



Pacific Southwest (HHS Region 9)

Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network
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- All attendees are muted
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Get to know the Zoom Webinar interface

The screenshot shows the Zoom Webinar interface with several annotated features:

- Top Bar:** Includes "You are viewing David Terry's screen" and "View Options".
- Session Controls:** Buttons for "Click here to maximize your session view" and "Enter Full Screen".
- Q&A Panel:** A "Question and Answer" window with tabs for "All questions (1)" and "My questions (1)". It shows a test question: "This is a test question!" and a text input field "Type your question here...". Annotations explain that users can switch between questions and use the Q&A feature to ask questions of the host and presenters.
- Chat Panel:** A "Zoom Webinar Chat" window on the right. It includes a "To: All panelists" field and a note: "Your text can only be seen by panelists". Annotations explain that the chat feature allows talking with other people and that the "To" field indicates who will receive the message.
- Audio Settings:** A "Select a Speaker" menu in the bottom left with options: "Speakers (Realtek(R) Audio)", "Same as System", "Test Speaker & Microphone...", "Leave Computer Audio", and "Audio Settings...". A button "Click Here to adjust your audio settings" is also present.
- Bottom Bar:** Includes icons for "Chat", "Raise Hand", and "Q&A", along with a "Click here to leave the session" button and a "Leave" button.
- Main Content:** Displays the "TTC Technology Transfer Centers" logo and the message: "Thank you for joining us today! You will not be on video during today's session".



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Interconnected Systems Framework in Virtual Conditions

October 20, 2020

Presented by:

Susan Barrett, MA

Jessica Swain-Bradway, PhD

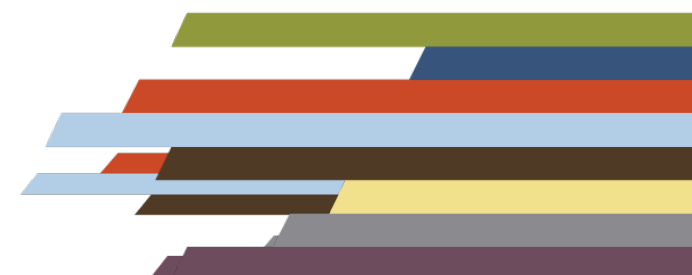
Kelcey Schmitz, MEd

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- All attendees are muted and cannot share video.
- Have a question for the presenters? Use the Q&A
- Have a comment or resource for all attendees? Use the Chat
- We will leave a few minutes at the end to make sure you have all the links and resources you need and to allow time for an evaluation.

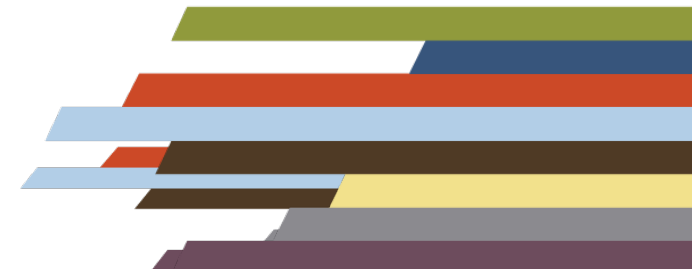
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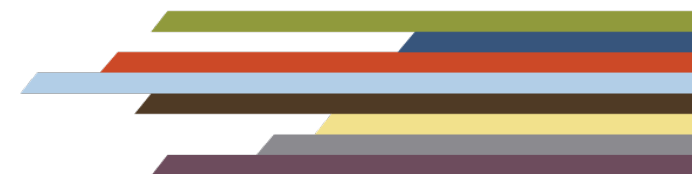
At the time of this presentation, Elinore F. McCance-Katz served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.



Land Acknowledgement

The University of Washington SMART Center and Northwest MHTTC acknowledge that we learn, live, and work on the ancestral lands of the Coast Salish people who walked here before us, and those who still walk here. We are grateful to respectfully live and work as guests on these lands with the Coast Salish and Native people who call this home.

The Pacific Southwest MHTTC is led by the Center for Applied Research Solutions, which has offices across California in Sacramento (the land of the Nisenan people), Santa Rosa (land of eight Cahuilla Bands) and Los Angeles, (land of the Tongva peoples); CARS acknowledges the belonging of this land to the Indigenous people named and the unrecognized tribes and peoples as well.



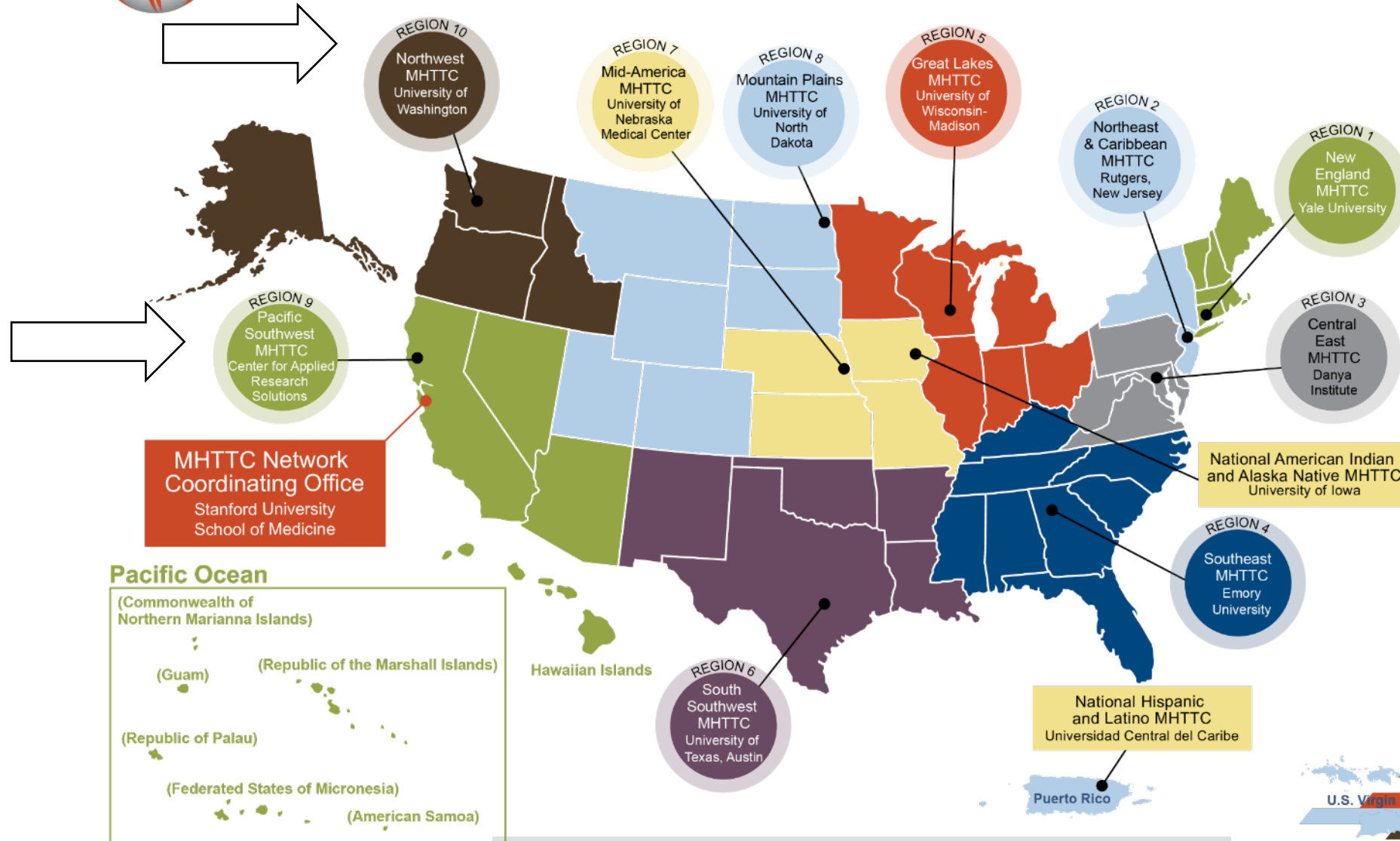
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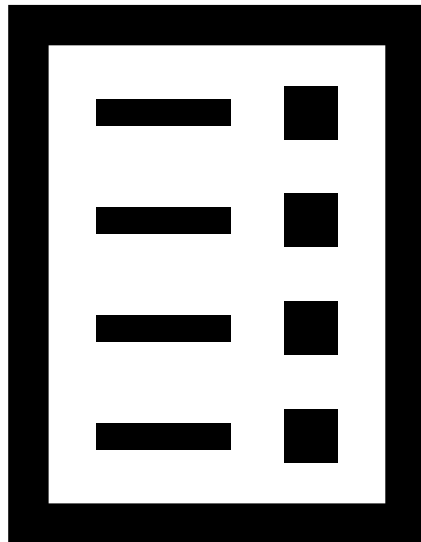
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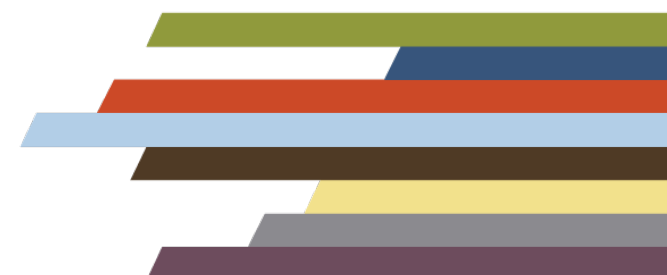


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Event Survey

- Required by our funder
- Used to inform, refine, & enhance future events/activities
- Helps communicate the need for this type of support
- Voluntary and anonymous
- Very important! *We will end a few minutes early and ask that you please take a few moments to complete.*



Quick Review

Interconnected Systems Framework: Fact Sheets and Webinars

bit.ly/ISFwebinars

Fact Sheets Created by the Pacific Southwest MHTTC

Pacific Southwest (HHS Region 9)
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Fact Sheet

INTERCONNECTED SYSTEMS FRAMEWORK 101: AN INTRODUCTION

By SUSAN BARRETT, LUCILLE EBER, KELLY PERALES AND KATIE POHLMAN
OSEP TECHNICAL ASSISTANCE CENTER ON PBIS

In the United States, over 40% of students will have experienced a mental health problem, such as anxiety or depression, by the time they reach seventh grade (SAMHSA, 2016). Suicide is the second leading cause of death among 10-34 year olds (NIH, 2018) and according to the National Survey of Children's Health (2016), 46% of children have experienced at least one Adverse Childhood Experience (ACE). The newest statistics on suicide from the Centers for Disease Control (CDC), along with current rates of substance use, opioid abuse, and electronic aggression are alarming. This public health crisis requires a whole population response. Education and mental health leaders are keenly aware of the need to align structures and establish one comprehensive system of social/emotional behavioral (SEB) supports in schools.

The Interconnected System Framework (ISF) is an emerging approach for building a single system of SEB supports in schools. Integrating Positive Behavioral Interventions and Supports (PBIS) and school mental health, the ISF also brings community partners and families into one multi-tiered structure.

The Pacific Southwest Mental Health Technology Transfer Center (MHTTC), in collaboration with the OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS), has developed a three-part series of fact sheets to deepen knowledge and understanding of the ISF. All three documents provide case examples that highlight the local context in which data-based decision making occurs and reflect the diversity of school communities in the region.

- **Interconnected Systems Framework 101** provides an introduction to Interconnected Systems Framework, including a definition and a review of the benefits.
- **Interconnected Systems Framework 201** describes what will be different for educators and mental health providers when school mental health is integrated into a Multi-Tiered System of Support (MTSS).
- **Interconnected Systems Framework 301** describes how to use school and community data to determine what interventions to select and implement to meet the diverse needs of all students.

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www.pbis.org

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Fact Sheet

INTERCONNECTED SYSTEMS FRAMEWORK 201: WHEN SCHOOL MENTAL HEALTH IS INTEGRATED WITHIN A MULTI-TIERED SYSTEM OF SUPPORT: WHAT'S DIFFERENT

By SUSAN BARRETT, LUCILLE EBER, KELLY PERALES AND KATIE POHLMAN
OSEP TECHNICAL ASSISTANCE CENTER ON PBIS

This is the second of a series of three Fact Sheets on the Interconnected Systems Framework (ISF) developed through a collaboration between the Pacific Southwest Mental Health Technology Transfer Center (MHTTC) and the OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS). The Interconnected Systems Framework (ISF) is an implementation framework developed by national leaders in the fields of PBIS and School Mental Health to advance a more effective and efficient system of social/emotional and behavioral health in schools. Recognizing the shared contributions and value of both PBIS and SMH, the interconnected approach is a process guided by key stakeholders with authority to develop a unified response that specifically addresses the needs of the population they serve. Leaders engaged in this integrated process are guided by the core features of a multi-tiered system of support. The purpose of this series to deepen knowledge and understanding of the ISF by highlighting key features illustrated by case examples that reflect the diversity of school communities in the region and demonstrate how data-based decision making occurs in a local context. This fact sheet will focus on the core features of an ISF approach.

ISF Applies the Core Features of MTSS
The ISF enhances the multi-tiered system of support (MTSS) core features to intentionally include and integrate mental health and wellness. This is accomplished through the inclusion of a broader range of partners, a wider scope of data, and the expansion of interventions to address interrelated mental health issues such as anxiety, depression and trauma. Applying the MTSS features systematically to the expanded continuum of interventions is a deliberate and defining aspect of the ISF process. The following brief provides a short description of how each MTSS feature is enhanced and positioned within the ISF and considerations for getting started.

1. **An Integrated Team Process**
Leadership teams are key to implementation of evidence-based practices (EBPs) in school systems. But too many teams can decrease the system's ability to work efficiently. Since social/emotional health is a critical part of reaching academic outcomes, one of the key elements of effective implementation is to establish one set of integrated teams.

Within an integrated approach, the District and Community Leadership Team makes finding and personnel decisions and explicitly describes the roles and function of teams in a Memorandum of Understanding or service agreement. This allows financial support and district commitment for school and community providers to operate as one team.

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Fact Sheet

INTERCONNECTED SYSTEMS FRAMEWORK 301: INSTALLING AN INTEGRATED APPROACH

By SUSAN BARRETT, LUCILLE EBER, KELLY PERALES AND KATIE POHLMAN
OSEP TECHNICAL ASSISTANCE CENTER ON PBIS

This is the third of a series of three Fact Sheets on the Interconnected Systems Framework (ISF) developed through a collaboration between the Pacific Southwest Mental Health Technology Transfer Center (MHTTC) and the OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS). The ISF is offered as an option to address the inefficiencies of co-located systems and social, emotional, behavioral programs working in isolation. Building on the success of PBIS, the ISF applies the core features of MTSS to deliberately integrate mental health, community, school, and family partners through a single system of support. The purpose of this series to deepen knowledge and understanding of the ISF by highlighting key features illustrated by case examples that reflect the diversity of school communities in the region and demonstrate how data-based decision making occurs in a local context. This fact sheet will focus on the steps to installing an integrated approach at the District/Community Level.

Installation Process:
District and Community Leadership
Adopting and installing an interconnected system ideally involves layered implementation from the state to the local level. This layered implementation happens simultaneously across both state and districts, with school staff providing feedback to district level staff and districts providing input and guidance to state level staff.

- State systems model and support district level alignment efforts.
- Districts organize the partnerships and administrative components needed to guide effective integration at each school building.

