioral crisis response

Screening



TIER 1

- Use best practices for mental health screening planning and implementation
- Indicate the number of students:
- Enrolled in school
- Formally screened in the absence of known risk factors
 Identified as being at-risk or already experiencing a mental health
- · Referred to a mental health service following identification
- Of students screened, how many screened for [specific mental health areas]

Funding and Sustainability



- Use multiple and diverse funding and resources to support full continuum of school mental health
- Leverage funding and resources to attract potential contributors
 Have strategies in place to retain staff
- Maximize expertise and resources of partners to support ongoing
- professional development
- Have funding and resources to support:
- · Tier 1 (mental health promotion) services
- Tier 2 (early intervention) services
- Tier 3 (treatment) services
- · Maximize reimbursement for eligible services

Impact

- · # of students who
- Were eligible to receive Tier 2 or Tier 3 school mental health services
- Received at least one Tier 2 or Tier 3 service
- Demonstrated documented improvement in educational functioning
- Demonstrated documented improvement in social, emotional and
- Use best practices to
- · Document impact on educational outcomes
- Document impact of social, emotional, and behavioral outcomes
- Disaggregate student mental health service and support data to examine
- student-level outcomes based on sub-population characteristics
- Document and broadly report the impact of your comprehensive school mental health system

For a full copy of the school mental health national quality assessment, visit www.theSHAPEsystem.com



Take a Tour

SHAPE delivers the tools you need to improve your school or



SHAPE helps districts and schools improve their school mental health systems! HOW?













SHAPE Features









School Mental Health



8x more likely 0 0 0 0





Put your star on the map

112 school districts





School Health Assessment and Performance Evaluation (SHAPE) System www.theSHAPEsystem.com

SHAPE helps districts and schools improve their school mental health systems! HOW?



SHAPE users map their school mental health services and supports



Assess system quality using national performance standards



Receive custom reports and strategic planning guidance and resources



Utilize additional SHAPE features including the Screening and Assessment Library and Trauma-Responsive Schools Assessment and Resources



Use state and district dashboards to collaborate with schools in your region

The SHAPE System





Sign Up



School Health Assessment and Performance Evaluation System



Home

About Us

Sign up

Log in



Overview Page



♠ School Mental Health Profile

Responsiveness

Schools

My District Account

JEFFERSON UNITED





Welcome to SHAPE! Explore all that SHAPE has to offer to improve your district's school mental health system.



School Mental Health Profile

Teams are encouraged to start with The School Mental Health Profile, which asks about the structure and operations of your school mental health system. This Profile is part of the National School Mental Health Census, an effort to capture the status of school mental health nationally.



Quality Assessment

The Quality Assessment will help your team assess the quality of your school mental health system based on seven domains. Teams receive a custom report based on responses.



Resource Center

The Resource Center includes publicly available resources selected by school mental health experts. The library is divided by key components of a comprehensive school mental health system. Teams are encouraged to use custom reports from the Quality Assessment to navigate the resource library and guide the selection of appropriate resources.



Screening and Assessment Library

The Screening and Assessment Library offers an extensive list of free and low-cost measures related to school mental health.



Trauma Responsiveness

The Trauma Responsive Schools Implementation Assessment (TRS-IA) is an evidence-informed self-assessment. Feedback reports and comprehensive guides will be generated to support schools and districts as they work to enhance their trauma-responsive programming.



My Schools

View data related to school mental health from schools in your district in the My Schools tab.

Quality Assessment

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The School Mental Health Quality Assessment

is designed for teams to assess the comprehensiveness of their school mental health system and to identify priority areas for improvement. The Quality Assessment is comprised of seven domains (Teaming, Needs Assessment/Resource Mapping, Screening, Mental Health Promotion, Early Intervention and Treatment, Funding and Sustainability, Impact). Your team will receive custom reports as you complete each domain.

Instructions Printable Version Sample Reports



My Progress



Current Report Priod: September 2018 - June 2019 Change Remand Period 2

■ Summary Report



Teaming New Paper

Take Survey View Report

Last completed on: 09/27/2019 Completed by 1 person.



Take Survey View Report

Last completed on: 10/15/2019 Completed by 3 people.



Last completed on: 09/27/2019 Completed by 1 person.



Take Survey

ey View Report



Take Survey

Early Intervention and Treatment Services & Supports

View Report

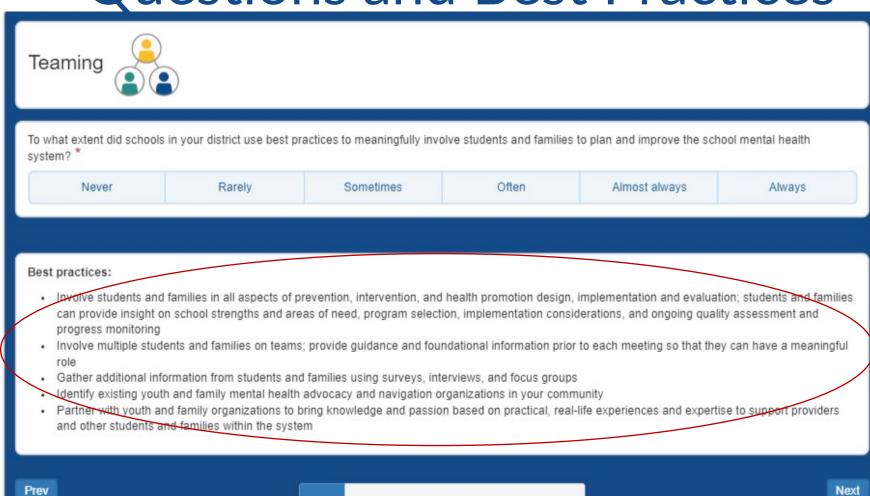
Last completed on: 09/27/2019 Completed by 1 person.



Last completed on: 09/27/2019 Completed by 1 person.



Questions and Best Practices



Domain Reports

Download as PDF



Teaming

Reporting Period: September 2018 - June 2019 Date of Report: 10/07/2019 Entered By: 2 Users

About Teaming

School districts are in the position of ensuring that school mental health efforts are appropriately staffed and supported by multidisciplinary teams that have effective communication and collaboration practices. Many schools have teams that meet to discuss and strategize about student mental health issues. Schools may have one team devoted to the full continuum of mental health supports (mental health promotion to early intervention and treatment) or they may have multiple teams that address different parts of the continuum (e.g., school climate team, student support team, Individualized Education Program team, intervention/fertiary care team, Tier 2/3 team, any other team that addresses student mental health concerns).

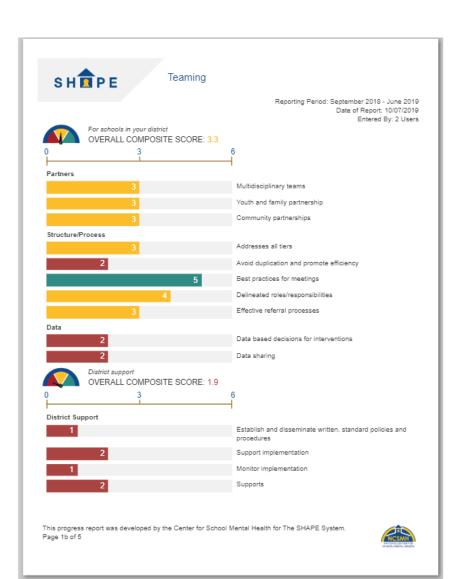
Need resources? The SHAPE Resource Library offers a wide variety of tools and resources to help your team improve your school mental health system. The library is organized by Quality Domain to help you locate exactly what you need.

For example, to find resources related to forming a multidisciplinary team or partnerships with the community and youth and families, select "Teaming" in the resource library and filter by "Partners."

The district team who completed this assessment reported the following information about the quality of teaming in your schools:

This progress report was developed by the Center for School Mental Health for The SHAPE System. Page 1 of $5\,$





Strategic Planning Guide



Strategic Planning Guide

The following pages can be used as tool to plan your next steps for this domain. We encourage you to complete this with your team.

Please state a specific goal within this domain. (For example, for the Teaming domain, one goal might be that the school mental health team will better collect and use data to identify students who need mental health support.)

GOAL:	

How will you know if you've achieved success within this goal? (For example, for the Teaming domain and your goal is to better collect and use data to identify students who need mental health support, one way of measuring success might be that by the next academic school year, the school mental health team will review student mental health screening data for the entire student body twice per year to identify students in need of services and make a plan for meeting those needs.)

INDICATOR OF SUCCESS:

What opportunities exist related to this goal?

- · What have been our past successes?
- · What current work is taking place related to this goal?
- · What are our available resources (leadership, infrastructure, staffing, partnerships)?

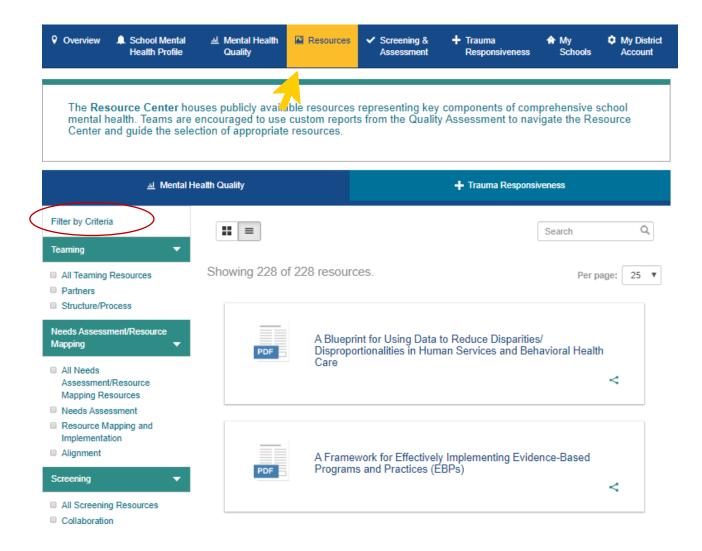
What barriers exist related to this goal?

- · What would prevent us from moving forward with this goal?
- · What would we need to overcome this/these barrier(s)?

This progress report was developed by the Center for School Mental Health for The SHAPE System. Page 2 of 5



Resource Library



National Center for Safe Supportive Schools (NCS3)

A Category II Center within the National Child Traumatic Stress Network

Our Mission

Provide states, districts, and schools with the knowledge and tools to implement culturally responsive, trauma-informed policies and practices that promote equity and well-being.



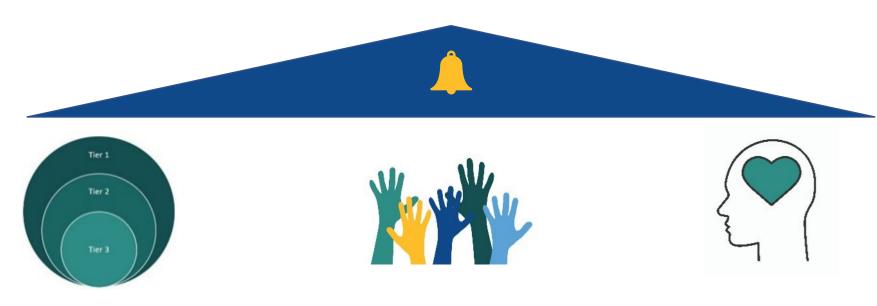








Safe Supportive Schools are:



Comprehensive School Mental Health Systems (CSMHS)

Culturally Responsive,
Anti-Racist
and Equitable (CARE)

Trauma-Informed/ Healing-Centered



What is CARE in Schools?

<u>C</u>ultural Responsiveness

Students', families', and educators' cultural references are included in all aspects of schooling, including supports and services that promote well-being and mental health

Anti-Racism

Actively and intentionally promoting school policies and practices that lead to equity and oppose racism and other forms of oppression

Equity

Ensuring that every
student has what they
need to achieve
academically and
experience positive
mental health and wellbeing



Why CARE in Schools?

- Students are harmed by social injustices in schools
- The humane response to injustice in schools is CARE

Embrace cultural differences

Build on all students' cultural knowledge

Mediate power imbalances

Dismantle systems of injustice





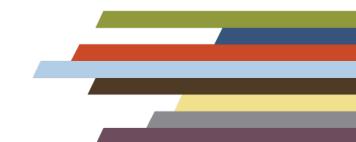


Module 6: Early Intervention and Treatment (Tiers 2/3)

National School Mental Health Best Practices: Implementation Guidance Modules for States, Districts, and Schools

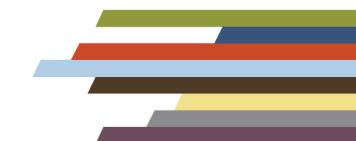
What Is Mental Health Early Intervention?

Strategies designed to address mental health concerns for students who have been identified through a systematic, equitable process as experiencing mild distress or functional impairment, or being at risk for a given problem or concern.



What Is Mental Health Treatment?

Strategies designed to address mental health concerns for students who are already experiencing significant distress and functional impairment.



Quality Indicators

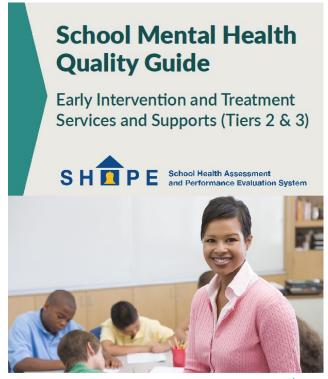
- Provide access to needed services and supports.
- Determine whether services are evidence-informed.
- Ensure all services and supports are evidence-informed.
- Ensure fit with strengths, needs, and cultural and linguistic considerations
- Ensure adequate resources for implementation.
- Provide interactive training and ongoing supports.
- Monitor fidelity.
- Ensure intervention goals are SMART.
- Monitor student progress across tiers.
- Implement a systematic protocol for emotional and behavioral crisis response.

School Mental Health Quality Guide: Intervention and Treatment Services and Supports (Tiers 2 & 3)

Provides guidance to advance school mental health quality and sustainability

Includes:

- Background
- Best practices
- Action steps
- Examples from the field
- Resources







NCSMH, 2020

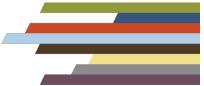


Quality Indicator

To what extent did your district/school determine whether early intervention and treatment (Tiers 2 and 3) mental health services and supports are evidence-informed?

CARE Best Practices

- Create an intervention selection committee with diverse stakeholders.
- Use resources that center and affirm the identities of individuals from groups that have been historically marginalized.
- When selecting an intervention consider:
 - Effectiveness and outcomes with intended population
 - Settings
 - Cultural responsiveness
 - Effectiveness with diverse groups
 - Effectiveness at reducing disparities



Sources of Evidence

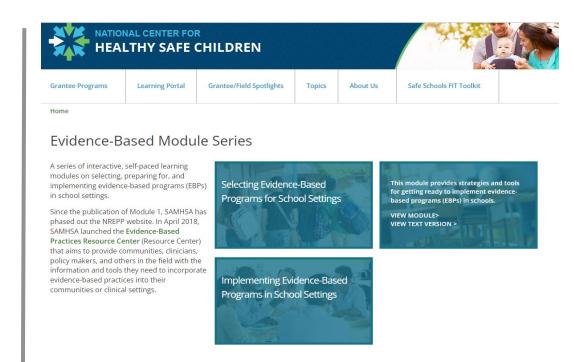
- Research literature
- Intervention developers
- Schools implementing the intervention or practice
- Evidence-based practice (EBP) registries

IES What Works Clearinghouse https://ies.ed.gov/ncee/wwc/

Blueprints for Healthy Youth Development https://www.blueprintsprograms.org/about

Model Programs Guide https://www.ojjdp.gov/mpg

Society of Clinical Child & Adolescent Psychology https://effectivechildtherapy.org/therapies/





This website is operated and maintained by AIR. Contents related to the previous National Center fo Healthy Safe Children, funded by SAMHSA, are made available through this website.

https://healthysafechildren.org/learning-moduleseries/evidence-based-module-series

Applying CARE Strategies



Share in the Chat:

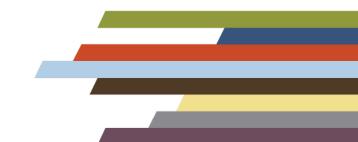
What CARE strategies has your school/district used to determine whether early intervention and treatment (Tiers 2 and 3) mental health services and supports are culturally responsive and evidence-informed?

Quality Indicators

To what extent did your district/school ensure mental health early intervention and treatment (Tiers 2 and 3) services and supports are equitable and fit the unique strengths, needs, and cultural/linguistic considerations of your students and families?

CARE Best Practices

- Collect data on social and cultural demographics
- Create an intervention selection committee with diverse representation.
- Evaluate fit of existing or prospective interventions with respect to the strengths, needs and cultural/linguistic consideration of students, families, and communities to inform adoption, adaptation, or abandonment of interventions
- Collaborate with diverse stakeholders to evaluate fit
- Adapt the practice.



Applying CARE Strategies



Share in the Chat:

What strategies has your school/district used to determine whether early intervention and treatment (Tiers 2 and 3) mental health services and supports are equitable and fit the unique strengths, needs, and cultural/linguistic considerations of your students and families?

Quality Indicators

To what extent did your district/school use best practices to ensure adequate resource capacity to implement mental health early intervention and treatment (Tiers 2 and 3) services and supports?

