Integrating School Mental Health: Lessons Learned from Three Federal Model Demonstration Projects

Eo3: International Association for Positive Behavior Support 20th Annual Conference

March 20, 2023

Jacksonville, FL

Today's Objectives



- Share lessons learned in pilot year across three funded model demonstration projects
- Synthesize findings in context of practical examples and implementation guidance

TECHNICAL ASSISTANCE AND DISSEMINATION TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES PROGRAM –

Model Demonstration Projects to Enhance Social, Emotional, and Mental Health Services and Supports for Middle or High School Youth with and at Risk for Disabilities

(CFDA 84.326M, Absolute Priority 2)

2021 - 2026

3 awards



Purpose of the OSERS Program

- To establish and implement an evidence-based integrated school mental health program to enhance social, emotional, and mental health services and supports in middle school or high school settings to support youth with and at risk for disabilities.
- Determine how aspects of the models can:
 - be delivered remotely to increase access to mental health services and supports, either due to lack of access or during disasters;
 - focus on integrating prevention, universal screening and targeted interventions in a school-based setting; and
 - increase the capacity of schools to connect students with mental health providers and specialized mental health professionals.

Projects



- expanding school and community interagency coordination to be inclusive of family partnerships
 - One middle school in a district in 3 states across the Midwest and Northeast



- equitable screening and outcome monitoring
 - 3-4 middle schools in one district in the Southeast



- implementation in high school special education settings
 - 3 high schools in one district in the Pacific Northwest



Model Demo APBS March, 2023





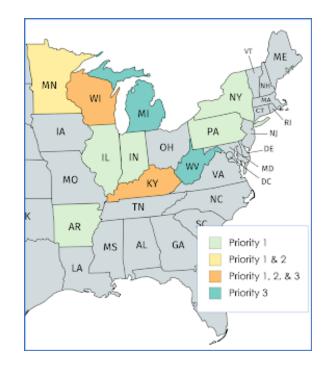
About Midwest PBIS Network

http://www.midwestpbis.org/about

The Midwest PBIS Network (MWPBIS) is a national research, grant, and direct-funded organization housed at West 40 ISC #2 in Illinois.

Our primary charge is to function as a TA hub of the <u>Center on PBIS</u>, a national technical assistance partnership funded from the U.S. Department of Education to assist state departments of education in building their capacity for installation, fidelity, outcomes, and sustainability of Positive Behavior Interventions and Supports (PBIS).





Project EPIC – What is it?

- ➤ Title: Enhancing Family-School-Community Partnerships through an Interconnected Systems Framework Collaboration
- > Funding: USDOE OSEP (Office of Special Education Programs)
- ➤ Model demonstration of the Interconnected Systems Framework in "real world" settings with a focus on Family-School-Community Collaboration
- Five year project with focus on outcomes within four middle schools across three states (IL, WI, NY)
- > Build capacity within districts to sustain the work
 - ➤ Illinois Suburban District
 - Wisconsin Urban District
 - ➤ New York Rural District

EPIC Logic Model:

ISF for Community Mental Health Partnerships in Schools

EPIC Project Goal:

Install and refine ISF, noting conditions that positively and negatively affect installation and outcomes across settings.

Activities

Training and Technical Assistance for implementation and sustainability planning

Resources

(Personnel and materials) needed for model site demonstration(s)

> ISF (PBIS/SMH) Curriculum

Tiered Framework Implementation Support

Outputs/ Recipients of Services

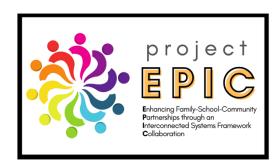
- School/Agency Personnel
- 2. Students
- 3. Families

Leading Outcomes

- 1. Student, Family, community mental health engagement and participation
- 2. Fidelity of implementation
- 3. Student social, emotional, and behavioral functioning

Lagging Outcomes

- 1. Student mental health
- 2. Student academic achievement
- 3. Teacher selfefficacy
- 4. Decreased teacher burn-out
- 5. School climate
- 6. Organizational health

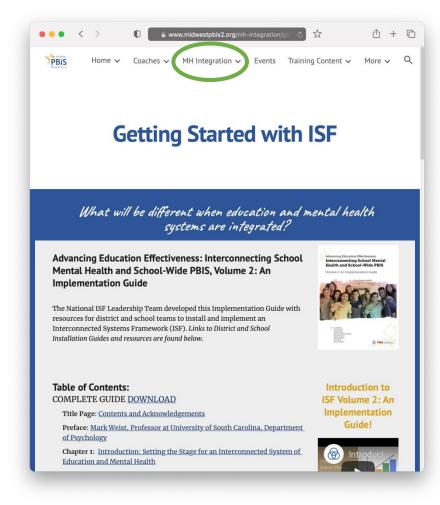


What are we *really* talking about?

- Examining existing initiatives, practices, school/community data and partnerships with community providers and families
- Finding opportunities for alignment, integration, and even potential elimination
- "working smarter, not harder" this is NOT a new initiative



Interconnected Systems Framework Defined



- Structure and process 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.

An Interconnected System Framework *Applies MTSS*Features to all A-SEB Interventions

- 1) **Effective teams** that include community mental health providers
- 2) Data-based decision making that include school data beyond ODRs and community data
- Formal processes for the selection & implementation of evidence-based practices (EBP) across tiers with team decision making
- 4) **Early access** through use of comprehensive screening, which includes internalizing and externalizing needs
- 5) Rigorous **progress-monitoring** for both fidelity & effectiveness of all interventions regardless of who delivers
- Ongoing **coaching** at both the systems & practices level for both school and community employed professionals

Advantages of Implementing an ISF (What will be different)

- Move from co-located to single system of delivery for all s-e-b support
- Deliberate application of PBIS for all social-emotional-behavioral interventions
- Aligning all related initiatives through one system at the district and school level
- Active participation of Family and Youth
- Moving from a co-located school mental health model to an integrated model
- All social-emotional-behavioral interventions are designed, delivered, and monitored through one set of teams
- Clinicians actively participate in teams, share data and are part of system problem solving
- District/community leadership team and identified coaches (from both education & mental health) support efforts within the schools

ISF DCLT Installation Guide

Purpose: This guide is intended to be used by facilitators and coaches to support District/Community Leadership Teams to install structures/systems needed to support an Interconnected System Framework (ISF). The goal is for teams to examine current system using installation activities and generate actions to move toward a more efficient and effective service delivery model.

Step 1: Establish a District/Community Executive Leadership Team											
Features	Installation Activities	Action Needed:	By Who? By When?								
Representative DCLT team identified. • Provide authority and problem solving needed to overcome organizational barriers and implement the efficiencies needed to functionally interconnect education, behavioral and mental health supports. • Present concerning data and needs to those with authority and propose a way of working.	 Assess current teaming structures. Identify need for new team or expansion of existing team 										
	Review current partnerships and service agreements with community partners and/or in area. Executive level leadership from each organization are part of the team.										
	Establish team operating procedures (e.g.: time for team to meet at least quarterly, roles for team, process for forming agenda, etc.)										

Guiding Questions:

- · Which voices with social-emotional-behavioral health expertise within school system could benefit this team?
- · Which voices of mental health, juvenile justice, core service agency partners could benefit this team?
- In what ways are we ensuring that multiple stakeholders' voices (i.e.: staff, MH agencies, parents/families, students, etc.) will stay at the table through the development of systems and overall implementation?

ISF Initiative Inventory

ISF V2 Ch4: State/District Level Installation Guide (in press) - Step 2b: Conduct a Review of Current Initiatives

Purpose of this tool is to (a) provide an overall picture of existing social emotional behavioral related initiatives or programs available to the larger community, (b) determine the effectiveness, relevance, and fidelity for each, (c) determine funding and resource allocation, and (d) determine areas of redundancy. This process is led by the District Community Leadership Team with representation from both education and community stakeholders.

Name of Initiative	What is connection to DCLT mission?	What personnel are involved in the implementation?	What is expected outcome?	What evidence of outcomes are there thus far?	What is financial commitment and source of funding?	What fidelity measures exist?	What professional development exists including coaching and performance feedback?

Adapted from NIRN Initiative Inventory

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

- CommunityDemographics
- Food Pantry Visits
- Poverty Rate
- Drug Addiction Rates
- Calls to crisis centers, hospital visits
- Screening at multiple views

Building Level Intervention Mapping

Use the table below to identify what interventions you have in place at each tier.

	Intervention Map											
	Intervention	Expected Outcome / Need being met	Who Facilitates	Decision Rules (In, On, Out)	How many students participate	How many made progress	Is intervention an EBP	Is intervention implemented with fidelity				
Tier 1												
Tier 2												
Tier 3												

Successes



- District and Community Leadership Teams are forming and working through steps in the installation process in an effort to support the successful implementation within the schools
- Baseline data has been collected for evaluation and action planning purposes
- Products have been developed to enhance shared understanding among family-schoolcommunity groups
- Coaches have been identified in two of the sites who are supporting efforts along side our team

Date of Update Update Leaders	Step 1: Establish a					Step 4: Establish DCLT Procedures and Routines				Step 5: Establish action plan to support demonstration sites					
	District/Co mmunity Executive Leadership Team	Step 2a: Assess current structures	Step 2b: Conduct a review of current initiatives	Step 2c: Conduct staff utilization review	Step 2d: Review existing school and community data	Step 3: Establish common mission	Step 4a: Selecting and installing a universal screener	Step 4b: Establish the request for assistance process	Step 4c: Process for selecting interventions	Step 4d: Process to monitor fidelity of interventions	Step 4e: Process to monitor outcomes of interventions	Step 5a: Evaluation Plan	Step 5b: Professional Development and Coaching	Step 5c: Selecting Demonstratio n Schools	Step 5d: Finalizing MOU
12/16/22	Partially In PI	Partially in pl: ▼	Partially in pl: *	Getting starte ▼	Partially in pl: ▼	In place - DC	Not started 💌	Not Started - 🔻	Not started 💌	Not Started *	Not Started 💌	Getting start€ ▼	Getting starte ▼	In Place - De 🔻	Getting starte ▼
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Challenges



- 3 out of 4 schools had a change in building principal from last school year to this school year
- Identifying family members to join teams has been a challenge, outside of people in paid positions (i.e., family liaison)
- Because of competing priorities within schools around recovery from the pandemic, timelines have been substantially slower than anticipated

How we are addressing the challenges:

- Using readiness/exploration activities while simultaneously meeting the schools/districts where they are at to help them see the value added of systems change
- Providing technical assistance to leaders that adds to collective commitment of the work, rather than "one more thing" because of an agreement within a grant
- Using existing resources and tools to "stay at the table" and solve challenges, rather than
 maintain the status quo. For example, we know family-school-community partnerships are
 "hard" it's why we wanted to focus on it for this project!

Want more information:

• www.pbis.org

• www.midwestpbis.org

Thank you for your time and commitment to this important work!



Interconnecting School Mental Health and Positive Behavioral Interventions and Supports to Improve Middle School Students' Academic, Social, Emotional, and Behavioral Outcomes

Our Team





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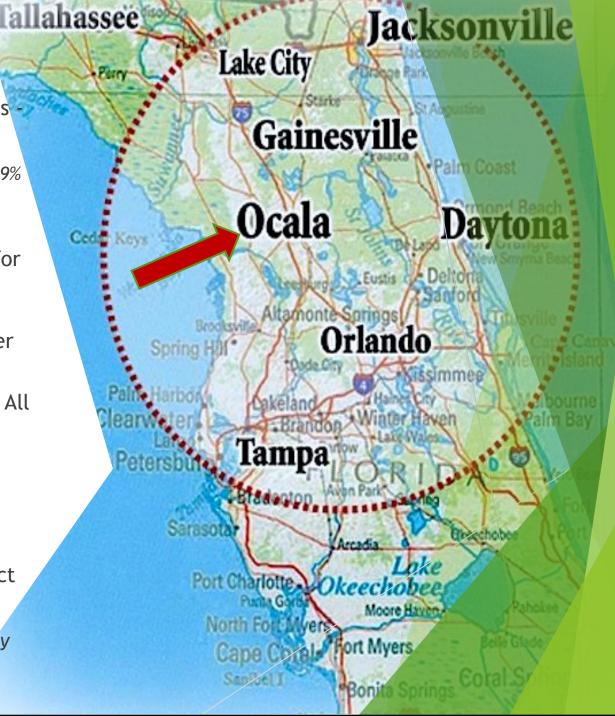
Marion County Public Schools

"Helping Every Student Succeed"

Candice Scott, EdS Amanda Steckman Yvette Del Nodal, PsyS, EdS Jonathan McGowan

Marion County Schools

- ► 5th largest FL county many families living in rural areas 74.8% of MCPS students are economically disadvantaged
- Large district with 41,177 students enrolled approx. 46.9% white, 19.9% AA, 25.6% Hispanic, 5.3% multi-racial, 15% SWDs
- ► Marjory Stoneman Douglas High School Public Safety Act (2018) MCPS Mental Health Assistance Allocation Plan for elementary schools includes (a) full continuum of SEB promotion, prevention & intervention programming, (b) with school-based teaming structure including mental health clinicians from community agencies working under collaborative MOU, and (c) data-based decision making inclusive of universal SEB screening (only targeted SEB screenings completed upon referral for middle schools). All MCPS personnel trained in YMHFA.
- ► All school teams trained by <u>FLPBIS:MTSS Project</u> in Tier 1
- ► Florida site for completed ISF RCT funded by NIJ
- Existing DCLT with school psychologist serving as DC to support district-wide PBIS implementation and FL Connect participating middle schools
- Supportive Local Community Organizations Marion County Children's Alliance, Lutheran Services Florida Health Systems, Marion County Sheriff's Office, and Public Policy Institute



Purpose

- Implement the multi-tiered, ISF in 3-4 middle schools (2 rural) implementing PBIS with fidelity to improve efficiency and effectiveness of mental health services to enhance SEB and academic functioning for youth with and at-risk for disabilities, and/or minoritized backgrounds.
- Gain knowledge in how to best integrate educational and mental health systems - move away from ad Hoc involvement of mental health systems in schools.
- Produce positive student outcomes and with a cost analysis, help inform dissemination efforts for replication and scale-up.



Goals



1

Develop a collaboratively facilitated Interconnected Systems Framework (ISF) for prevention and intervention of social, emotional, and behavioral (SEB) concerns.

2

Increase the number and fidelity of supports provided to address a range of SEB concerns for youth with or atrisk of disabilities.

3

Increase positive outcomes for youth receiving interventions addressing SEB concerns, including those with disabilities and/or from racial/ethnic minoritized backgrounds.

4

Develop a completely replicable model of ISF to achieve the positive outcomes for SEB identified in Goals 1-3.

Goal 1:

Develop a collaboratively facilitated Interconnected Systems Framework (ISF) for prevention and intervention of social, emotional, and behavioral (SEB) concerns

Goal 2:

Increase the number and improve fidelity of supports provided to address a range of SEB concerns for youth with or at-risk of disabilities

Goal 3:

Increase positive outcomes for youth receiving interventions addressing SEB concerns, including those with disabilities and/or from racial/ethnic minoritized backgrounds

Goal 4:

A completely replicable model of ISF for dissemination to achieve the positive outcomes for SEB identified in Goals 1-3

- 1.1 Increase collaboration and interagency coordination between school and community mental health professionals.
- addressing SEB that are implemented with fidelity.

2.1 Increase the number of school-wide

prevention program and practices

2.2 Increase the number of targeted

and individualized interventions

addressing SEB that are implemented

with fidelity.

2.3 Increase the number of

individualized interventions addressing

SEB delivered by community agencies

that are implemented with fidelity.

- 3.5 Increase the number of students receiving advanced tiers of support for SEB who are experiencing positive outcomes.
- 3.6 Increase the number of students reaching minimal reading proficiency.

1.2 Implement an ISF with fidelity.

1.3 Increase staff and community agency knowledge, understanding, and ability to apply a multi-tiered support for SEB via an ISF.

