

Integrating School Mental Health and Schoolwide Positive Behavior Interventions and Supports

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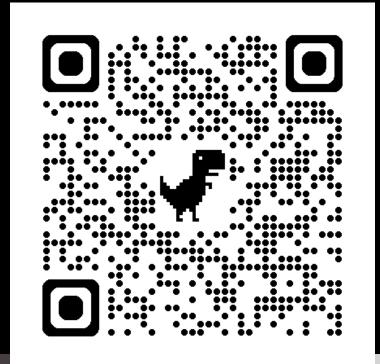
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Resources





Agenda

State of youth mental health

Interconnected Systems Framework (ISF)

Study results Tier 1 PBIS and student mental health risk

Practical strategies for integration School Mental Health (SMH) and SW-PBIS



Learning Objectives

- 1. Learn how school mental health supports fit within multitiered systems in the Interconnected Systems Framework
- 2. Receive data from a study exploring the relationship of Tier 1 SW-PBS implementation and youth mental health
- 3. Gain resources regarding the integration of mental health and SW-PBS



State of Youth Mental Health



Defining Mental Health

What is mental health?

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

CDC, 2023

"In schools, we prioritize three critical and inter-related components of mental health: social (how we relate to others), emotional (how we feel), and behavioral (how we act) supports to promote overall well-being."

U.S. Dept. of Ed

Increasing Ne



Youth mental health <u>IS</u> Social, emotional, and behavioral functioning

- In 2021, more than 4 in 10 (42%)
 students felt persistently sad or
 hopeless and nearly one-third (29%)
 experienced poor mental health. (CDC)
 - In 2021, more than 1 in 5 (22%) students seriously considered attempting suicide and 1 in 10 (10%) attempted suicide. (CDC)



School Emphasis

Most youth do not get services for mental health needs

School Mental Health through MTSS is a potential solution

Many major mental health problems can be prevented and effectively treated

Most who DO get care, do so in schools

Prevention and early intervention is powerful!



Power of School Mental Health

Early intervention

Natural environment

Broader reach

Higher likelihood of completing treatment

Engagement in services for marginalized populations

Can reduce stigma



Interconnected Systems Framework



Common/traditional School Mental Health Services

- Community mental health providers located within schools
 - Siloed
 - Separate
 - Students "referred out" to school mental health clinicians
 - Lacking collaboration and communication after referral





What is ISF?

O1

Using PBIS/MTSS to address social, emotional, behavioral needs

02

Integrating school mental health practices within PBIS/MTSS

03

Reducing siloed work to increase access and efficiency



ISF Key Features

MTSS is the foundation

School mental health providers on MTSS/PBIS teams

MH integration into process across MTSS tiers

Evidence-Based Practices Data used to monitor interventions

Interconnected Systems Framework: https://www.pbis.org/mental-health-social-emotional-well-being



ISF Overview

INTERCONNECTED SYSTEMS FRAMEWORK



- Identify students with socialemotional-behavioral needs earlier
- Link students to evidence-based interventions
- Use data to ensure students are receiving support to improve outcomes
- Expand roles for clinicians to support school personnel and students at every tier
- Create healthier school environments



KEY MESSAGES



Single System of Delivery



Access is Not Enough



Mental Health is for All



Multi-Tiered System of Support (MTSS) is Essential to Install Systems to Support School Mental Health (SMH)

SYSTEM OF SUPPORT CORE FEATURES



Integrated Teams



Expanded Data-based Decision Making



Collaborative Selection & Implementation of Single Continuum of Interventions



Comprehensive Screening for Early Access



On-going Coaching



Research Results

The relationship between Tier 1 PBIS and self-reported student mental health risk



Purpose of Study

Compare student-reported mental health risk (on universal screening) between schools implementing Tier 1 PBIS to those not implementing PBIS

 Within schools implementing School Mental Health MTSS



Participants

Students

- Grades 3-8
- 9750 students

Schools

- · 38 schools
- · (25 Elem, 13 Middle);
- 6 MO-PBS schools, 32 Non-PBS

Location

- •Single midwestern county
- Participated in County Schools Mental Health Coalition



Measures at Student Level Extant data Spring 2022-2023

Early Identification System (EIS)-Student Level Variables

Mental Health Risk

EIS-SR Z-scores scores:

- a) Total
- b) Externalizing Behavior
- c) Internalizing Behavior
- d) School Disengagement
- e) Emotion Dysregulation
- f) Attention and Academic Issues
- g) Bully Behavior

Interpretation and Risk Levels for Z-scores

<1.0 = "No Risk", 1.0-1.999 = "Some Risk" > 2.0 = "High Risk" <u>Individual student level</u> <u>demographic variables:</u>

- a) Race
- b) Gender
- c) FRL status
- d) Grade
- e) Disability



Measures at School Level



Extant data (merged using NCES school ID) Spring 2022-2023



MO SW-PBS-School Level

Tier 1 percent fidelity on Tiered Fidelity Inventory



NCES & DESE-School Level

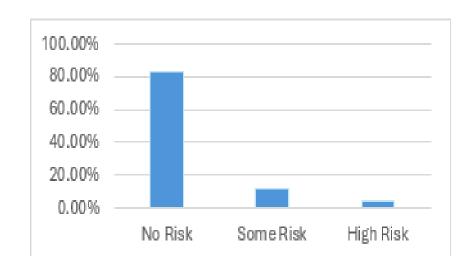
Enrollment, percent FRL, Title 1 status, Locale



Results: Relationship between Tier 1 PBIS and Overall MH Risk

Figure 1

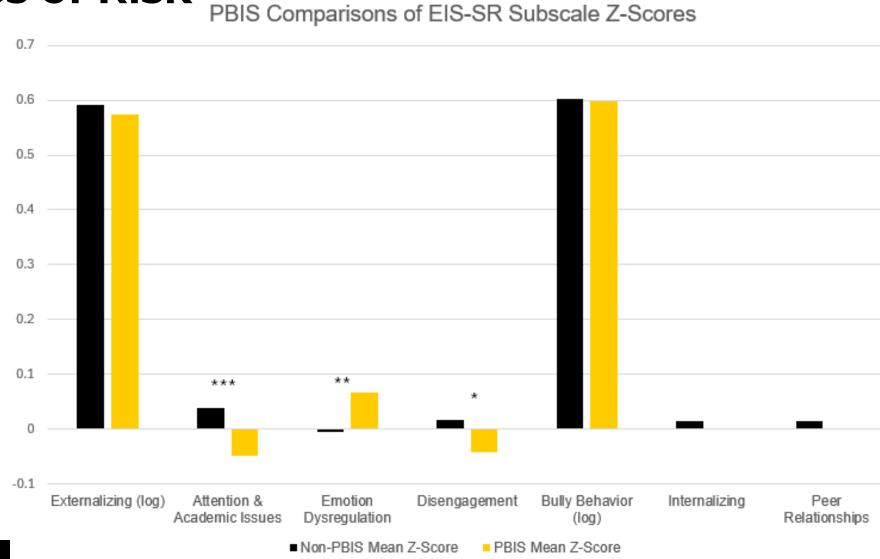
Bar Graph of Percentage of Students in Each EIS-SR Risk Category



- Average risk scores for both PBIS and Non-PBIS schools in "no risk" range.
 - *Low risk sample overall
- PBIS NOT a significant predictor of overall MH risk.
- Percent of students on FRL in a school WAS a significant predictor of overall MH risk.