Many states also use regional or county structures for providing support to districts engaged in the integration of PBIS and mental health. State, district, and school teams benefit from this symmetry across organizational levels as consistent policy, funding, systems alignment, and workforce structures support a solid foundation for sustainable change. Because the unit of implementation of an ISF is most transformative at the local level, we will detail the installation process at the district/community and school levels. Implementers who have a role at the regional or state level can extrapolate the concepts presented for district/community leaders and apply the logic and the tools within their systems.

The purpose of the installation phase is to discuss or validate resources to initiate innovation. People who have the authority to allocate resources are identified, resources available are catalogued and roles, functions, and needs organizational structures are carefully analyzed.

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Module 1: ISF in Virtual Conditions

- 10/20/20 - ISF Systems in Virtual Conditions
- 10/22/20 - Secondary Traumatic Stress and Educator Well Being

Module 2: ISF + Trauma Informed Approaches

- 10/27/20 - ISF Systems & Trauma-Informed Approaches
- 11/5/20 - Virtual Adaptations of Psychological First Aid
- 11/17/20 - Virtual Adaptations of Trauma Informed Skills for Educators

Module 3: ISF + Tiers 2 & 3

- 12/1/20 - ISF Systems and Tiers 2 & 3
- 12/3/20 - Virtual adaptations of SSET/Bounce Back

Module 4: ISF & Equity

- 1/12/21 - Secondary Traumatic Stress & BIPOC Educator Well Being
- 1/19/21 - ISF Systems & Equity
- 1/21/21 - Racial Violence and Trauma and Schools

ISF West Coast Town Hall

- 1/26/21 - ISF systems & practices in this moment with Susan Barrett & USC Faculty

<https://bit.ly/ISF2021>

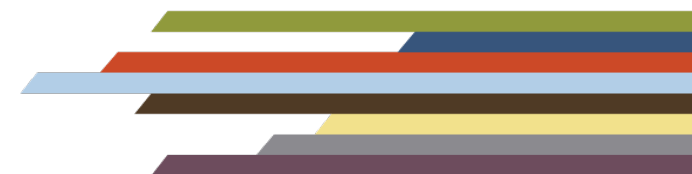


Susan Barrett, MA, serves as a Director for the Center for Social Behavior Supports Center (CSBS) at Old Dominion University and an Implementer Partner with the U.S. National Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS). She assists with large-scale implementation of PBIS; partners with researchers to evaluate the impact of PBIS on students, school staff, and school communities; and serves on the Association of Positive Behavior Supports Board of Directors. She also co-leads the development of the Interconnected Systems Framework, a mental health and PBIS expansion effort. Susan has been published in the areas of large-scale adoption of PBIS, mental health, cost-benefit analysis, advanced tier system development, and adoption of evidence-based practices in schools. sbarrett@odu.edu



Jessica Swain-Bradway, PhD, is the executive director for Northwest PBIS Network. Her work in school-wide positive behavioral interventions and supports (SW-PBIS) and multi-tiered systems of support (MTSS) focuses on equipping teachers with high leverage strategies for instruction, relationship-building, and designing effective learning environments. She has extensive experience supporting districts and states to build capacity for PBIS implementation and working across agencies to maximize resources for developing the organizational health of the school environment. Dr. Swain-Bradway also has expertise aligning restorative practices, mental health practices, including trauma informed care, and academic RtI into the SWPBIS framework.

jessica@pbisnetwork.org



Today's Session

- Process to integrate mental health through PBIS framework
- Use MTSS Core Features to guide process for integration
- Application of MTSS Core Features in virtual conditions

Self Care Expectations

Self Care Behaviors



be

Safe

- Create an emotional support team.
- Double check on friends.
- Ask for help if you feel sense of hopelessness
 - Suicide Hotline: 800-273-8255 or [Dial 988](tel:988)



be

Engaged

- Be aware of your stress level.
- Recognize and name the emotions you are experiencing.
- Pay attention to joy.
- Do a body check for areas of tightness, discomfort.
- Take movement breaks, hydrate.



be

Respectful

- Nurture your body with healthy food.
- Build calming routines for sleep.
- Build routine for daily exercise.

Pre-COVID Mental Health Crisis

- One in 5 youth have a MH “condition”
- At least 50%, perhaps 80%, of those get no treatment
- School is “defacto” MH provider
- Juvenile Justice system is next level of system default
- Suicide is 2nd 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

Disrupt the Status Quo

COVID-19 impacting our black, brown and migrant communities and our vulnerable populations at higher rate than others.

- Rooted in social inequalities (e.g., residential segregation, differential access to healthcare and treatment)

Race is not the risk factor, Racism is the risk factor.

Disrupt the Status Quo: Advancing Racial Equity

- Our students will be walking into our classrooms, sometime soon.
- Are you aware of the persistent racial disparities in health status, access to health care, wealth, employment, wages, housing, income, and poverty?



How will this inform your steps for redesigning a more equitable system of support?

- **Inequities exposed: How COVID-19 widened racial inequities in education, health, and the workforce** Testimony before the U.S. House of Representatives Committee on Education and Labor
- <https://www.epi.org/publication/covid-19-inequities-wilson-testimony/>

Evidence to date suggests that Black and Hispanic workers face much more economic and health insecurity from COVID-19 than white workers.

FIGURE A

A more comprehensive look at skyrocketing unemployment rates

Unemployment rates for Black, Hispanic, and white workers, by gender, February–May 2020

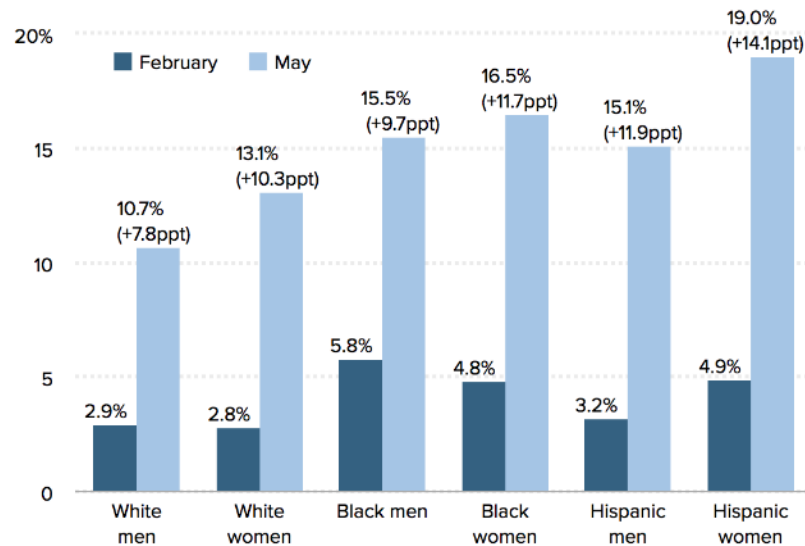


Chart Data

Note: Workers, age 20 years and over.

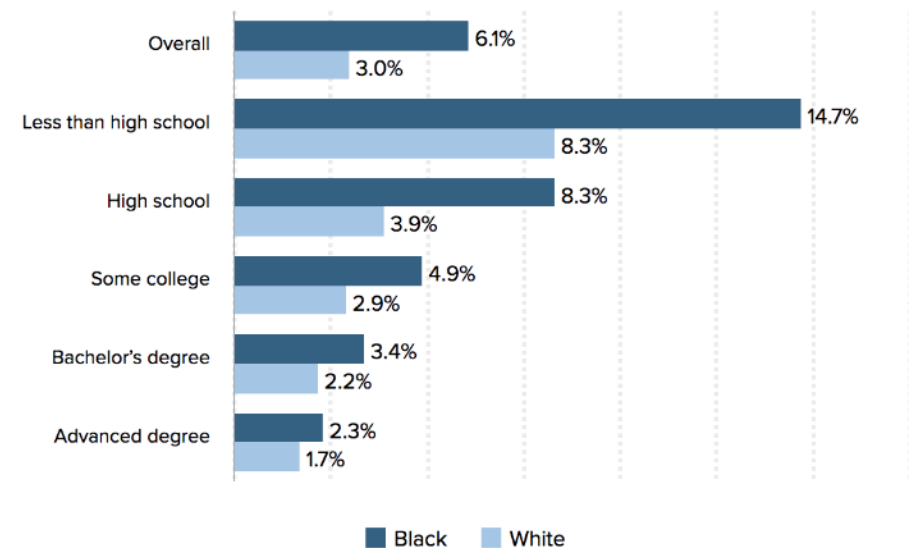
Source: EPI analysis of Bureau of Labor Statistics (BLS) Household Data Tables A-2 and A-3.

Economic Policy Institute

FIGURE B

Black workers are far more likely to be unemployed than white workers at every level of education

Unemployment rates by race and education, 2019



**Statewide High-Level
Analysis of Forecasted
Behavioral Health
Impacts from COVID-19
Washington State
Department of Health,
Updated April 16th, 2020**

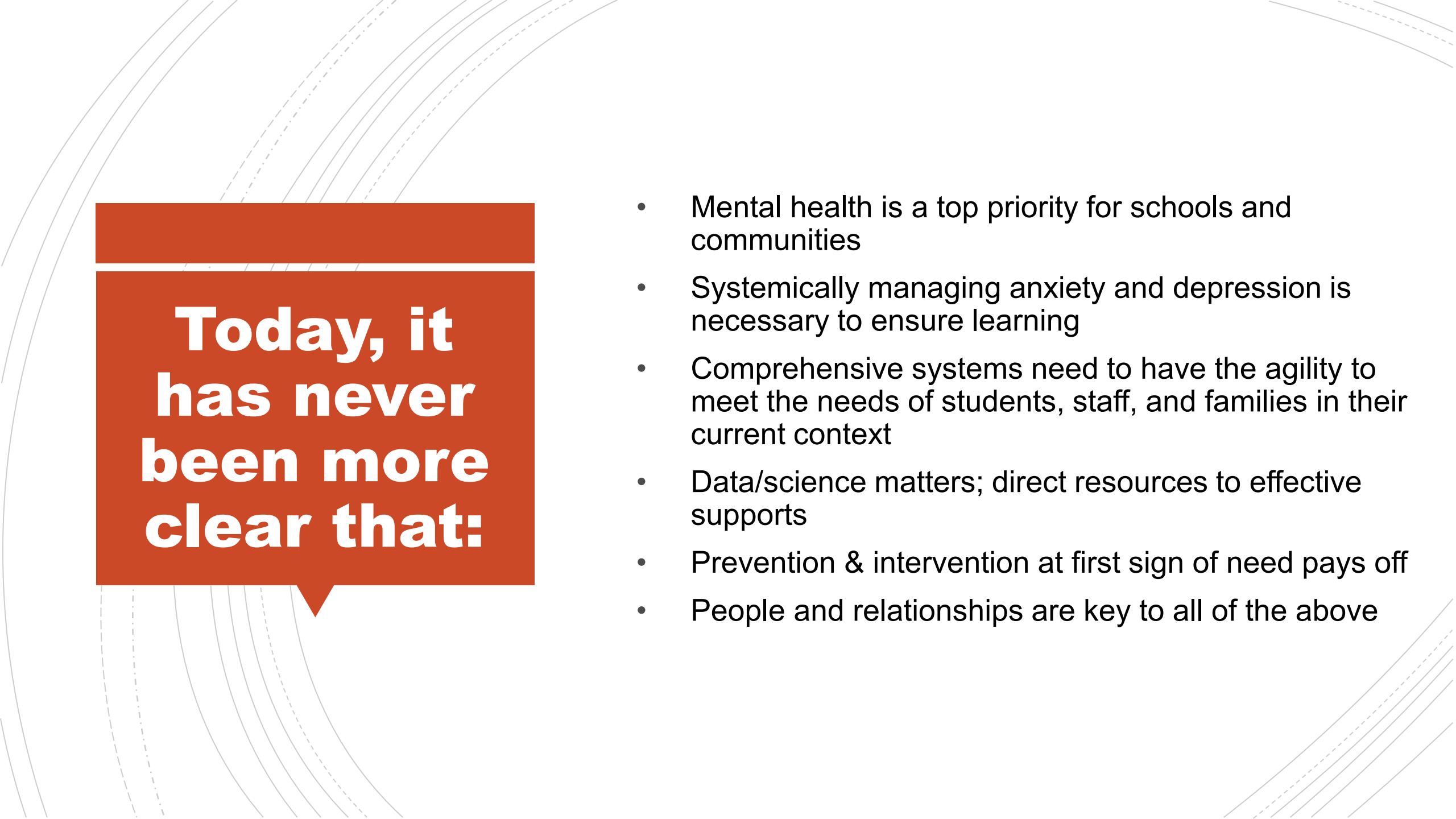
- A surge in behavioral health symptoms; likely to be seen in phases
- Anxiety related issues becoming prevalent immediately through next 2-3 months,
- Increase in depressive symptoms peaking around Nov/Dec 2020 (a second wave);
- Highest risk of suicide likely Oct-Dec 2020
- More people with behavioral health concerns were NOT receiving treatment (approx. 700,000) prior to the outbreak than the # of Washingtonians who were receiving treatment (approx. 695,000)

<https://www.hca.wa.gov/assets/program/covid-19-statewide-summary-forecast-of-bh-impacts-20200624.pdf>

**Statewide High-Level
Analysis of
Forecasted Behavioral
Health Impacts from
COVID-19**
*Washington State
Department of Health,
Updated April 16th,
2020*

- Efforts should focus on activating/augmenting existing community supports to increase social connections & encourage active coping skills
- Resilience can be intentionally taught, practiced, and developed (all ages)
- Community supports, lay volunteers, and all manners of social organizations and clubs are resources that can be developed to help reduce behavioral health symptoms for the general population and should be leveraged...

<https://www.hca.wa.gov/assets/program/covid-19-statewide-summary-forecast-of-bh-impacts-20200624.pdf>

The background of the slide features several thin, curved lines in a light gray color, some solid and some dashed, creating a sense of movement and depth. On the left side, there is a large orange speech bubble with a tail pointing downwards.

**Today, it
has never
been more
clear that:**

- Mental health is a top priority for schools and communities
- Systemically managing anxiety and depression is necessary to ensure learning
- Comprehensive systems need to have the agility to meet the needs of students, staff, and families in their current context
- Data/science matters; direct resources to effective supports
- Prevention & intervention at first sign of need pays off
- People and relationships are key to all of the above

Systematic Review of Current Literature is unable to:

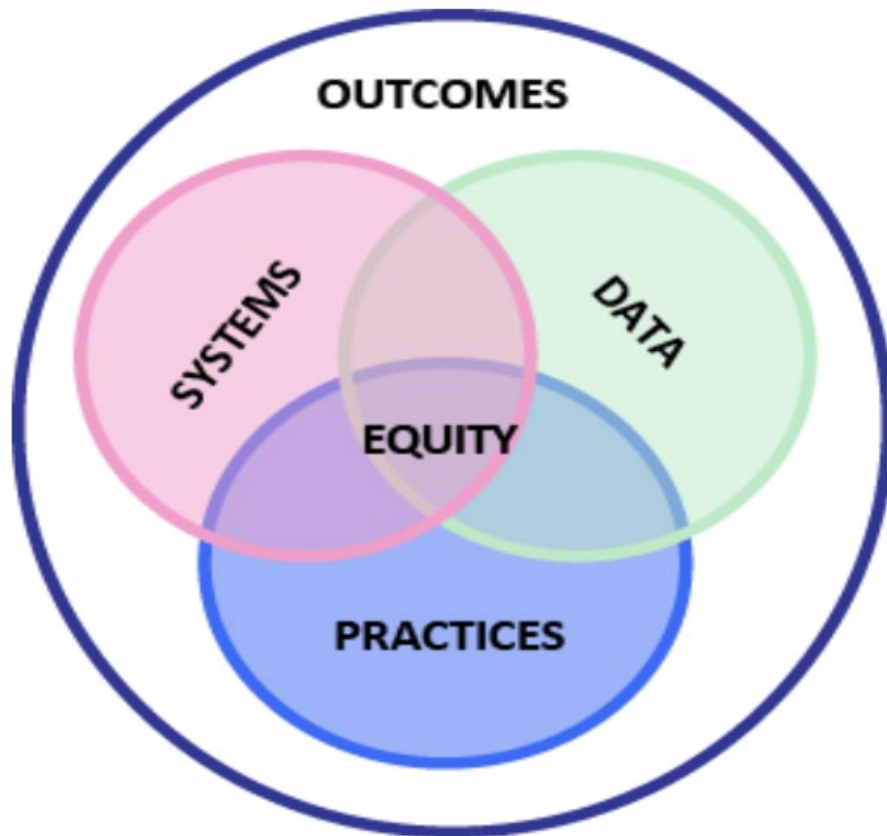
(Maynard et al., 2019)

1. Demonstrate systemic or programmatic changes or outcomes in schools
2. Unclear what schools are doing to be trauma-informed
3. Determine impact of Professional Development on adult behavior in schools
4. Determine impact of Professional Development on students

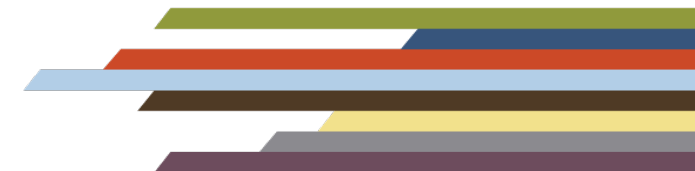
Maynard, B. R., Farina, A., Dell, N. A., & Kelly, M. S. (2019). [Effects of trauma-informed approaches in schools: A systematic review. *Campbell Systematic Reviews*, 15\(1-2\), e1018.](#)

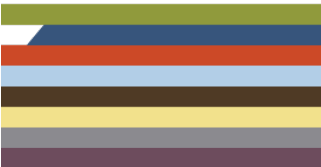
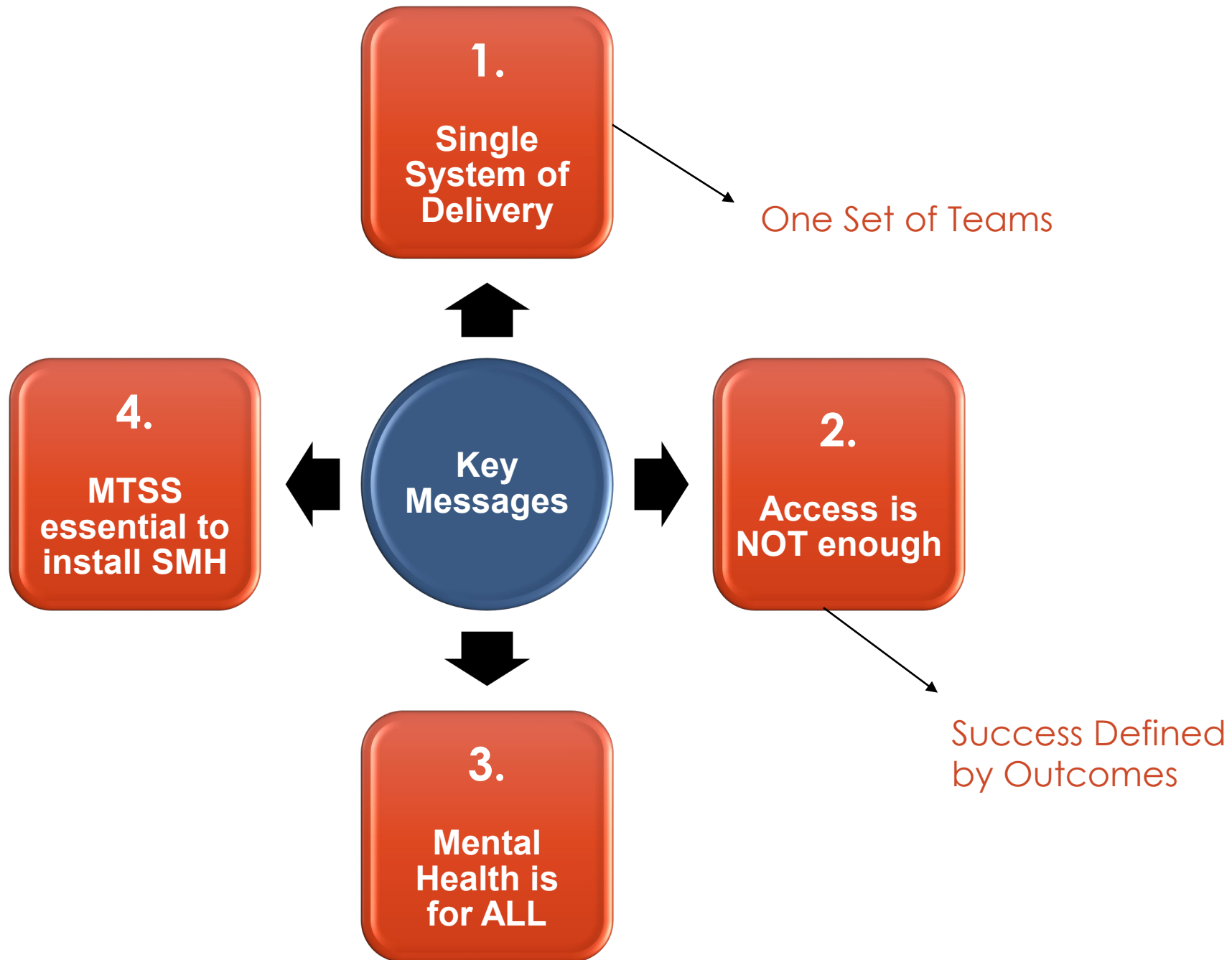
The broad purpose of PBIS is to improve the effectiveness, efficiency and equity of schools and other agencies. PBIS improves social, emotional and academic outcomes for all students, including students with disabilities and students from underrepresented groups.

The Interconnected Systems Framework (ISF)



- Deliberate application of the multi-tiered PBIS Framework for all social-emotional-behavioral (SEB) interventions.
- Aligning all SEB related initiatives through one system at the state/regional, district and school level.
- Active participation of family, youth and community partners is a central feature of the ISF.





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MTSS Core Features in ▼ Virtual Conditions

Data informed response...using MTSS logic

Sample Responses	Using MTSS logic
Hire social emotional experts	Adapt role to include building capacity of ALL staff and participate in teams across tiers
Select SEB curriculum	Formal process, team based decision. Data used to prioritize skills. All instructional staff model, teach alongside academic content.
Train staff on trauma informed practices	Team based training. Time to embed new learning.
Strengthen partnerships with families and community providers.	Expanded Team uses school and community data to inform efforts across all tiers.

MTSS Core Features

Teams

Use of Data

Ensuring Early Access

Formal Process for Selecting Interventions

On-going Professional Development and Coaching

TEAMS

- Integrating through one system requires one district and community leadership team (DCLT)
- Leadership team includes community providers and family/youth representation
- Ensure all mental health related initiatives are facilitated through one set of teams at both district and school level

Tiered Fidelity Inventory

1.1 Team Composition

Subscale	Tiered Fidelity Inventory: Tier I Features
Teams	<p><u>1.1 Team Composition:</u> 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.</p>
	<p><u>PBIS Big Idea:</u> Effective PBIS teams are knowledgeable, representative of stakeholders, and have administrative authority.</p> <p><u>ISF Big Idea:</u> 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.</p>
ISF Enhancement	<p><i>ISF leadership teams include community employed and school employed staff with mental health expertise. Teams also include families and students as active leaders.</i></p>
	<p><i>Community partners' roles at Tier 1 are clearly defined through a memorandum of understanding (MOU).</i></p>

Selecting evidence based practices, fidelity check, setting up progress monitoring system, thresholds for increasing supports, defining success criteria.

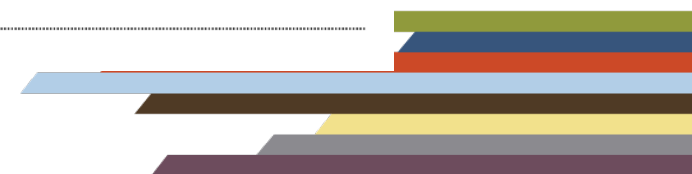
School:

Team Norms (Face to Face)	Team Norms (Virtual)
---------------------------	----------------------

☐

1		Wellness Check:	6.			Agenda Items for Next Meeting
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What is the most generous act you have seen recently? What is giving you hope right now? What is the best thing that has happened to you today?		
2.		7.
3.		8.
4.		9.
5.		10.



MTSS Core Features

Teams: One set of Teams, MH leaders on teams across tiers

Use of Data

Ensuring Early Access

Formal Process for Selecting Interventions

On-going Professional Development and Coaching

Expanding Data Sources

What are the specific needs your community?

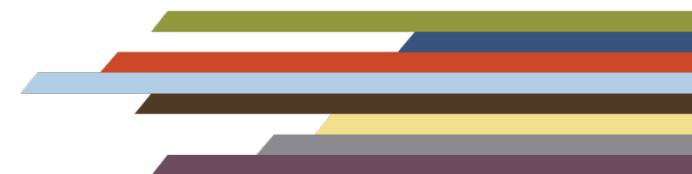
Data Sources	General Trends and Key Findings
School Data	
Climate Survey	<ul style="list-style-type: none"> 60% of students feel like they belong to the school community 80% of our staff feel like they belong to the school community 60% of students feel safe at school.
Youth Risk Assessment Survey	<ul style="list-style-type: none"> 23% of students reported being in a fight one or more times during the last 12 months. 6% of students reported they had been threatened with a weapon on school property.
Academic Health	<ul style="list-style-type: none"> 80% of students are on track to graduate on time 70% of students are reading at proficiency
Social Behavior Health	<ul style="list-style-type: none"> 70% of students have engaged in behavior resulting in 0-1 office referrals during the last 12 months 30% of students screened positive for anxiety
Attendance Data	<ul style="list-style-type: none"> 94% attendance rate- with variability across sub-groups.
Community Data	
Census Data	<ul style="list-style-type: none"> 11% of families living in poverty 5% unemployment rate
Community Assets and Wellness	<ul style="list-style-type: none"> 50% of students live within a mile of a park or faith based building.
Community Health Indicator	<ul style="list-style-type: none"> 5% of homes in our community have elevated lead levels.
Behavior Risk Factor Surveillance Data: Health Risk Behaviors	<ul style="list-style-type: none"> 15% of families are without health insurance (as compared to 6% district wide) 20% of families impacted by opioid misuse (as compared to 5% district wide)

Combine current data with other data sources

- % of students engaging in distance learning
- % of families and students receiving food support
- % of families personally impacted
 - Loss of family member
 - Family member ill
 - First responder/essential worker
 - Loss of employment/housing
- % of students and staff not returning FTF
 - Underlying medical conditions
 - Living with at risk family member
 - other

Gathering Information Remotely

- Using CICO-SWIS, and I-SWIS During Distance Learning
 - <https://www.pbisapps.org/About-Us/Pages/Using-CICO-SWIS-and-I-SWIS-During-Distance-Learning.aspx>
- Conducting the TFI and Walkthrough Remotely
 - <https://www.pbis.org/resource/conducting-the-tiered-fidelity-inventory-and-walkthrough-remotely>
- How to Collect Referrals During Distance Learning
 - <https://www.pbisapps.org/About-Us/Pages/How-to-Collect-Referrals-During-Distance-Learning.aspx>



MTSS Core Features

Teams: One set of Teams, MH leaders on teams across tiers

Use of Data: Use school and community data- start with aggregate data

Ensuring Early Access

Formal Process for Selecting Interventions

On-going Professional Development and Coaching

Uncovering strengths and needs

Big Ideas/General Guidelines:

- Distinguish between formal and informal screening. *(Both data sets will be used)*
- District Leadership charged with screening selection and use the same screening tool across all schools.
- Use psychometrically sound screening tools.
- Wait to screen until student, families and staff get back to a routine and adjust to new context. During this time, Track fidelity of Tier 1 implementation- focus on function of TFI items with specific examples- intentional about developing relationships, supporting staff- schedule screening window after fidelity/input is in place– may take longer this year
- Bias inherent in perception measures. (cite) Take time to during the adjustment period to develop relationships with students and identify ways to support teachers on how to strengthen connections with students and families while in a remote learning context (e.g. daily check in with students, family wellness checks)

Adjustment Period

What do you know about your students? How do we track information?
How do we adjust? How do we ask for assistance?

Teacher-Student Connections

Student	Name & Face	Something Personal about them	Academic Status	Wellness Concerns	Preferred T&L Context	Date of last Contact Teacher Who Feels Connected to Ss
Abbey Alton	✓		✓		✓	
Burt Buzzy			✓			
Devon Donaldson	✓	✓	✓		✓	
Jose Juggler	✓	✓	✓			
Hannah Held	✓	✓	✓			
Sammy Shy			✓	✓	✓	
Susie Sunshine	✓	✓	✓	✓	✓	
Regina Rock	✓	✓	✓			

Teachers Level: Build a Routine

- Daily checks
- Weekly reviews
- Monday adjustment

School Level: Build a Routine

- Provide prompts and supports for staff
- Check in with staff
- Use fidelity checks and outcome data to celebrate



Screening

- Screening data (total scores, not individual items) combined with other data sources (e.g., attendance/engagement, academic performance, “real time” family and student information) inform ways to strengthen Tier 1 instruction and efficiently identify students who need more support (related to health, SEB need, academic concerns) for students with a positive screen - NOT a diagnostic assessment but rather a way for teams to detect patterns quickly and adapt Tier 1 system to meet majority of needs
- Examine screening data at the grade level and at the classroom level. For teachers with higher levels of detected student risk in their classroom (e.g., greater than 15-20%), consider providing professional learning and other resources to assist teachers in learning low-intensity, research-based strategies to increase engagement and minimize challenging behaviors (Simonsen et al., 2019). Consider offering training in effective engagement strategies for online instruction, or using online tools that promote active engagement. Or you might consider peer networks to provide a formal, planned context for educators to come together and support each other with instructional and assessment ideas, as well as emotional and social support.
- **Have a clear plan for responding to the screening results. (Lane)**
 - Don’t assume every student with a positive screen will need intensive supports
 - Set up 2- week window and consider hiring community employed clinicians on a short-term contract to conduct diagnostic assessments, interviews for students with a positive screen (Van der Stoep et al 2005)
 - Identify team who will review data and determine what types of supports are needed (e.g. academic tutoring, social) and intensity of need.

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Formal Process for Selecting Interventions

On-going Professional Development and Coaching



Establish a Formal Process for Selection of Interventions

- Do we have a need for a new intervention(s)?
- Is the intervention we are selecting a good fit for our system?
- Does the research indicate this intervention has evidence to address our need?
- Do we have the capacity to implement the intervention, including the resources and supports to implement with fidelity and build capacity for sustainability?

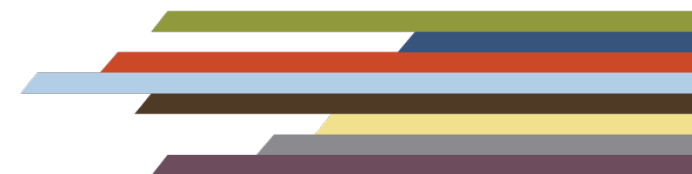
FORMAL PROCESS FOR SELECTING TRAUMA-INFORMED EVIDENCE-BASED PRACTICES

- Consider expansion or repurposing of current practices
- If team determines a new, evidence-based intervention is required, they should follow an established procedure for selection (Hexagon Tool)
- Consistently use data to guide teams in selection of interventions (few vs. all)

Building a Resilient Community

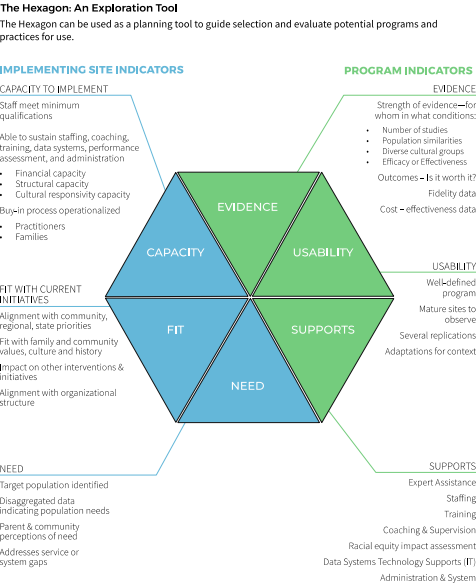
What are your universal precautions?

- ☐ Predictable, safe, and stable environments across teaching & learning contexts
- ☐ Ongoing embedded instruction on expectations, procedures, social emotional skills
- ☐ Daily routines that allow staff and classrooms to build sense of community, foster relationships, and experience positive connections
- ☐ Clearly defined ways for staff to ask for help
- ☐ Positive greetings and positive social interactions throughout the day
- ☐ Spaces and Routines for teachers to re-group, re-set, neutralizing routine
- ☐ Teacher connectedness and wellness activities
- ☐ Professional learning and support that is aligned with ongoing training, coaching, and performance feedback



Selecting Evidence Based Curriculum

Hexagon Tool



Consumer Guide to Selecting Evidence-Based Mental Health Services

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

Assessment	
1. An assessment has been conducted to determine the need, risk and intensity of the services. These may include the following depending on the presenting problem and the level of risk student presents with. <ul style="list-style-type: none">Strengths assessment, i.e.; Strengths and Difficulties Questionnaire (Goodman, 1997)Functional behavioral assessmentSocial skills assessment i.e., (SSIS, SRS)Mental health functioning rating scales i.e.; Self-Report Youth InventoriesRisk assessmentDiagnostic assessment	YES / NO
2. Results of the assessment indicate the strengths and skill deficits of the student.	YES / NO
3. Assessment results are reviewed at the appropriate continuum of behavior support team (universal, tier II, tier III) <ul style="list-style-type: none">to determine the appropriate school based intervention and/orreferral, in conjunction with the school team, to a more qualified mental health professional if needed to assess risk	YES / NO
Intervention Selection	
Selection of the intervention:	
1. matches strengths and skill deficits of the student/s	YES / NO
2. allows clear and measurable outcomes	YES / NO
3. allows school teams to build on current successful strategies	YES / NO
4. matches the developmental level of the student/s	YES / NO
5. matches the expertise of the provider	YES / NO
6. is culturally appropriate or adapted to meet linguistic/cultural appropriateness of the student	YES / NO
7. emphasizes the SW-PBS problem solving logic: Data, Practices & Systems	YES / NO

Protocol to Identify MH EBP Within PBIS Framework

Protocol to Identify Mental Health EBPs within the PBIS Framework.

Guiding Questions:	
Addressing the Need in the School and Community	
<ul style="list-style-type: none">Does the EBP explicitly address the identified needs?Does the EBP match the age level needs of the students?How strong is the evidence-base for the EBP?	
Capacity to Implement with Fidelity	
<ul style="list-style-type: none">Are the necessary resources and expertise to support initial implementation accessible including training, coaching, and performance feedback?Are the necessary resources and expertise to sustain implementation accessible including ongoing training, coaching, and performance feedback?Does the EBP have established fidelity measures, and, are the resources accessible to implement the fidelity measures?Is the expected building-level return on investment to implement the EBP with fidelity viewed as sufficient to warrant implementation?Is there sufficient commitment and resources to sustain implementation with fidelity over time?	
Contextual Fit in School and Community	
<ul style="list-style-type: none">Can the data system of the EBP integrate/align with the extant PBIS data systems?Does the EBP align with the cultural and linguistic characteristics in the school and community?Does the EBP fit with extant district and state priorities and initiatives?Does the EBP fit the organization structure in the targeted school(s)?	

Scoring: For each question, assign a score of (1) = Low, (2) = Medium, or (3) = High per EBP. Total scores should be used to guide review, discussion and ultimate decision-making by the relevant team. Use of numerical scores devoid of discussion is discouraged.

EBP = Evidence-Based Practice

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Formal Process for Selecting Interventions: Strengthen or repurpose before adding. If you decide to add, use hexagon tool to guide process.

On-going Professional Development and Coaching

On-going PD & Coaching: Trauma Enhancement

- Does the District MTSS professional development plan include opportunities for all staff to learn about trauma, its impact on youth, and the evidence-based practices that will be integrated across tiers?
- What types of supports are available for staff who have experienced trauma or are experiencing secondary trauma?

Modify PROFESSIONAL DEVELOPMENT & COACHING

- Focus on building fluency and accuracy with new practices
- Ensure same team-based logistics and principles of adult learning are applied (i.e., ongoing coaching)
- Teams need adequate action planning time to make decisions about integrating with existing structures and components of PBIS

Virtual examples of PD and coaching

- Team based
- Modified schedule – shorter chunks of content
- Time for action planning in break out rooms with coaching support
- District leadership participates
- Content recordings to increase fluency

West Coast ISF Webinar Series

All sessions 3:00 – 4:30 pm

Module 1: ISF in Virtual Conditions

- 10/20/20 - ISF Systems in Virtual Conditions
- 10/22/20 - Secondary Traumatic Stress and Educator Well Being

Module 2: ISF + Trauma Informed Approaches

- 10/27/20 - ISF Systems & Trauma-Informed Approaches
- 11/5/20 - Virtual Adaptations of Psychological First Aid
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Module 3: ISF + Tiers 2 & 3

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- 1/21/21 - Racial Violence and Trauma and Schools

ISF West Coast Town Hall

- 1/26/21 - ISF systems & practices in this moment with Susan Barrett & USC Faculty

<https://mhttcnetwork.org/centers/pacific-southwest-mhttc/isf-west-coast-party-systems-structures-leadership-data-practices>



Pacific Southwest (HHS Region 9)

Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

**Interconnected Systems Framework
West Coast Party Continues!**



bit.ly/ISF2021



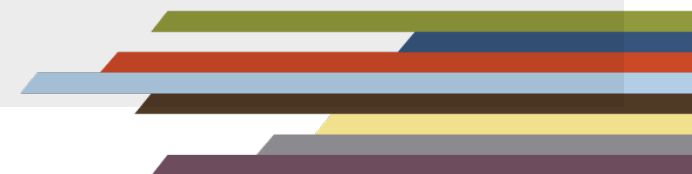
Problem Solving Framework, This is a **TEAM Sport!!**

- **Outcomes:** How will installing a trauma informed approach impact students, families and staff?
- **Data:** What data will you use to inform strength and needs of your current system?
- **Practices:** What are the evidenced based strategies you will embed across all classrooms?
- **Systems:** How will you support everyone to implement with fidelity?
- **Equity:** How will you put equity at the center of everything you do?



