Aligning PBIS Efforts with School-Linked Mental Grant Support

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Ten Minnesota Commitments to Equity

1. Prioritize equity.
2. