



Integrating School Mental Health and Schoolwide Positive Behavior Interventions and Supports: Resources and Practical Applications

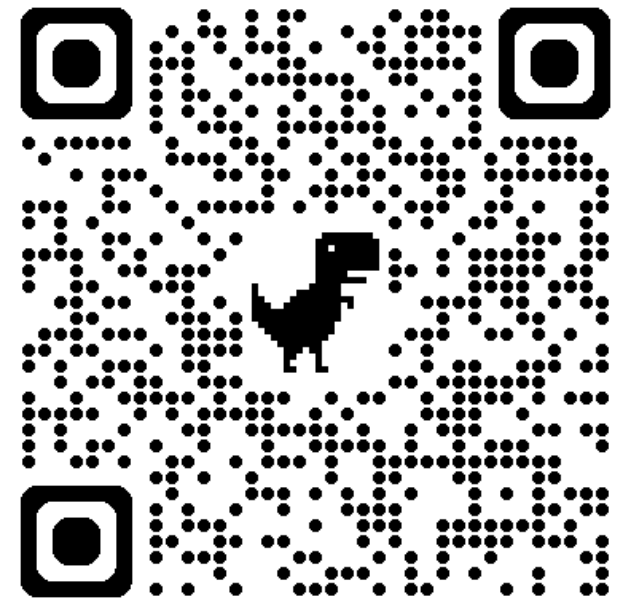
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AGENDA

State of youth mental health

Interconnected Systems Framework (ISF)

Practical application integrating School Mental Health (SMH) and SW-PBIS





LEARNING OBJECTIVES

1. Learn how school mental health supports fit within multi-tiered systems in the Interconnected Systems Framework

2. Describe practical examples of how school mental health and SW-PBS can be integrated

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.¹ 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](#)



Youth mental health IS Social, emotional, and behavioral functioning

- In 2023, 40% of high school students felt persistently sad or hopeless and nearly 1 in 3 (29%) experienced poor mental health. (CDC)
- In 2023, 1 in 5 (20%) students seriously considered attempting suicide (CDC)

CDC Mental Health Data Channel, 2026

SCHOOL EMPHASIS

Most youth do not get services for mental health needs

Most who DO get care, do so in schools

School Mental Health through MTSS is a potential solution

Many major mental health problems can be prevented and effectively treated

Prevention and early intervention is powerful!



Nearly **20 percent** of school-age children experience serious mental health issues, yet **few receive services**

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 (ISF)

Center on PBIS

COMMON/TRADITIONAL SMH 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 INTERCONNECTED SYSTEMS FRAMEWORK (ISF)?

01

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

02

Integrating school mental health practices within PBIS/MTSS

**NOT a new or separate program*

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>

Data!
Systems!
Practices!

INTERCONNECTED SYSTEMS FRAMEWORK



- 1 Identify students with social-emotional-behavioral needs **earlier**
- 2 Link students to **evidence-based interventions**
- 3 Use **data** to ensure students are receiving support to improve outcomes
- 4 Expand roles for clinicians to support school personnel and students at **every tier**
- 5 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)

ENHANCED MULTI-TIERED SYSTEM OF SUPPORT CORE FEATURES



Integrated Teams



Expanded Data-based Decision Making



Collaborative Selection & Implementation of Single Continuum of Interventions

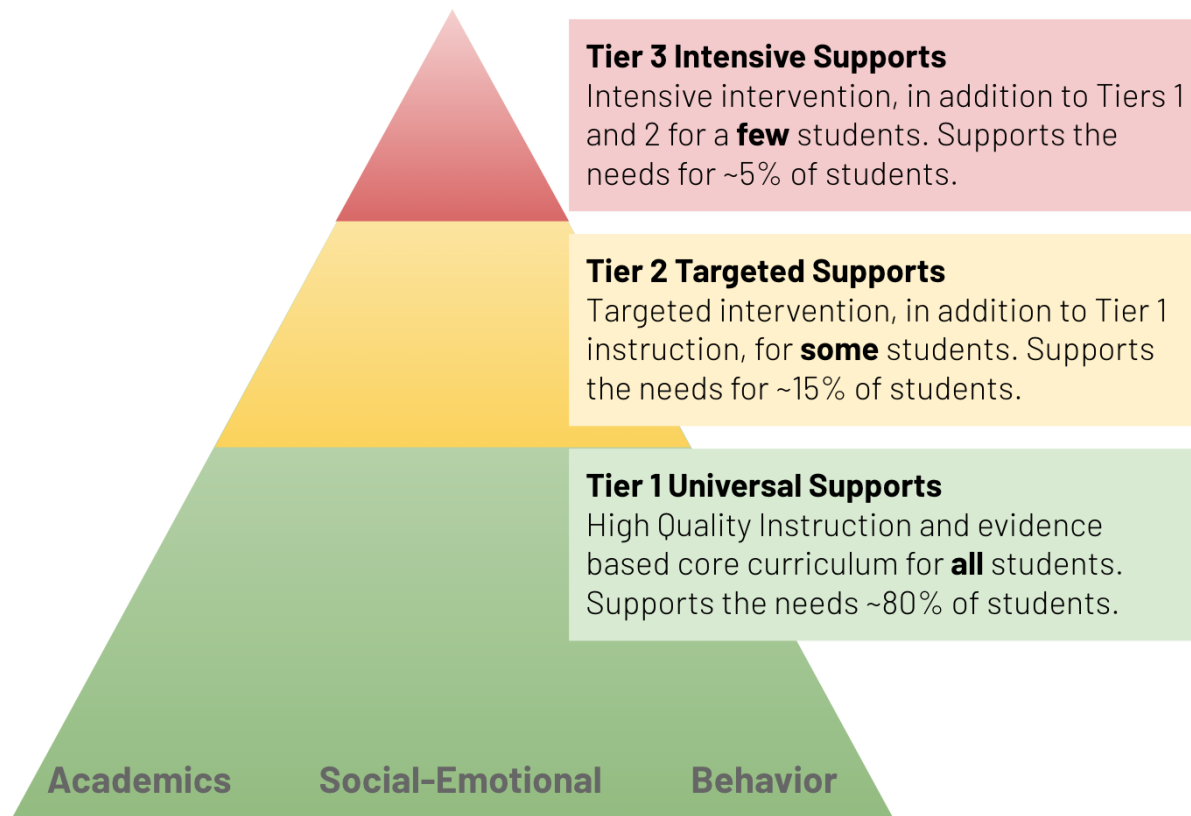


Comprehensive Screening for Early Access



On-going Coaching

ISF MTSS FRAMEWORK



SMH + PBIS Practical Applications

Tier 1

TIER 1: UNIVERSAL

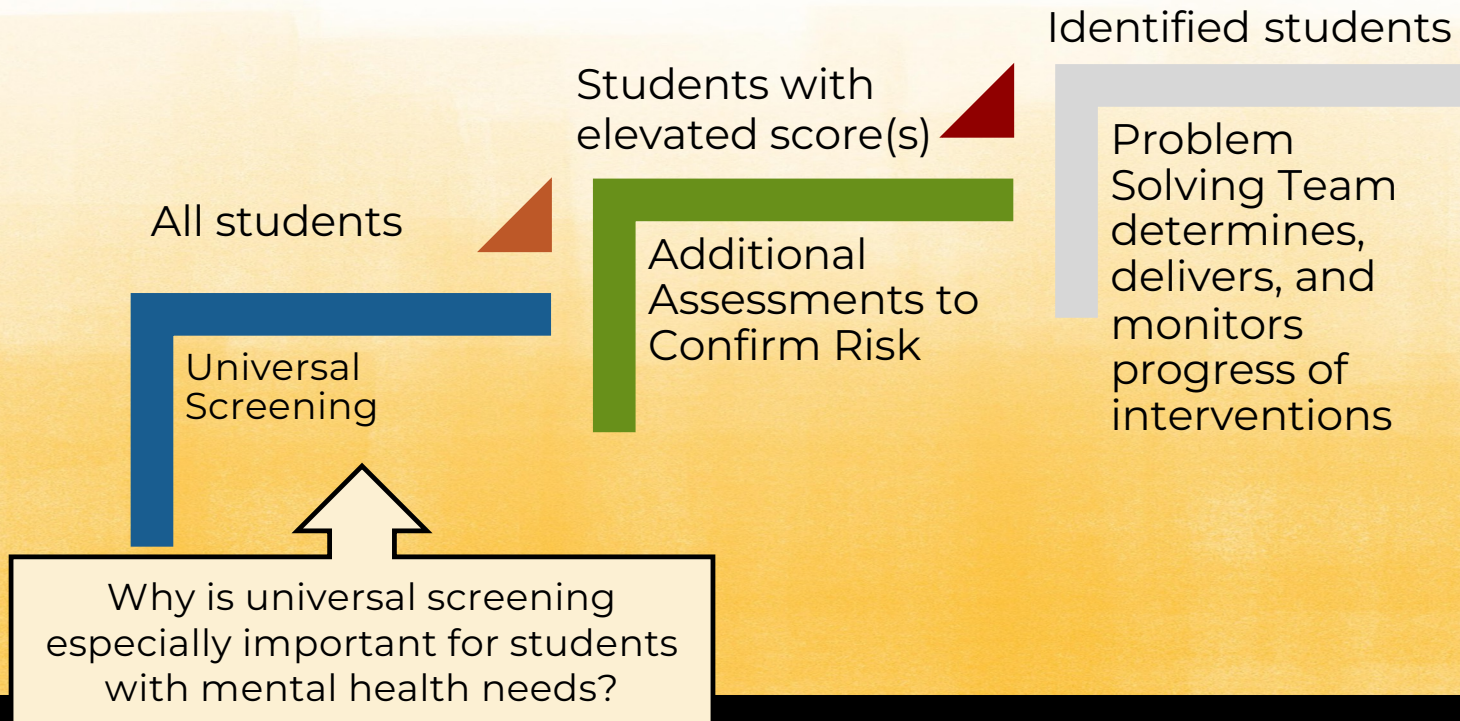
TIER 1

- Universal PBIS practices
 - MO SW-PBS 8 Effective Teaching and Learning Practices
 - Expectations
 - Positive reinforcement
 - Data Based Decision-Making
- Universal screening data
- Universal social, emotional, learning

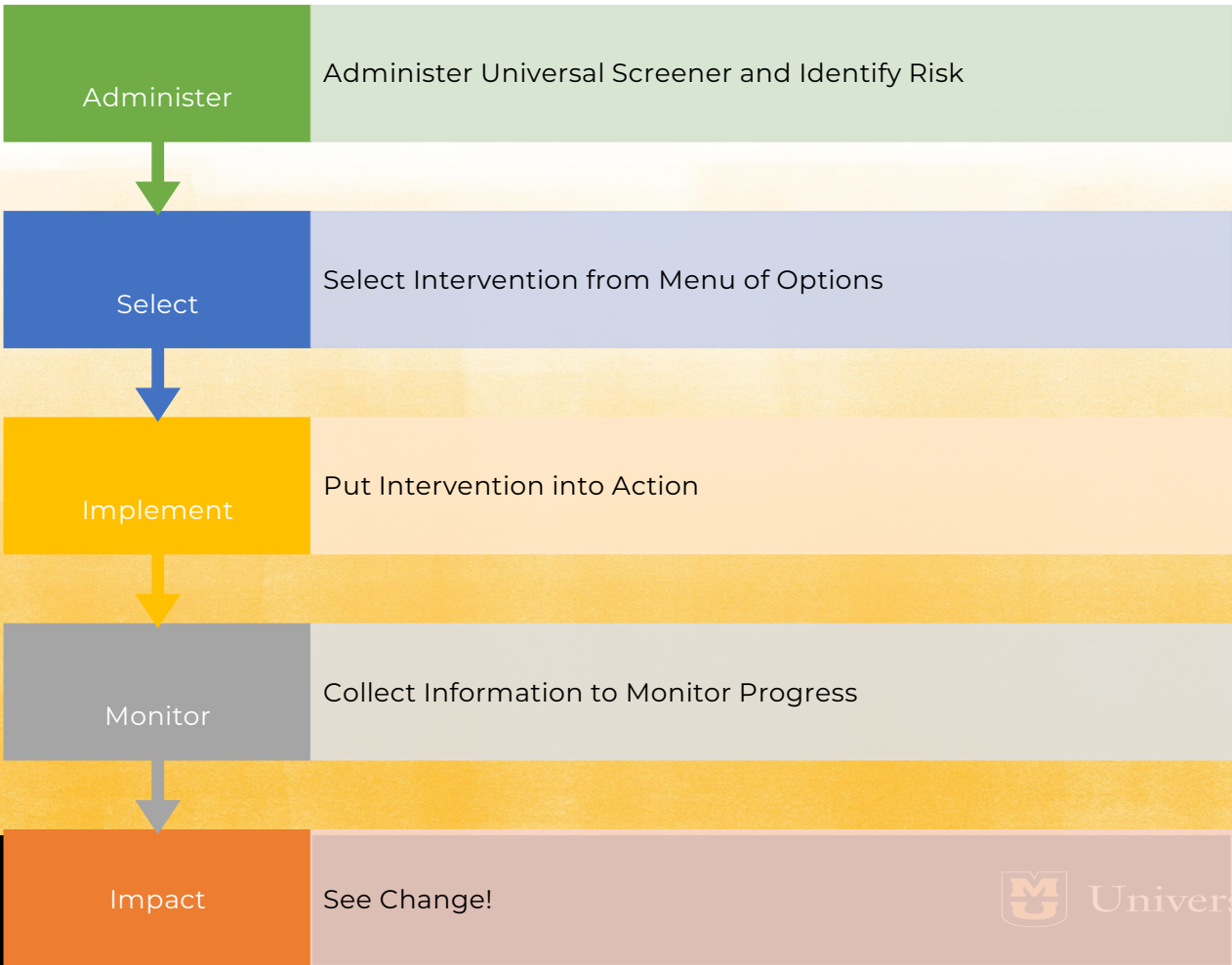


Universal: Tier 1
All

EARLY IDENTIFICATION SYSTEM FRAMEWORK



PHASES OF EARLY IDENTIFICATION SYSTEM MODEL



USE MULTIPLE DATA SOURCES TO IDENTIFY NEED

- No single data source is perfect
- Best practice is to use multiple data sources
- Consider combining screening data with other indicators of student need
 - ODR data, Attendance, Academics, Nurse visits
 - Teacher, staff, parent referrals

BUT....one of those data sources should include universal screening



TIER 1-UNIVERSAL SCREENING TOOL EX

- Early Identification System (EIS)

<https://moprevention.org/eis/>

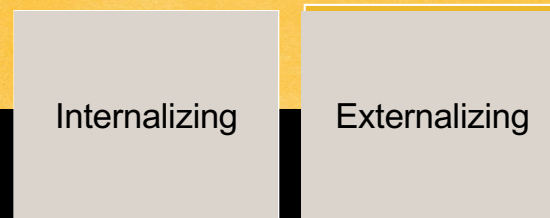
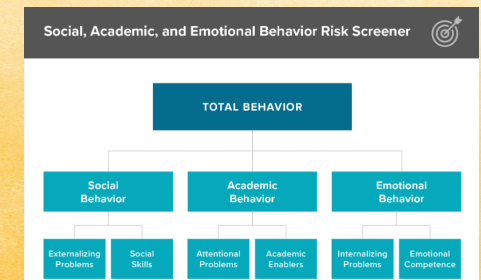


- Social, Academic, and Emotional Behavior Risk Screener (SAEBRS)

<https://www.illuminateed.com/products/fastbridge/social-emotional-behavior-assessment/saebrs/>

- Student Risk Screening Scale-Internalizing and Externalizing

<https://www.ci3t.org/screening>



EARLY IDENTIFICATION SYSTEM SURVEYS

Teacher Checklist

Teachers complete their EIS checklist in about 10 minutes for a class of 20 students. They are simply asked to place a checkmark by any student they believe might be experiencing the named risks.

The screenshot shows a digital checklist interface. At the top, there are three expandable sections: 'Attention and Academic Issues', 'Peer Relations', and 'Externalizing Behavior'. The 'Externalizing Behavior' section is expanded, showing a table with the following columns: 'Argues with adults', 'Blames others', 'Breaks rules', 'Breaks things on purpose', 'Is defiant', 'Is physically aggressive', 'Is verbally aggressive', and 'Lies'. The rows list four students: Anne-marie Clausewitz, Emelyne Grattan, Wyatt Heaven, and Waylin Higgoe. Checkmarks are present in the 'Breaks rules' column for Anne-marie Clausewitz and Wyatt Heaven, and in the 'Breaks things on purpose' column for Anne-marie Clausewitz. At the bottom of the table are three buttons: 'Cancel Evaluation', 'Save Progress', and 'Submit Checklist'.

Student EIS

Students complete the EIS in less than 10 minutes. They read a series of items like the one below:

1. I have friends to talk to at school



Previous Question



Always



Often



Sometimes



Never



Next Question



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OVERVIEW OF EIS SCREENING DATA (Teacher & Student Report)

- Screening is not diagnostic, not evaluative
- One source of data
- School and grade level data (percentage green, yellow, red)
- Individual data: Z-scores based on building-level comparisons (green, yellow, red)
 - Shows risk factors

Report Colors

Green (0%-14% of school population) indicates that this particular area is not a problem for this youth, grade level, or school.

Yellow (15%-19% of school population) indicates that this area may be something to give attention.

Red (20%+ of school population) indicates that this area is a concern in which attention may be warranted.

Report Percentages

The percentages associated with school level and grade level risk are based on a public health model. When 20% or more youth are identified as having this risk indicator, it is effective to intervene with larger groups of students, rather than trying to support each student one at a time. This helps to use scarce resources more efficiently.

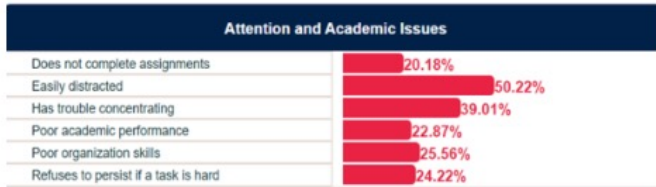


BUILDING LEVEL EIS SCREENING DATA EX

Teacher Checklist Building Report

Elementary | October 2022 | All Grades

Low Risk Some Risk Needs Attention



Click Indicator To Populate

Student Survey Building Report

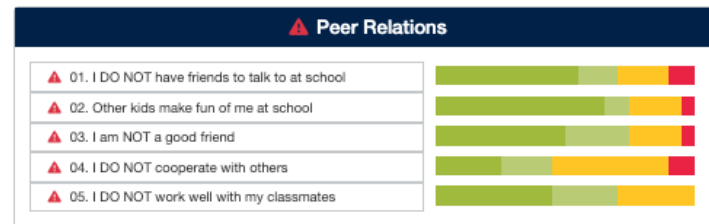
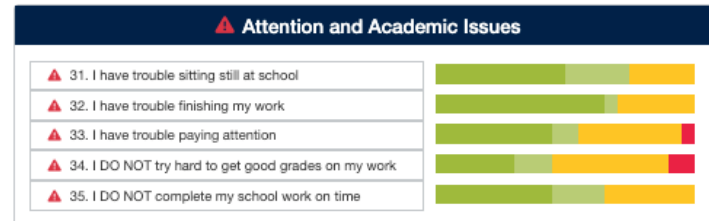
Gotham City High School | March 2026



Never Sometimes Often Always

Gender: Grade:

Click Indicator To Populate



ISF TIER 1-PRACTICAL EXAMPLE



K-5 building; PBIS



Universal SEL curriculum



Classroom teachers: Weekly Second Step lessons



School-Based Mental Health Providers from 2 different agencies



PBIS and Problem-Solving Teams

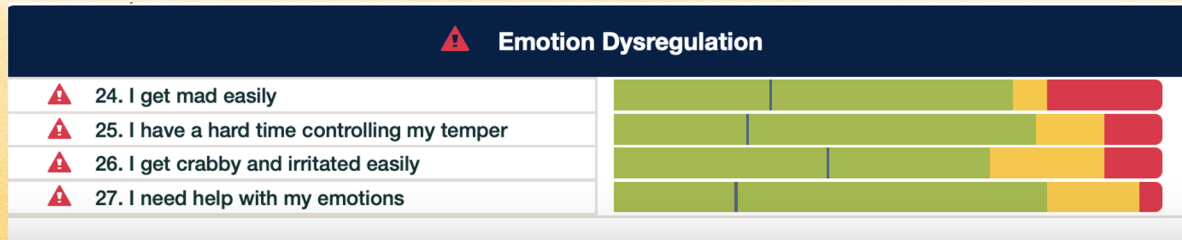


TIER 1-PRACTICAL EXAMPLE CTN

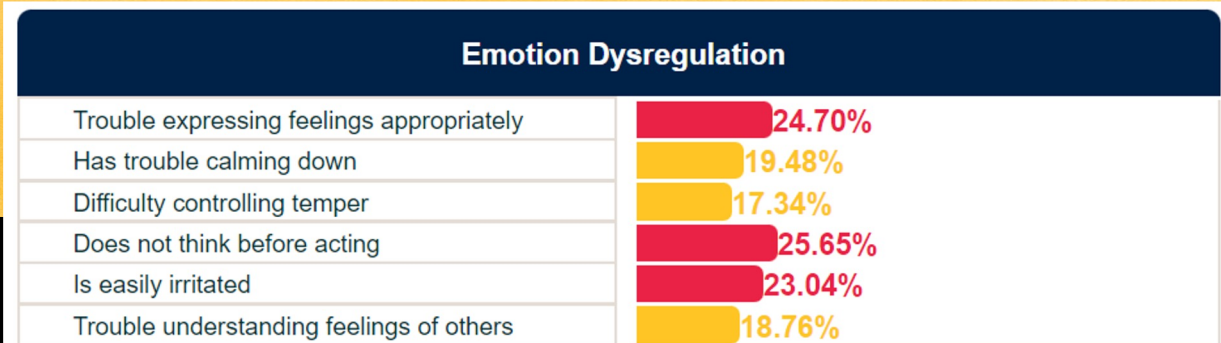
Universal screening Data

- Concerns for Emotion Regulation building-wide
- PBIS ODR data supported this

Student self-report grades 3-5:



Teacher report K-5:



TIER 1-PRACTICAL EXAMPLE CTN

Due to high percentage of students with Emotion Regulation Concerns
□ Tier 1

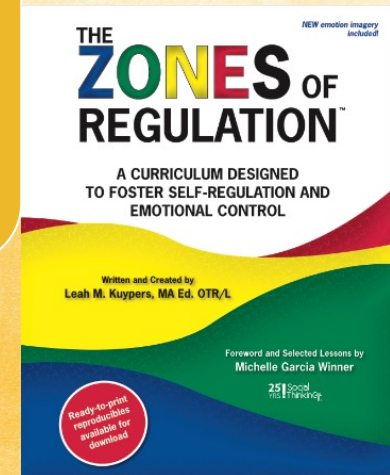
Universal Zones of Regulation instruction

Delivered by classroom teacher across grade levels & during Counseling Class

Materials and consultation support provided by:

- School counselor
- Agency School Mental Health Providers

Fidelity Support by Admin & Mentor



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TIER 2: TARGETED

TIER 2

- For students require more supports than Tier 1
- Identified through **multiple** data sources, including screening

Tier 2 interventions include increased:

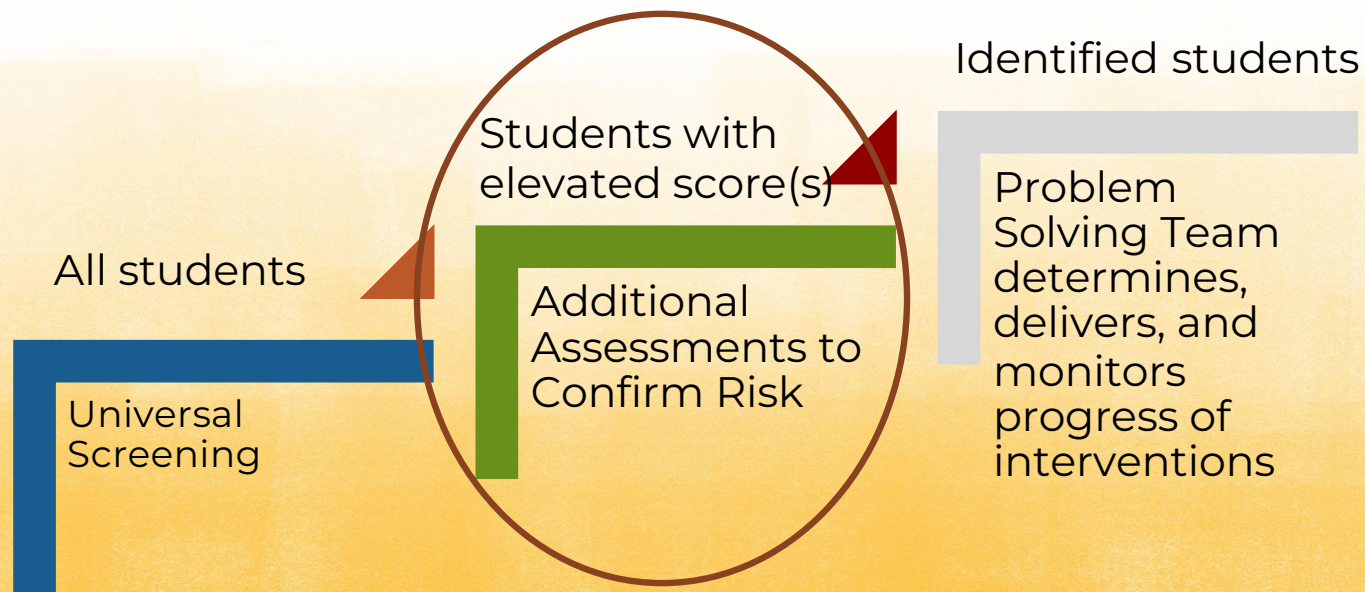
- Data collection & progress monitoring
- Feedback & reinforcement
- Adult interaction
- Skill or strategy instruction

Targeted: Tier 2
Some

Designed to reduce risk for developing more serious emotional or behavioral challenges

Tier 1 does not go away when Tier 2 is implemented

EARLY IDENTIFICATION FRAMEWORK



ISF TIER 2-PRACTICAL EXAMPLE



6-8th grade building; PBIS



Universal Expectations



School-Based Mental Health Providers from 3 different agencies



PBIS and Problem-Solving Teams



RUBRIC OF SERVICES

	Agency 1	Agency 2 Family Specialist	Agency 2 SMH Consultant	Agency 3
Needs Best Supported	<ul style="list-style-type: none"> Student needing both talk therapy and school-based skill building check-ins Psychiatry Physical health case management through health care program (if applicable) 	<ul style="list-style-type: none"> Chronic behavioral, social, or emotional concerns (intensive tier 3 needs) Parent/home related needs Intensive classroom planning/supports 	<ul style="list-style-type: none"> Moderate behavioral, social, emotional concerns (tier 2-3) 1 time per week sessions adequate to serve needs 	<ul style="list-style-type: none"> Adolescent mental health needs (Provider 1) 1 time per week sessions adequate to serve needs (Provider 1) Provider 2 is <u>k-12 once</u> per week
Types of Services	<ul style="list-style-type: none"> Individual talk therapy School-Based Services (skill building) Psychiatry (as needed) Small groups Connection to nurse case managers re: physical health needs 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Small group or individual student Interventions Therapeutic interventions using evidence-based curriculum School consultation 	<ul style="list-style-type: none"> Individual therapy Family Therapy (Provider 2) Can also possibly do groups (Provider 2)
Caseload	<ul style="list-style-type: none"> Not limited 	<ul style="list-style-type: none"> 10 students in K-12th grade 	<ul style="list-style-type: none"> NA-based on availability and need 	<ul style="list-style-type: none"> <u>10 Students</u>, 6th-12th grade (Provider 1) Fluid caseload K-12 (Provider 2)
Parent/guardian expectations	<ul style="list-style-type: none"> Signed informed consent Intake/assessment Periodic meetings 	<ul style="list-style-type: none"> Signed informed consent Participation in parent support intervention meetings 	<ul style="list-style-type: none"> Signed informed consent 	<ul style="list-style-type: none"> Signed informed consent Paperwork: Demographic info; consent to treat, Release, financial background
Fees	<ul style="list-style-type: none"> Medicaid = Free Non-Medicaid = grant or billed through insurance (<u>6 month</u> time limit) 	<ul style="list-style-type: none"> Free (funded by mental health tax) 	<ul style="list-style-type: none"> Free (funded by mental health tax) 	<ul style="list-style-type: none"> Free (Funded by mental health tax) No time limits, based on client progress
How to access services	<ul style="list-style-type: none"> Submit referral to Agency 	<ul style="list-style-type: none"> Through SAT/Care Team/Problem Solving Team 	<ul style="list-style-type: none"> Through SAT/Care/Problem Solving Team 	<ul style="list-style-type: none"> School to submit referral to Agency with above listed paperwork

TIER 2 EXAMPLE: INTERNALIZING

Schoolwide concerns re: attendance

Universal screening data indicated concerns re: internalizing on self-report



SELECTED STUDENTS FOR TIER 2: INTERNALIZING

Internalizing Behavior	
Teacher	Student
5.08	3.03
-0.37	2.86
-0.37	2.68
-0.37	2.50
-0.37	1.62
-0.37	1.62
N/A	1.44
-0.37	1.44
-0.37	1.26
-0.37	1.26

- Based off:
 - student self-report,
 - attendance,
 - consideration of contagion risk when selecting students for group

TIER 2: INTERNALIZING CBT GROUP



THERAPIST MANUAL

-  **F**IND YOUR FEELINGS
-  **I**NITIATE PROBLEM SOLVING
-  **R**ELAX YOUR MIND AND BODY
-  **S**CAN YOUR THOUGHTS
-  **T**RY THE OPPOSITE

Co-led with School counselor and agency SMH staff

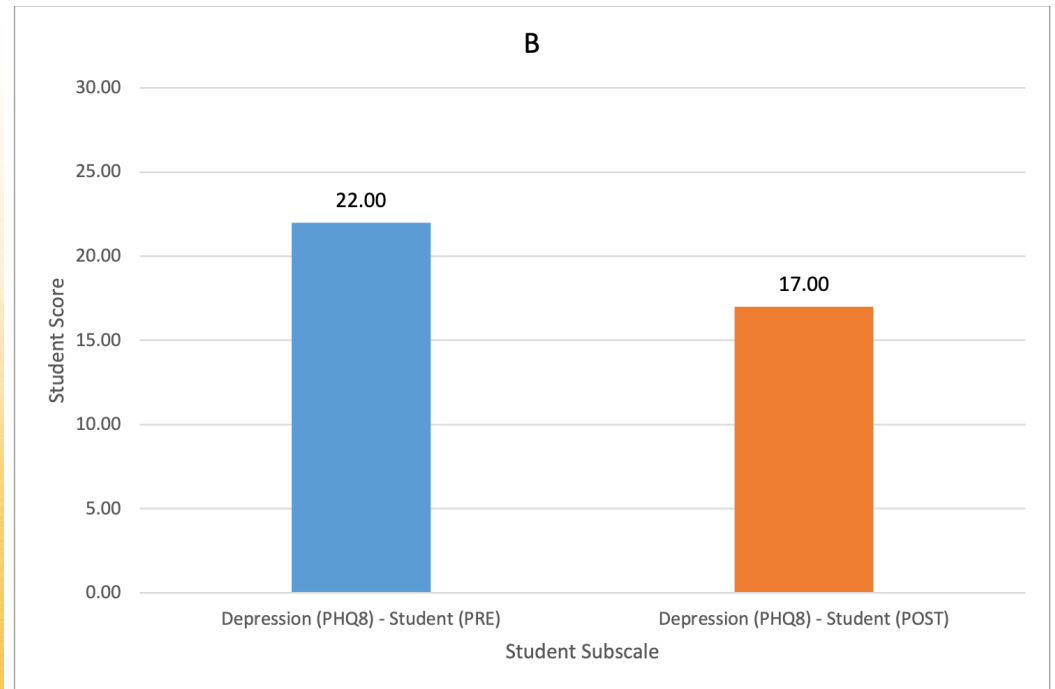
1:1 meeting with each group member prior to intervention

Pre-Assessment & Post-Assessment
(parent, teacher, student)

Weekly group sessions 6 Lessons

Weekly Mood Monitoring

PRE/POST TIER 2 EXAMPLE



Depression (PHQ8)

0 – 4: Minimal
5-9 Mild
10-14: Moderate
15-19: Moderately Severe
20-27: Severe

Higher Score = Lower Functioning

TIER 3: INTENSIVE

TIER 3: INDIVIDUALIZED INTERVENTIONS



Indiv:
Tier 3
Few

Data Considerations to determine need:

- Severity on the universal screening
- Pre/post or progress monitoring data showing Tier 1 and Tier 2 interventions not effective
- Student needs are better addressed through 1:1
- Building MTSS data decision rules

Key Implementers: *Varies on intervention type

- Counselor or school-based mental health
- Tier 3 behavior staff (function-based knowledge) and Problem Solving Team
- Wraparound facilitator
- Special educators (as appropriate)
- Community mental health
- Other intervention implementers



ISF TIER 3 EXAMPLE

Elementary School (k-5); Student 4th grader

Universal SEL: Second Step (had received all years of elementary)

Special education services

Check In Check Out

Universal Screening, ODRs, parent, teacher, and admin report all high concerns for peer relationships and externalizing – Bullying suspensions

Student self-report high for bullying behavior

Teacher Student Construct Names

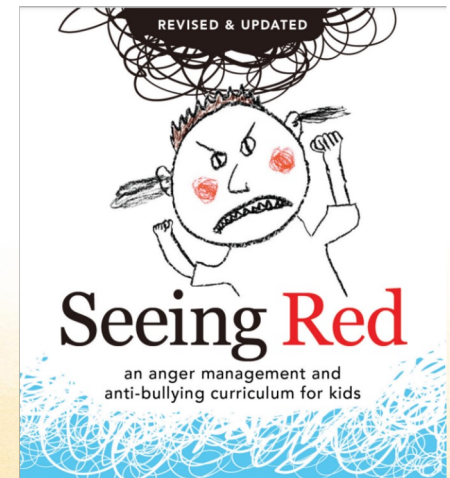
Attention and Academic Issues		Peer Relations		Externalizing Behavior		Internalizing Behavior		Mean to Others		I am Bullied		School Disengagement		Emotion Dysregulation	
Teacher	Student	Teacher	Student	Teacher	Student	Teacher	Student	Teacher	Student	Teacher	Student	Teacher	Student	Teacher	Student
1.86	0.59	1.00	0.31	1.82	1.05	3.18	-0.98	3.71	3.34	-0.18	-0.70	N/A	-0.61	2.45	1.79

TIER 3 EXAMPLE CTN.

Due to bullying behavior and peer concerns, Problem Solving Team determined not appropriate for social skills group.

Individualized Plan:

- Continue with Universal Second Steps
- Continue with small group behavior/executive functioning in SPED
- Continue with CICO
- **ADD** individual intervention (Anti-Bullying Curriculum)
 - Taught by mental health professional
- **ADD** Weekly Progress Monitoring
 - Top Problems Assessment

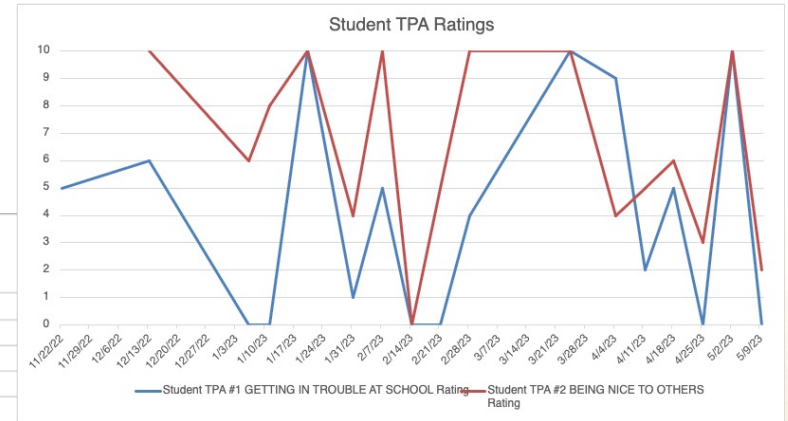
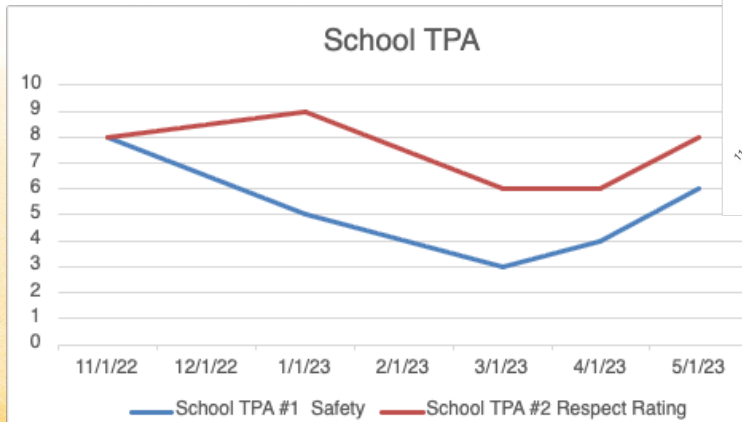


Ongoing collaboration between mental health provider, IEP case manager, and administration

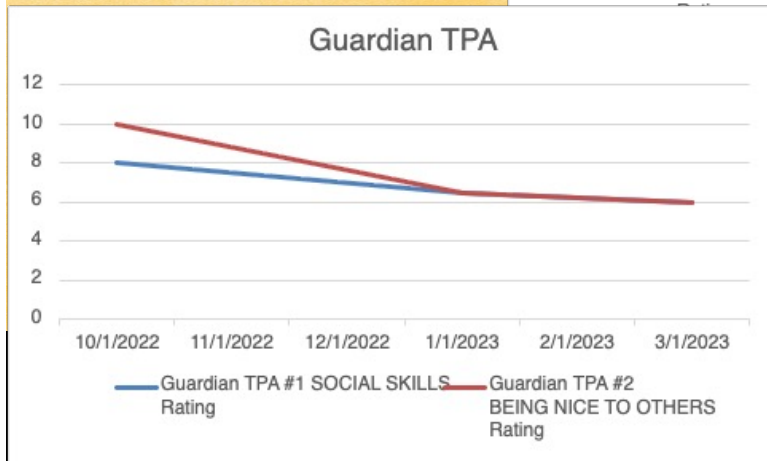
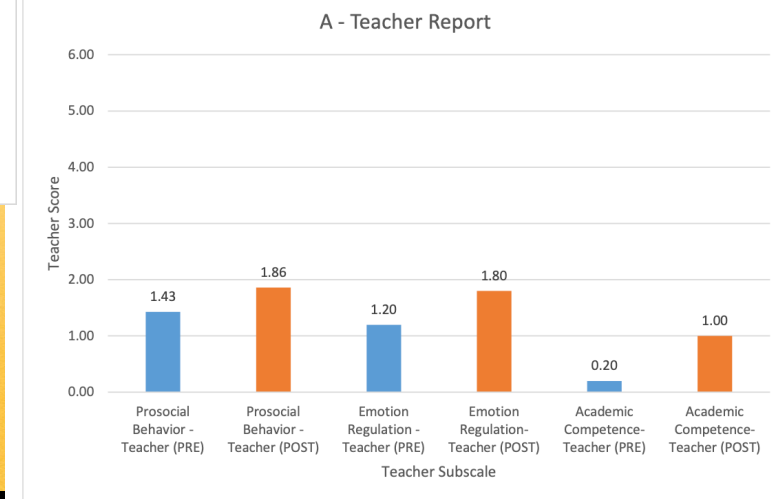


TIER 3 EXAMPLE CTN.

In addition to IEP data, ODR data, CICO data



Teacher Report



Scoring Information

Prosocial Behavior	Range 0-5	Higher Score = Higher Functioning
Emotion Regulation	Range 0-5	Higher Score = Higher Functioning
Academic Competence	Range 0-5	Higher Score = Higher Functioning

Resources



ISF KEY RESOURCES

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

Volume 2: An Implementation Guide



- [National Center on PBIS Mental Health and Interconnected Systems Framework](#)
- [Midwest PBIS Network Getting Started with ISF](#)
- [National Center on PBIS mental health](#)

<https://www.pbis.org/resource/interconnecting-school-mental-health-and-pbis-volume-2>

ISF: Highlighted Tools

National Center PBIS and Midwest PBIS Resources:

[ISF Implementation Guide Version 2](#)

[ISF Installation Guide-District/Community Level](#)

[ISF Installation Guide-School Level](#)

[Resources ISF School Installation](#)

[Resources ISF District Installation](#)

[ISF Companion to Tiered Fidelity Inventory](#)



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.

ISF-Step 1 Teaming



ALIGNING TEAMING STRUCTURES

Use the PBIS/MTSS teams and systems you already have

[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?



Memorandum of Understanding

- 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

Tool: ISF Implementation MH Agency Checklist

Complete quarterly with your coach					
Status: A = Achieved, I = In Progress, N = Not Yet Started					
		Date:			
ESTABLISH COMMITMENT		Goal to achieve by			
1. Agency's Support & Active Involvement <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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			
3. District and Community Leadership Team Established <ul style="list-style-type: none"> 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:				
4. School Building System Teams <ul style="list-style-type: none"> 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:				

ISF-Step 2 Assess Current Systems, Data, and Practices

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 development exists including coaching and performance feedback?

INTEGRATED DATA NEEDS ASSESSMENT

[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

Traditional School Data	Expanded School Data	Community Data
<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Nursing /School Counselor logs • Teacher ratings of student social emotional behavior/effort (Universal screening data) • Student, staff, and family focus groups • Family screener • Climate data 	<ul style="list-style-type: none"> • 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 schedules

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
Inside the school	Mr. Oriole School Psychologist	<i>Educational Testing, Meeting with Students who have Counseling Services on IEP, Leads School Improvement Team</i>	Wednesdays and Fridays 8:00-3:00	Email moriole@gmail.com	All students, but required to meet all IEP requirements
	Ms. Raven School Social Worker	<i>Lead Student Support Team, Manage Attendance Team, Meetings, Meets with Students with Counseling Services on IEP</i>	M, T, W from 8:00-3:00	Extension 458	All students, but required to meet all IEP requirements
	Outpatient Success Services	<i>School-based individual and group counseling</i>	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	<i>After school enrichment program</i>	Monday-Friday 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

ISF-Step 3 Establish School Level Procedures and Routines of MTSS

UNIVERSAL SCREENING TIMELINE

[ISF District Leadership Installation Guide](#)

4a: Selecting and installing a universal screener

[ISF School Installation Guide](#)

3a: Develop a process for implementing universal screening

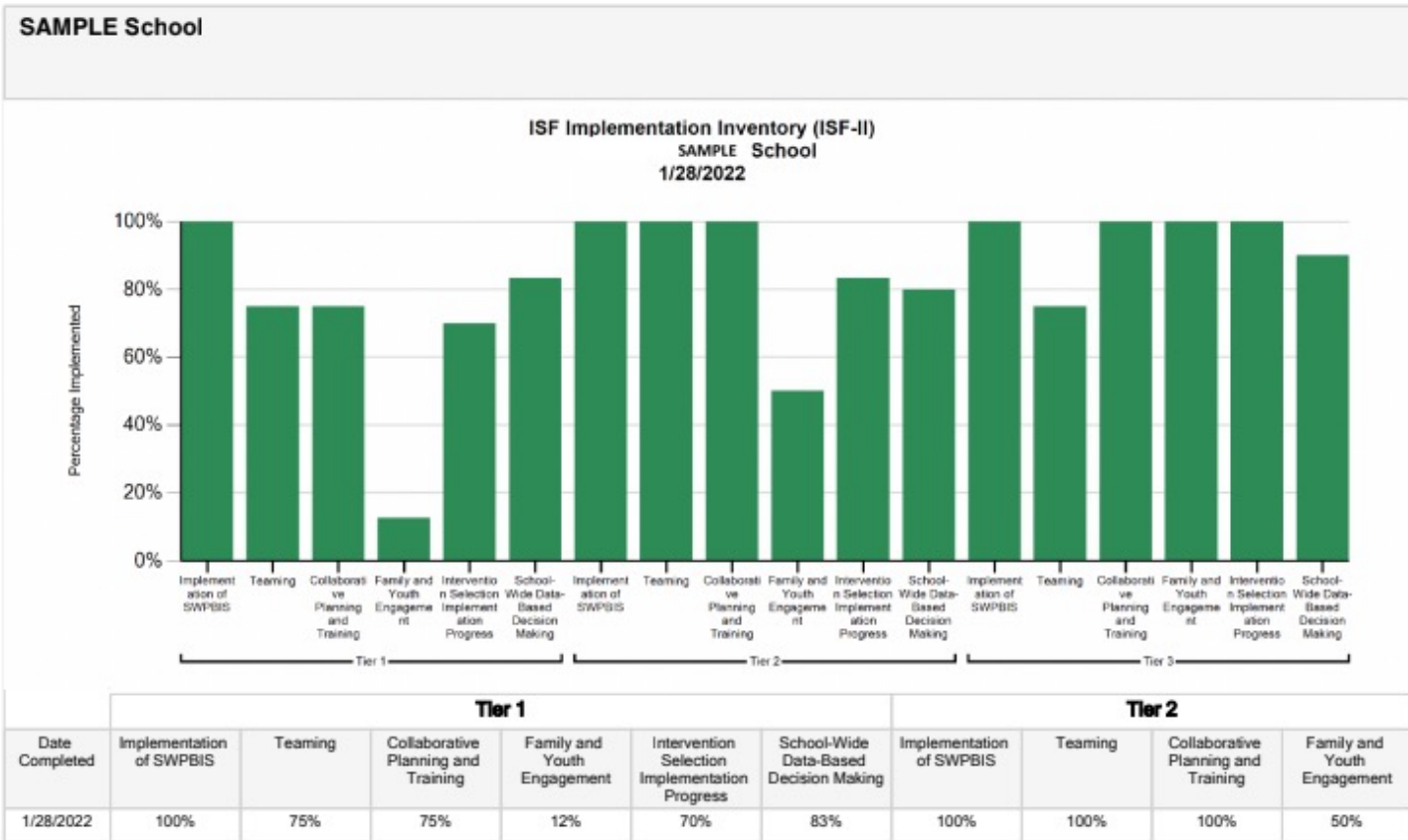
Interconnected Systems Framework Universal Screener Timeline

Purpose: The purpose of this document is to lay out what a possible timeline could look like for the Universal Screening process and who might need to be involved with each step. Considerations are made for professional development and communication necessary for the transparent delivery of a Universal Screener that stakeholders support and the results in more youth being supported by appropriate interventions.

Universal Screener Timeline		
What	Tasks to be Accomplished	When
Early Stage Preparation For District-Level Leadership	<ul style="list-style-type: none"> ○ Present Universal Screening proposal to Superintendent, Board Cabinet, District Leadership Team & Building Administrators ○ Gain support regarding the adoption of a protocol to determine which screening instrument will be used, and how information will be shared with stakeholders ○ Schedule screening dates with administrators (in collaboration with District Level plans) ○ Notify Building Administrators (if they weren't already included) and identify building coaches (i.e. Tier II coaches, etc.) about Universal Screener Facilitator Training ○ Develop Parent Information/Consent Letter ○ Train coaches as Universal Screening Facilitator 	August - September
Early Stage Preparation For Building-Level Coaches/Facilitators	<ul style="list-style-type: none"> ○ Ensure that school leaders develop fluency with explaining the need, value, and logistics of universal screening with teachers and families ○ Prepare staff with Universal Screener training session ○ Prepare screening protocols for scoring ○ Ensure that Check In Check Out (or any other Tier II intervention(s) are being implemented with fidelity <i>before</i> distributing any screener 	August - September
	<ul style="list-style-type: none"> ○ Review- brief overview of process 	

ISF Step 4 – Develop Integrated Action Plan

ISF IMPLEMENTATION INVENTORY-V3



ISF ACTION PLANNING COMPANION TO THE 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

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Fidelity Inventory: Tier I Features

ely 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.

Implementation

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

OTHER RESOURCES



INTEGRATED SEB MATRIX

Figure 6.2 Teaching Matrix of Social-Emotional-Behavioral Skills

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

DATA-BASED DECISION MAKING RESOURCES

[School Mental Health Collaborative: Screening Best Practices](#)

[Center on PBIS Screening Tools](#)

[Center on PBIS Data-Based Decision Making](#)

[ISF Implementation Inventory](#)

[SHAPE School Mental Health Assessment](#)

[National Center Intensive Intervention](#)

[National Center Rural School Mental Health Implementation Hub](#)

- [Data Collection, Goal Setting, Progress Monitoring](#)

SELECTING EVIDENCE-BASED PRACTICES

- [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 SMH



Welcome ▾

- [Calculator](#)
- [Professional Development](#)
- [Intervention Hub](#)
- [Implementation Hub](#)
- [Resources](#)
- [Policy Blog](#)

Enhancing the Capacity of Rural Schools to **Identify, Prevent, and Intervene** in Youth Mental Health Concerns

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.

[Learn more >](#)

What will participation for rural school partners look like?








- + 1 Partnership Development
- + 2 Expansion of the Early Identification System
- + 3 Evaluation of the Early Identification System Model

NCRMSH INTERVENTION HUB

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.**

 Attention and Academic Issues	 Peer Relationship Problems	 Externalizing Behaviors	 Internalizing Behaviors
 Emotional Dysregulation	 School Disengagement	 Bullying Behaviors	

Early Identification System (EIS) Intervention Hub

EIS Intervention Hub > **Attention and Academic Issues**

Select the targeted age group, then the level of intervention.

 Attention and Academic Issues	K-5 Elementary School	Tier 1: Universal
	6-8 Middle School	Tier 2: Selective
	9-12 High School	Tier 3: Indicated

<https://ruralsmh.com/intervention-hub/>

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

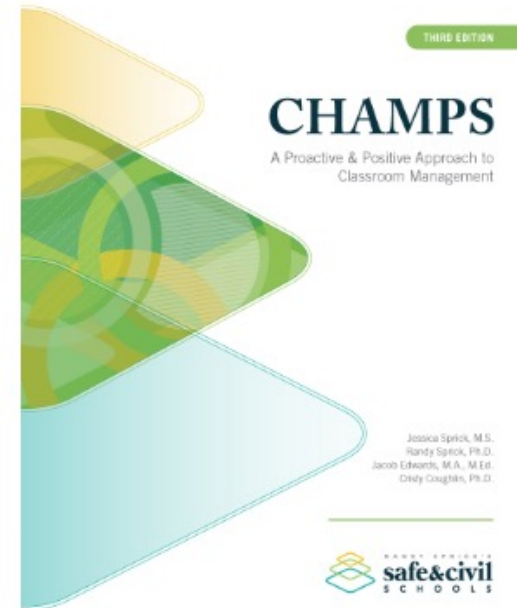
Success defined by student impact (data)

Use MTSS framework to guide integration

RURAL MIDDLE SCHOOL OPPORTUNITY

CHAMPS:

- Evaluation of a Classroom Management Program for Rural Middle School Teachers
- Classroom management training and coaching for general education core subject teachers
- Email seldersk@Missouri.edu to learn more!



Thank you!

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Resources