How to maximize impact

- Join as a team.
- Make a plan to have a follow up meeting after webinar to discuss your data and next steps.
- Take a deeper dive with ISF Volume 2.



Teaching Social-Emotional Competencies within a PBIS Framework

Susan Barrett, Mid-Atlantic PBIS Network
Lucille Eber, Midwest PBIS Network
Kent McIntosh, University of Oregon
Kelly Perales, Midwest PBIS Network
Natalie Romer, University of South Florida

Increasingly, researchers have recommended teaching social-emotional competencies within a prevention-focused, multi-tiered public health model, because simply adopting a curriculum does not lead to adequate implementation or improved outcomes (Greenberg, Domitrovich, Weissberg, & Durlak, 2017; Merrell & Gueldner, 2010). Positive behavioral interventions and supports (PBIS) provides an ideal framework for promoting social-emotional competencies to improve outcomes for the whole child. The purpose of this brief is to describe how school personnel can teach social-emotional competencies within a PBIS framework to support systematic, school-wide implementation through one system, rather than trying to improve student outcomes through separate, competing initiatives. Recommendations for how to adjust the PBIS framework to support instruction of social-emotional competencies are included.

Context

Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide PBIS

Volume 2: An Implementation Guide



By: Lucille Eber
Susan Barrett
Kelly Perales
Jennifer Jeffrey-Pearsall
Katie Pohlman

Integrating a Trauma-Informed Approach within a PBIS Framework

Lucille Eber, Midwest PBIS Network
Susan Barrett, Old Dominion University
Nicholas Scheel, University of South Florida
Ami Flammini, Midwest PBIS Network
Katie Pohlman, Midwest PBIS Network

The purpose of this brief is to describe how district and school leaders can incorporate trauma-informed practices within a Positive Behavioral Interventions and Supports (PBIS) framework. This ensures that the investments in training school personnel about trauma can be integrated into a system that links these efforts to student outcomes. Recommendations are included for how to adjust the PBIS framework to support trauma-informed practices.

Introduction

Over the past decade, youth-serving systems have increased their focus on childhood trauma and its impact on the mental health of children and youth (Hanson & Lang, 2016). Educators, following the lead of child welfare and mental health organizations, have intensified efforts to ensure that all teachers and administrators work in a system that provides accurate information about the prevalence and impact of trauma, are provided training and coaching around trauma response, and have a clear understanding of their role in supporting students who have experienced trauma. Although schools are investing heavily in professional development about trauma, a recent analysis of the literature found no rigorous evaluations or evidence of the impact of these efforts in educational settings (Maynard et al., 2019; Reinbergs & Fefer, 2018). As with other interventions focused on improving student social-emotional-behavioral (SEB) functioning, trauma-focused interventions are unlikely to work without ongoing analysis of implementation and corresponding refinement of strategies (Kelly et al., 2010). Positive Behavioral Interventions and Supports (PBIS) provides an effective multi-tiered framework for incorporating the knowledge about childhood trauma into an established system of SEB support, rather than focusing on trauma as a separate and perhaps competing initiative. Following the Interconnected Systems Framework (ISF) process for integrating PBIS and school mental health into a single system (Eber et al., 2019), trauma-informed practices become part of one multi-tiered continuum of support, benefitting from the structures that contribute to efficiency and effectiveness.

A Trauma-Informed Approach:

"A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization." (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014, p. 9).

Context

Positive Behavioral Interventions & Supports (PBIS)
www.pbis.org

New Resources with Social Emotional/Mental Health Focus

www.pbis.org

Pacific Southwest MHTTC

Contact Info

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Phone: (844) 856-1749

Website: <https://mhttcnetwork.org/pacificsouthwest>

Join the PacSW MHTTC Newsletter!

<https://tinyurl.com/pacsw-mh-news>

CONNECT WITH US ON SOCIAL MEDIA:

@PSMHTTC



Northwest MHTTC

Contact Info

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Phone: (206) 221-3054

Website: <https://bit.ly/NWSMH>

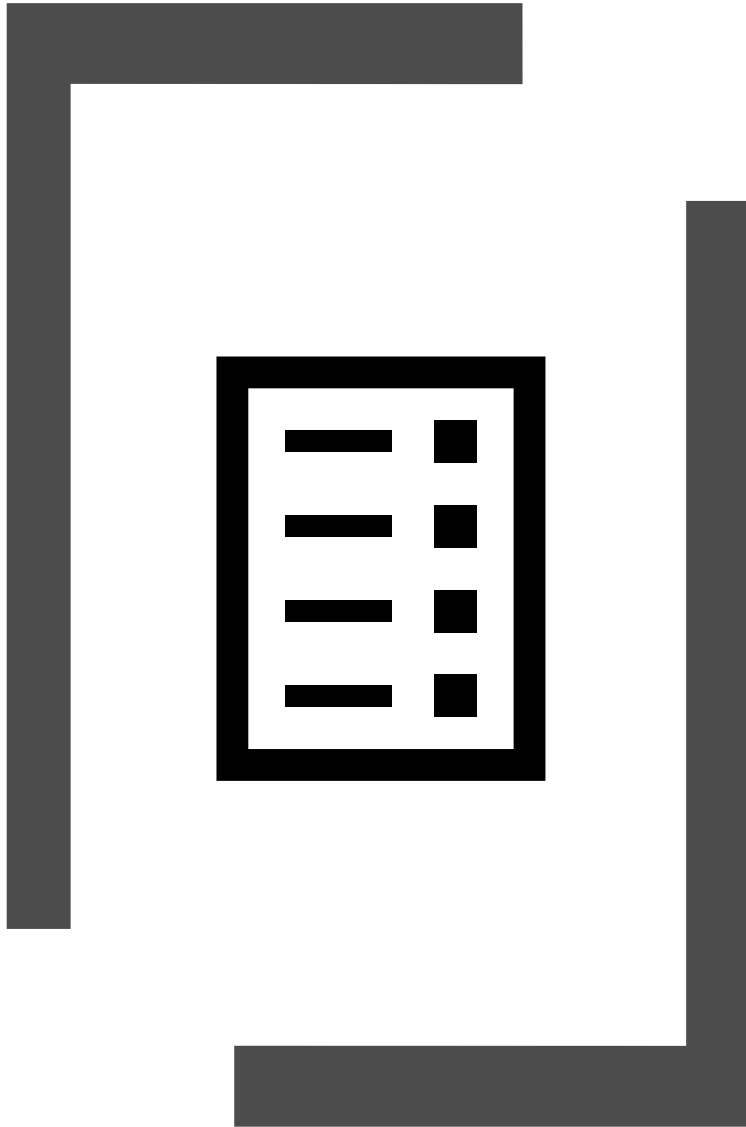
Join the NW MHTTC School Mental
Health Newsletter!

<https://bit.ly/NWSMHsignup>

CONNECT WITH US ON SOCIAL MEDIA:

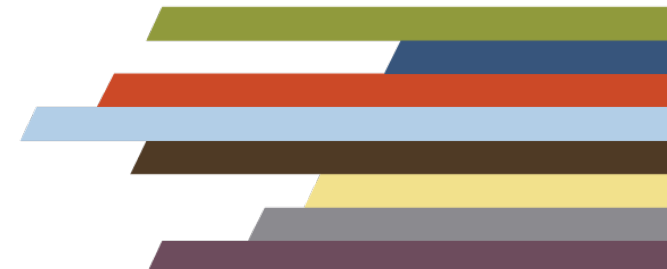
@NorthwestMHTTC





Event Survey

- Required by our funder
- Used to inform, refine, & enhance future events/activities
- Helps communicate the need for this type of support
- Voluntary and anonymous



Thank you!

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