1.4 Increase youth and their family members' positive perception of the supports available to prevent and address SEB.

- 3.1 Increase the proportion of students participating in universal SEB screening.
- 3.2 Increase the number of students receiving advanced tiers of support for SEB from school or school-based MH provider whose progress and outcomes are monitored by ISF teams.
- 3.3 Increase the number of students receiving individualized support for SEB from community agencies whose progress and outcomes are monitored.
- 3.4 Increase the number of students with positive SEB screening scores receiving advanced tiers of support.

4.1 Develop a cost analysis of the fully developed model and its implementation, including the resources used by the model and their actual or estimated costs.

4.2 Develop tools, guides, and other necessary resources to assist other LEAs and schools in replication of ISF model successfully implemented in model demonstration.

4.3 Disseminate tools, guides and other resources to TA Centers, Annual Conferences, state agencies, organizations, and other outlets identified by Advisory Board, and publish findings in journals.





Timeline of Activities

(1) Conduct assessments on collaboration, district data systems, PBIS, school practices, Changing Roles of Staff District Level Discussion Guide, Intervention Mapping *Tool*, continuum and methods used, Working Smarter Not Harder Tool, stakeholder data for intervention needs. and status of Florida SB 7206; (2) Build DCLT and establish MOUs with universal screening practices; (3) Recruit up to two schools to serve as pilot sites; and (4) Biannual **Advisory Board** meeting.

Phase 2: Pilot (June 22-May 23)

(1) Train and coach on *ISF*, *RtI:B Database*, and aligning teams with ISF tiers; (2) Administer *ISF-II* in fall/spring, universal screening, EBPs; (3) Support required 5-hour SEB instruction; (4) DCLT meetings quarterly; (5) Compile formative evaluation results on pilot phase of ISF installation; and (6) Biannual Advisory Board meeting.

After structured problem solving of pilot for continual improvement: (1) Train and coach on ISF, RtI:B Database, and aligning teams with ISF tiers; (2) Administer ISF-II in fall/spring, universal screening, EBPs; (3) Support required 5-hour SEB instruction; (4) DCLT meetings quarterly; (5) Compile formative evaluation results on pilot phase of ISF installation; and (6) Biannual Advisory Board meeting.

Phase 3: Model Demonstration (June 23-May 25)

Phase 4:
Analysis,
Dissemination
& Scalability
(June 25-Sept 25)

(1) Conduct final analyses for Phase 3 implementation, including summative evaluation, social validation, and cost analysis; (2) Develop guides and tools with stakeholders to finalize dissemination materials for replicability and scale-up; and (3) Continue with schools and DCLT to support ISF sustainability and scaleup in MCPS.

(1) Disseminate practical guides and tools from Phase 4 through established networks of stakeholders; and (2) Collaborate with Advisory Board and SEA to disseminate practical guides and tools to all Florida LEAs aligned with Mental Health Assistance Allocation Plans funded thru Florida SB 7206.

Phase 5: Scale Up (Oct 25-Sept 26)

Phase 1: Readiness (Oct 21-May 22)

Assessing Effectiveness in Improving Capacity

- Continually monitor feedback from LEA and participating schools
- Summarize schools engaging in:
 - (a) interagency teams
 - ▶ (b) effective teaming
 - ► (c) universal screening
 - ▶ (d) established protocols consistent with ISF
 - ► (e) evidence-based practices
 - ▶ (f) progress monitoring
 - ▶ (g) fidelity monitoring
- Examine/summarize student outcomes reported by participating schools



Successes to Date

- Team functioning valued and prioritized
- District coordinators more aware of what's happening in schools
 - re: mental health teams using screening data (or not), intervention needs, TA/coaching needs
- Persisted with screening despite challenges!
 - adapted from teacher-report only to student report in pilot schools
- Completed baseline ISF-II for measuring implementation
- Community mental health providers are attending team meetings
- Persisted with work despite political climate and outspoken groups
- Responded to implementation concerns in one school



Learning Areas to Date

- Schools are learning at different paces!
- District coordinators learning that schools need:
 - 1) training follow-up,
 - 2) some need more support, and
 - 3) support in different areas than others
- More time for training needed and system building, training sequence needs to be fleshed out for entire year, not just at beginning.
- No progress monitoring of implementation is happening at all and very little follow-up to ensure intervention is happening after team plans.