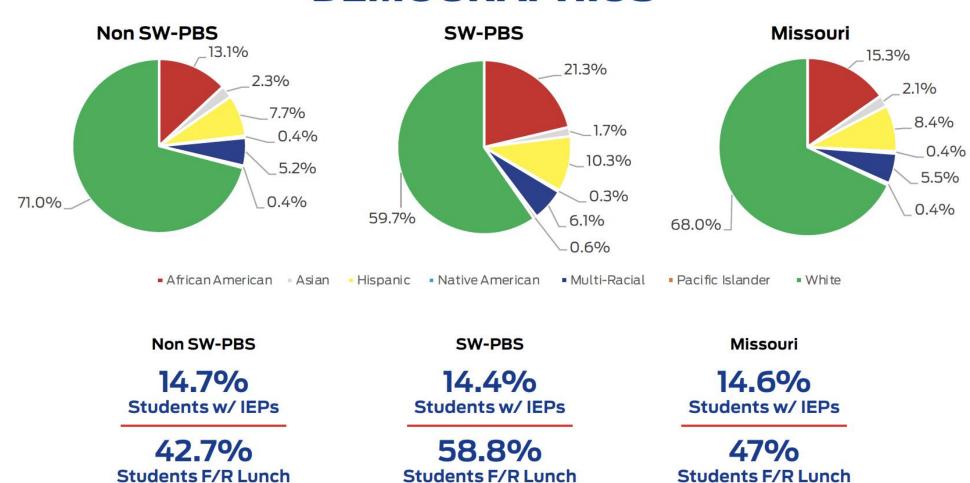
Results: Relationship between Tier 1 PBIS and Subtypes of Risk





Potential Interpretation: SW-PBS Partner Schools







Summary of Findings

Study explored relationship of Tier 1 PBIS on student mental health risk in schools doing comprehensive school mental health MTSS

Students sample was very low risk, and lower risk than national data

Tier 1 PBIS was not related to lower overall mental health risk

Tier 1 PBIS related to lower Attention & Academic Issues and Disengagement risk in overall sample



Limitations

Non-experimental

No "pre" data on schools to compare

Single time point

Low number PBIS schools (n = 6) vs. Non-PBIS (n = 32)

Couldn't assess
Role of Fidelity due
to Minimal
variation of TFI
scores

Only included Tier 1 PBIS

(not Tier 2 or 3)



ISF: How To

Tips, Practical Guidance, and Resources

National Center PBIS and Midwest PBIS Resources:

<u>ISF Implementation Guide Version 2</u>

ISF Installation Guide-District/Community Level

ISF Installation Guide-School Level

Resources ISF School Installation

Resources ISF District Installation

Advancing Education Effectiveness:
Interconnecting School Mental
Health and School-Wide PBIS
Volume 2: An Implementation Guide



By: Lucille Eber
Susan Barrett
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Katie Pohlman
Robert Putnam
Joni Splett
Mark D. Weist



Eber, L., Barrett, S., Perales, K., Jeffrey-Pearsall, J., Pohlman, K., Putnam, R, Splett, J., & Weist, M.D.(2019). *Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide PBIS, Volume 2: An Implementation Guide. Center for Positive Behavior Interventions and Supports* (funded by the Office of Special Education Programs, U.S. Department of Education). Eugene, Oregon: University of Oregon Press.



Tip 1: Use the PBIS/MTSS teams and systems you already have

Efficient

Demonstrates integration of MH into PBIS systems

Reduce duplication of efforts

Ensure have administrator and facilitator on team

- PBIS tiered team, Problem Solving Team, threat assessment team, crisis response team
- Add/incorporate school mental health providers if not already on teams (both school personnel AND community agency personnel doing school-based services)



Tool: ISF Aligning Teaming Structures

ISF School Installation Guide

ISF V2 Ch 5: School Level Installation Guide (Sept 2020) - Step 1a: Identify need for merging teams with similar goals

Aligning Teaming Structures: Working Smarter, Not Harder

Purpose of this tool is to provide (a) an overall picture of existing teams within the school and (b) determine need for merging teams.

Instruction: Use the Working Smarter worksheet to complete the next two steps:

Step 1: Identify Current Teams (discipline, instruction, climate, school improvement, parent support, etc.) and Initiatives (Second Step, Character Counts, Spirit Committee, etc.)

Step 2: Complete the Working Smarter Table

Step 3: Based on your results, what committees or initiatives can you eliminate; combine; provide more support? How can you infuse PBIS into your current committees/teams?

Initiative/ Committee/ Team	Purpose and Strategic Goal Supported	Measurable Outcome(s) – Data Based	Target Group	Staff Involved	Overlap? Modify? Eliminate?



ISF Team Alignment Example

		Data Based /Measurable Outcome(s)	Target Group	Staff Involved	Overlap? Modify? Eliminate?
PBIS	Ensure positive, safe, predictable and consistent environment	ODRs, suspensions, attendance, universal screening data, school climate surveys	All students, staff, and families	Principal Social Worker 3 General Education Teachers 1 Special Education Teacher	 Overlapping purpose of PBIS/Safety/Trauma Informed Teams; Combine teams and name Climate & Culture Leadership Team: Ensure Trauma informed leads are part of team; Additional meeting time in May for updating safety protocols
Safety / Crisis team	Update protocols to ensure safe environment and plan for crisis	None	All students, staff, and families	Principal Social Worker 2 General Education Teachers	Expand use of data to monitor police contacts from school and safety assessments conducted
Trauma Informed Team	Ensure students feel safe.	ODRs, suspensions, attendance, universal screening data, school climate surveys	All students, staff, and families	Principal Social Worker 2 General Education Teachers 1 Special Education Teacher	 Overlap with PBIS team Combine team ensuring Mr. Smith and Mrs. Morris are on team as PBIS Coaches



Tool: ISF Initiative Inventory

ISF District Leadership Installation Guide

Step 2b: Conduct a review of current initiatives

ISF Initiative Inventory (Adapted from NIRN Initiative Inventory)

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 developmen t exists including coaching and performance feedback?



Ex: Integrated SEB Matrix

ISF Implementation Guide

Figure 6.2 Teaching Matrix of Social-Emotional-Behavioral Skills

School-wide		Incorporate So	cial-emotional	Competencies	
Expectations	All Settings	Hallways	Lunch	Bus	On-line
Respect	Be on time. Assume positive intent.	Walk to the right. Use level 2 voice volume.	Invite those sitting alone to join.	Stay in my seat.	Consider the feelings of others before I post. Be an upstander – speak up when I see unsafe behavior.
Achieving and Organized	Hands and feet to self. Help/share with others.	Walk directly to my designated area.	Have a lunch plan. Choose a quiet or social lunch area. Invite friends to join.	Have a plan. Use headphones to listen to music.	Check my feelings before I post. Re-read the message before I post.
Responsible	Recycle. Be prepared.	Pick up litter. Maintain physical space.	Use my breathing technique. Listen to my signals.	Watch for my stop. Use level 1 voice.	Double-check sources before I post. Think before I forward.



Tip 2: Be intentional about your coordination between school and community mental health agencies.

<u>Memorandum of</u> <u>Understanding</u>

 To include collaboration, communication, and teaming Releases of Information for supported students

Clarify roles (consider rubric or resource map)

Clarify expectations and processes

Ex: Suicide Risk
 Screenings

Clear expectations re: confidentiality and communication

ISF Implementation Guide



Tool: ISF Implementation MH Agency Checklist

Complete quarterly with your coach						
Status: A = Achieved, I = In Progress, N = Not Yet Started Date:						
	Jate.					
ESTABLISH COMMITMENT		Goal to achieve by				
Agency's Support & Active Involvement Agency commits to adequate FTE for clinical supervision to be provided on a routine basis with school mental health clinician(s). Agency provides adequate logistical, technical, and financial support to the school mental health office. Agency commits to adequate FTE for a MH coach who will actively participate in all required coaching activities.	Status:					
2. Staff Support Agency supports professional development needs of the team, including participation in cross training activities with school partners and training for EBPs as appropriate. A clinical supervisor provides weekly of on-site support, including participation in any relevant meetings, case consultation, and overall clinical supervision of the clinician(s). Staff members are employed with agency in a manner that supports workforce stability.	Status:					
ESTABLISH & MAINTAIN TEAMS		Goal to achieve				
District and Community Leadership Team Established Leadership from the Agency commits to actively participate on the DCLT. These individuals have the authority to make key decisions regarding policy, funding, leveraging resources, and providing support to an integrated system.	Status:					
School Building System Teams Agency commits to have staff with mental health expertise actively participate on building system teams for Tier I, Tier II, and Tier III. These assigned staff attend system meetings monthly.	Status:					