CARE Best Practices

- Evaluate staffing capacity including staff training requirement, qualifications, and staff time needed
- Evaluate staff expertise in implementing
 Tier 2/3 interventions that are culturally responsive, anti-racist and promote equity
- Evaluate implementation supports
 (ongoing training, coaching, peer support, supplies) needed to implement services and supports with fidelity and in a way that promotes cultural responsiveness, antiracism and equity



Applying CARE Strategies



Share in the Chat:

What strategies has your school/district used to ensure adequate resource capacity to implement mental health early intervention and treatment (Tiers 2 and 3) services and supports?

Quality Indicators

To what extent did your district/school support training/professional development, including ongoing implementation supports such as coaching for early intervention and treatment (Tiers 2 and 3) services and supports?

CARE Best Practices

- Provide interactive training.
 - Skills practice, role plays, and action planning.
- Provide ongoing support for implementation.
 - Regular coaching, consultation, or supervision that includes skills practice, role plays, and corrective feedback.
 - Fidelity monitoring and feedback processes.
- Ensure trainings integrate principles of cultural responsiveness, anti-racism, and equity

Applying CARE Strategies



Share in the Chat:

How has your school/district supported training/professional development, including ongoing implementation supports that focused on CARE strategies?

Quality Indicator

To what extent did your district/school implement a systematic protocol for emotional and behavioral crisis response?

CARE Best Practices

- Develop a protocol for emotional and behavioral crisis response.
- Provide training about the specific types of behaviors, traumatic events or crises that would warrant a referral for a crisis response
- Include guidelines and procedures for contacting the caregiver/guardian, providing feedback to teachers and school staff, and supporting a student's successful transition back to class.
- Integrate restorative practices when addressing emotional and behavioral health crises.
- Limit involvement of law enforcement in punitive discipline, and eliminate exclusionary disciplinary practices when possible
- Use best practices for assessing the impact of the student's unique cultural norms and linguistic or communication styles on the student's behaviors to inform decisions about follow-up and/or referral
- Integrate crisis prevention and de-escalation techniques that are trauma-informed and healing centered.



Suicide Prevention in Schools

- Background and prevalence
- Suicide risk factors
- Role of school in suicide prevention and postvention
- Resources







Suicide Prevention In Schools

By Maureen Underwood, LCSW, CGP

Any school that has been touched by a student suicide is aware of the tragic reality of the national statistics surrounding suicide. Suicide has become the second leading cause of death for youth aged 10 to 24. In 2014. the Centers for Disease Control and Prevention (CDC) reported that the suicide rate of middle school students had doubled since 2007, surpassing the rate of those aged 10 to 14 who died in car crashes.1

The pervasiveness of suicidality in youth is captured more directly every other year by the CDC in its Youth Risk Behavior Survey (YRBS). This survey provides data representative of 9th through 12th grade students in public and private schools throughout the country. It monitors health-risk behaviors that contribute to the leading causes of death, and it provides some insight through anonymous reports by students of risky

Consider, for example, the 2017 YRBS data on four survey questions that deal specifically with suicide risk2:

QUESTION	PERCENTAGE YES
During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?	29.9%
During the past 12 months, did you ever seriously consider attempting suicide?	17.7%
During the past 12 months, did you make a plan about how you would attempt suicide?	14.6%
During the past 12 months, did you attempt suicide one or more times?	8.6%

These troubling statistics tell us that at any point in an academic year, a significant percentage of students sitting in classrooms across the country are having thoughts of suicide. What we do not necessarily know is who these children are, when they first have



passive thoughts of death, or what the prevalence of suicidal thoughts are in vounger populations. We also need additional research on the predictors of first attempts that may lead to suicide death, as well as a better understanding of why suicide risk escalates so dramatically during the transition from childhood to adolescence (REF: Glenn & Nock). These questions highlight the need for a better understanding of the behavioral health challenges that can lead to thoughts of suicide and their interactive effect on worsening

Although there are many unanswered questions about suicide risk in youth, recent data does suggest an association between suicidality and academic outcomes. Data from the 2015 YRBS shows that students with higher academic grades are less likely to consider or attempt suicide compared to students with lower grades. For example, 23% of high school students with mostly A's indicated that they had experienced a sustained period of sadness (over two weeks) that had caused them to change their usua activities; in comparison, 47% of students with mostly D/F's responded that they had experienced such a period of sadness. Only 14% of students with mostly A's seriously considered attempting suicide (guestion 3)

Applying CARE Strategies

Share in the Chat:

How has your school/district implemented a systematic protocol for emotional and behavioral crisis response that is grounded in CARE principles?





Q and A

Please Share Your Feedback!

https://ttc-gpra.org/P?s=743184