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LESSONS LEARNED

Association for Positive Behavior Supports

March 2023

Jacksonville, Florida

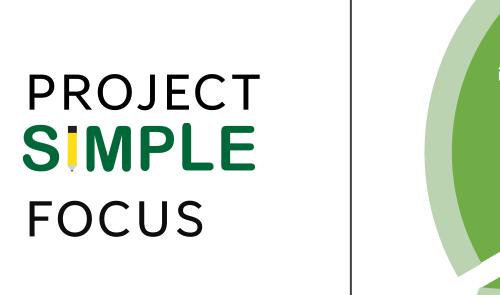
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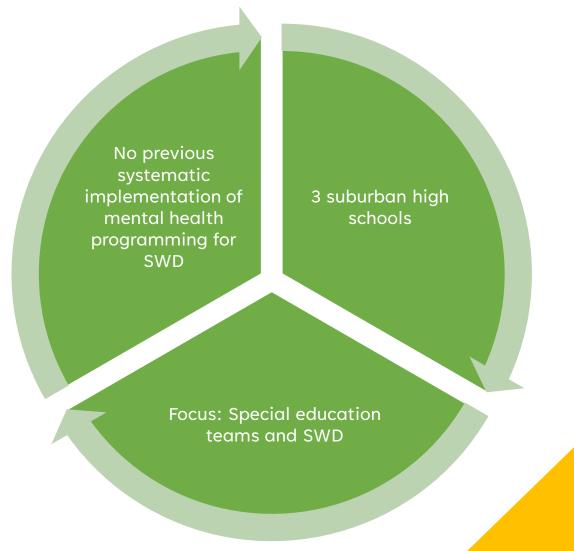
SCHOOL-WIDE INCLUSIVE
MENTAL HEALTH
PROMOTION FOR
LEARNING AND
COORDINATED
COMMUNITY ENGAGEMENT



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PROJECT SIMPLE GOALS -SCHOOLS

Build

 Universal screening that is accessible to students AND feasible for teachers

Fluency

 SPED teams integrate School Mental Health decisions in their team time

Identify

- Professional development needs
- targeted interventions to support students with intersecting needs

PROJECT SIMPLE GOALS COMMUNITY AND FAMILY

Resource Mapping

- Identify community resources that are untapped
- Culturally reflective resources
- Build strong community networks

Family

- Identify family priorities
- Concerns for their students

Integrate

 Connect community and families into school teams to support students

SIMPLE LEARNING AREAS:

LOGISTICS

More time is needed:

- Schools work at different paces
- School teams have limited capacities

Funding and personnel available

Priorities of what and how schools intend to address MH concerns

School needs vs. project resources

Different levels of administrative support

SIMPLE LEARNING AREAS:

PRACTICE

Playing "catch-up" due to school interruptions

Trying to build a sustainable system, not a flash in the pan

Working to address needs of students with disabilities, but with an inclusion lens

Building a universal language

Identifying the "what" of training

SIMPLE SUCCESS AREAS:

LOGISTICS

Screening **Brainstorming** •Schools are ·Roles of school forming or professionals in School teams Implement creative redesigning teams supporting mental solutions for implemented to think about SWD health universal MH students with specific behavioral screening support needs Redesigning Rethinking

SIMPLE SUCCESS AREAS:

PRACTICE

 Empowering to see teams interact with universal mental health screening data for the first time

Data

Eager

 School teams are eager to add to their mental health supports for students with disabilities School teams are excited to make collaborative relationships WITHIN their school building

Collaboration

SIMPLE CURRENT AND FUTURE ACTIVITIES

All three schools have or finishing a threepart needs assessment interview process

Two schools have one round of screening, plan to screen in Spring for all three schools

Community organization interviews

Listening sessions for families

Focus groups with students and teachers

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Contact Us!

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