Ex: Rubric of Services

	Agency 1	Agency 2 Family Specialist	Agency 2 SMH Consultant	Agency 3
Needs Best Supported	 Student needing both talk therapy and school-based skill building check-ins Psychiatry Physical health case management through health care program (if applicable) 	 Chronic behavioral, social, or emotional concerns (intensive tier 3 needs) Parent/home related needs Intensive classroom planning/supports 	 Moderate behavioral, social, emotional concerns (tier 2-3) 1 time per week sessions adequate to serve needs 	 Adolescent mental health needs (Provider 1) 1 time per week sessions adequate to serve needs (Provider 1) Provider 2 is k-12 once per week
Types of Services	 Individual talk therapy School-Based Services (skill building) Psychiatry (as needed) Small groups Connection to nurse case managers re: physical health needs 	 Individual Student interventions Parent interventions Therapeutic interventions using evidence-based curriculum Classroom and teacher consult Case management Links to needed resources in community Crisis response 	Small group or individual student Interventions Therapeutic interventions using evidence-based curriculum School consultation	 Individual therapy Family Therapy (Provider 2) Can also possibly do groups (Provider 2)
Caseload	Not limited	10 students in K-12 th grade	NA-based on availability and need	10 Students, 6 th -12 th grade (Provider 1) Fluid caseload K-12 (Provider 2)
Parent/ guardian expectations	 Signed informed consent Intake/assessment Periodic meetings 	 Signed informed consent Participation in parent support intervention meetings 	Signed informed consent	 Signed informed consent Paperwork: Demographic info; consent to treat, Release, financial background
Fees	 Medicaid = Free Non-Medicaid = grant or billed through insurance (6 month time limit) 	Free (funded by mental health tax)	Free (funded by mental health tax)	 Free (Funded by mental health tax) No time limits, based on client progress
How to access services	Submit referral to Agency	Through SAT/Care Team/Problem Solving Team	Through SAT/Care/Problem Solving Team	School to submit referral to Agency with above listed paperwork



Ex: Resource Mapping

Lever, N., Castle, M., Cammack, N., Bohnenkamp, J., Stephan, S., Bernstein, L., Chang, P., Lee, P, & Sharma, R. (2014). Resource Mapping in Schools and School Districts: A Resource Guide. Baltimore, Maryland: Center for School Mental Health.

	Person/ Position	What do they do?	What days/times are they available?	Best way to reach them	Who can they serve
	Mr. Oríole School Psychologíst	Educational Testing, Meeting with Students who have Counseling Services on IEP, Leads School Improvement Team	Wednesdays and Frídays 8:00-3:00	Email moriole@gmail.com	All students, but required to meet all IEP requirements
Inside the school	Ms. Raven School Social Worker	Lead Student Support Team, Manage Attendance Team, Meetings, Meets with Students with Counseling Servicers on IEP	M, T, W from 8:00- 3:00	Extension 458	All students, but required to meet all IEP requirements
	Outpatient Success Services	School-based individual and group counseling	Monday and Thursdays from 8:00-5:00	Cell phone of clinician 410-838-4535	Students with clinical diagnosis and insurance with consent from parents
Outside the school	Boys and Girls Club	After school enrichment program	Monday-Fríday 3:00-6:00	Phone - 410-456-4545, director@bgc.org	Students in grades 1-5 who have consent from families to be a part of the program



Tool: Intervention Mapping

ISF School Installation Guide

Step 2c: Conduct intervention inventory

School Level Intervention Mapping Tool

Purpose of this tool is to (a) provide an overall picture of existing social emotional behavioral related interventions or initiatives available to students in your building, (b) determine the effectiveness, relevance, and fidelity for each, (c) resource allocation, and (d) determine areas of redundancy. This process is led by the School Level Team with representation from both education and community stakeholders.

	Intervention	Indicated Need	Facilitator	Entrance Criteria	% of student enrollment receiving intervention	Outcome Measuremen t	% of students responding	Evidence Based	Fidelity Measuremen t
Tier 1									
Tier 2									
Tier 3									



Tip 3: Use data-based decision making re: all interventions

Universal screening

Schoolwide data

Pre/Post assessments of Interventions

Progress Monitoring



Ex: Integrated PBIS/MH Data Sources

ISF School Installation Guide

Step 2d: Assess data being used to identify social-emotional-behavioral needs

Data Sources to Consider for an Integrated PBIS/Mental Health System

 Office Referral Rates (by location, time, grade, problem behavior, race/ethnicity, students with IEP) Attendance rates for students and staff Academic data Graduation rates Minor incident reports and instructional time Climate data Demographic data for the school/neighborhood, community and/or district Socio-economic status, free and reduced lunch rates Homelessness rates Incarceration rates Issues related to environmental changes and weather events Drug use/rate of drug overdoses Crisis center calls, suicide attempts Issues related to families' immigration status School and workplace violent incidents Military deployment 	Traditional School Data	Expanded School Data	Community Data
schedules	location, time, grade, problem behavior, race/ethnicity, students with IEP) Attendance rates for students and staff Academic data Graduation rates Minor incident reports and	logs Teacher ratings of student social emotional behavior/effort (Universal screening data) Student, staff, and family focus groups Family screener	school/neighborhood, community and/or district Socio-economic status, free and reduced lunch rates Homelessness rates Incarceration rates Issues related to environmental changes and weather events Drug use/rate of drug overdoses Crisis center calls, suicide attempts Issues related to families' immigration status School and workplace violent incidents Military deployment



ISF Action Planning Companion to TFI

ISF Action Planning Companion Guide to SWPBIS-TFI

A tool to assist schools in implementing and using Tiered Fidelity Inventory to enhance current implementation to include ISF approach.

Topic(s): Mental Health/Social-Emotional-Behavioral Well-Being

Published: February 1, 2016 **Revised:** February 1, 2016

Keywords: Interconnected Systems Framework (ISF) Fidelity Alignment

Download Resource

Materials: Word Doc

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



SHAPE: School Health Assessment Performance Evaluation System



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About Us

The School Health Assessment and Performance Evaluation (SHAPE) System is a public-access, web-based platform that offers schools, districts, and states/territories a workspace and targeted resources to support school mental health quality improvement. SHAPE was developed by the National Center for School Mental Health (NCSMH), in partnership with the field, to increase the quality and sustainability of comprehensive school mental health systems. SHAPE houses the National School Mental Health Census and the School Mental Health Quality Assessment (SMH-QA). These measures are designed for team completion at the school or district level to document the school mental health system components, assess the comprehensiveness of a SMH system, prioritize quality improvement efforts and track improvement over time.

Our Mission

The SHAPE System is hosted by the National Center for School Mental Health (NCSMH) at the University of Maryland School of Medicine. The NCSMH is committed to enhancing understanding and supporting implementation of comprehensive school mental health policies and programs that are innovative, effective, and culturally and linguistically competent across the developmental spectrum (from preschool through post-secondary), and three tiers of mental health programming (promotion, prevention, intervention).





Data-based Decision-Making Resources

School Mental Health Collaborative: Screening Best Practices

Center on PBIS Screening Tools

Center on PBIS Data-Based Decision Making

SHAPE School Mental Health Assessment

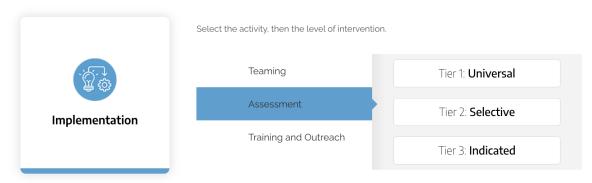
National Center Intensive Intervention

National Center Rural School Mental Health Implementation Hub

 Data Collection, Goal Setting, Progress Monitoring

Implementation Hub

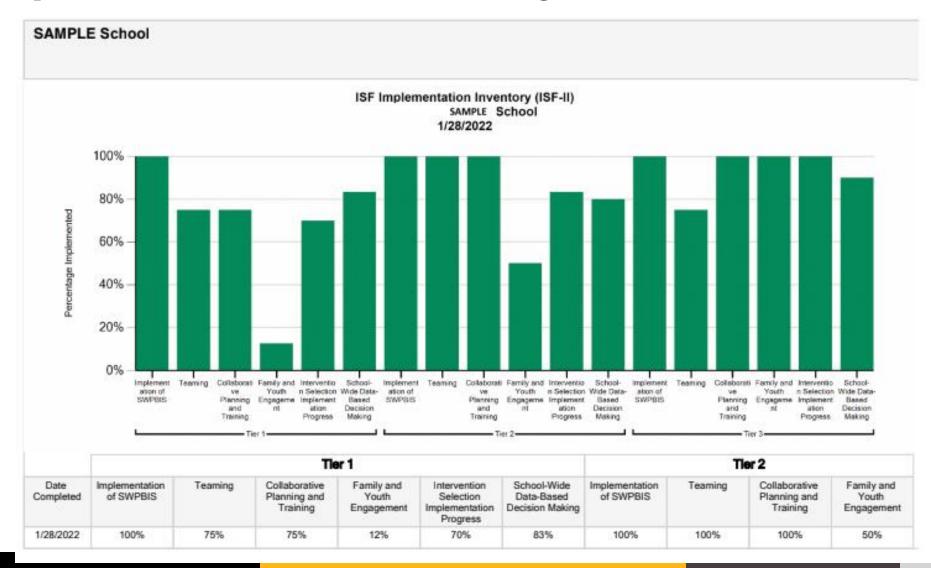
Implementation Hub > Implementation



Implementation. Teams begin implementing the innovation. During this time, they closely monitor fidelity, work to remove barriers, and develop plans that include fidelity, progress monitoring, and pre-post data collection. It is important for teams to start small and build on success.



ISF Implementation Inventory-V3



Attention and

Academic Issues



Tip 4: Use evidence-based practices



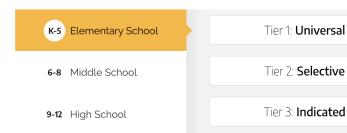
Early Identification System (EIS) Intervention Hub

The EIS intervention hub connects to interventions across 7 risk areas known to be related to later mental health problems. Within each area, you will find prevention strategies and interventions for elementary, middle, and high schools across three tiers.

Tier 1 is universal, meaning that it benefits all students. Tier 2 (selective) offers interventions for a targeted group of students. Tier 3 (indicated) interventions are aimed to provide individualized support for students who have increased levels of risk. Click on an area below to learn more.









Selecting EBPs for SMH Resources

- National Center for Rural School Mental Health Intervention Hub
- What Works Clearinghouse
- National Center on Intensive Intervention Behavior Interventions
- Blueprints for Healthy Youth Development



National Center for Rural School Mental Health



Welcome

Cost Calculator Professional Development Intervention Hub Implementation Hub Resources Policy Blog



Our Purpose

IDENTIFY. PREVENT. INTERVENE.

In partnership with rural schools, we will develop a comprehensive set of teacher and student surveys, tools, interventions, and professional development materials to help identify, prevent, and intervene in mental health concerns among students.

What will participation for rural school partners look like?

+ 1Partnership Development

+ 2 Expansion of the Early Identification System

+ 3 Evaluation of the Early Identification System Model

Learn more >



Tip 5: Don't underestimate the power of classroom teachers for mental health supports



Classroom/school environments and teacher relationships are incredibly powerful, preventative, and protective!

Students spend the majority of their days in classrooms with teachers

Empower teachers as key agents in support youth mental health/social, emotional, behavioral wellbeing



Effective classrooms can improve attention, academic, and engagement risk

<u>Clear behavioral</u> <u>expectations</u> <u>Behavior</u> <u>specific praise (4</u> <u>to 1 ratio)</u>

Predictable routines

Active supervision

Opportunities to respond (>3 per min)

Concise error correction

Positive relationships between teachers and students

Classroom layout



Connection to PBS Effective Learning & Teaching Practices



Home About Tier 1 Tier 2 Tier 3 Topics

Tier 1 Effective Teaching & Learning Practices (ETLPs)

MO SW-PBS has identified Eight Effective Classroom Practices that have been shown to impastudent achievement while ensuring a positive learning environment. Implementing these expansions are learning for all students while minimizing discipline problems.

- + Overview and ETLPs 1-4
- + Classroom Active Supervision
- + Classroom Opportunities to Respond
- + Classroom Activity Sequencing and Offering Choice
- + Classroom Task Difficulty



The Role of Trusted Adults



TRUSTED ADULTS ARE IMPORTANT

Elementary, Middle and High School students without a trusted adult at school had significantly higher levels of internalizing problems over time than those with a trusted adult at school.

TRUSTED ADULTS MATTER FOR THE DEVELOPMENT OF INTERNALIZING PROBLEMS

Middle and high school students without a trusted adult showed significant increases in internalizing problems over time.





TRUSTED ADULTS CAN IMPACT STUDENT FUNCTIONING

3rd-12th grade students *without a trusted adult* were significantly more likely to report:

- 1) not trying hard to get good grades
 - 2) not enjoying coming to school
- 3) needing help with their emotions



Teachers as Trusted Adults

Build positive relationships with students!

Protective factor for student mental health

- Positive Greetings at the Door
- 2 by 10
- Check and Connect
- Journals to Build Relationships
- · Check In Check Out



Teacher Implemented Strategies to Support MH Risk-NCRSMH Intervention Hub



Early Identification System (EIS) Intervention Hub

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Attention and Academic Issues



Peer Relationship Problems



Behaviors



Filter by domain,

tier, and type of

intervention

Internalizing Behaviors



Externalizing



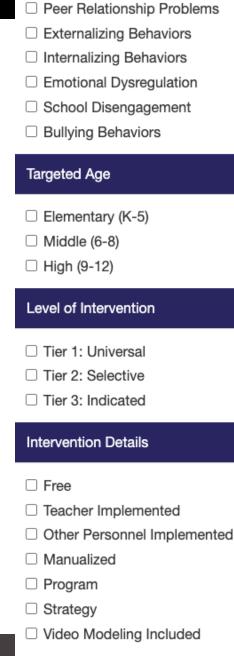
Bullying Behaviors



Emotional Dysregulation



School Disengagement



Area of Risk

Attention and Academic Issues



Closing

Student mental health risk is a substantial and increasing concern

Integrating PBIS and School Mental Health through an Interconnected Systems Framework can address these needs

Single System of Delivery

Mental health is for ALL

Success defined by student impact (data) Use MTSS framework to guide integration



ISF Key Resources

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

Volume 2: An Implementation Guide



- National Center on PBIS <u>Mental Health and</u> <u>Interconnected Systems</u> <u>Framework</u>
- Midwest PBIS Network Getting Started with ISF
- National Center on PBIS mental health



National Center for Rural School Mental Health Opportunity

- Rural Schools
- Access to EIS universal screener
- School Mental Health MTSS coaching



Project Description

Schools will be randomly assigned to two groups in Fall of 2025: intervention schools and control schools.

2025-2026 (Year 1)	
Intervention schools (Get Now)	Control schools (Get Later)
√ \$1000 participation stipend	✓ \$1000 participation stipend
√ \$500 stipend to purchase intervention materials	✓ \$500 stipend for one school staff member to serve
✓ \$500 stipend for one school staff member to serve as	as project liaison
project liaison	✓ School climate survey and reports
✓ School climate survey and reports	✓ Early Intervention System (EIS), a universal social
 ✓ Early Intervention System (EIS), a universal social 	emotional screener (reports in Spring)
emotional screener (reports fall and spring)	✓ \$500 stipend to purchase intervention materials
✓ EIS intervention hub and professional development	✓ Spring Consultation
✓ Monthly consultation	
2026-2027 (Year 2)	
Intervention schools	Control Schools
✓ School climate survey and reports	✓ School climate survey and reports
✓ EIS screener and reports	✓ EIS screener and reports
✓ EIS intervention hub and professional development	✓ EIS intervention hub consultation

National Center for Rural School
Mental Health interest form





Thank you!

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Resources

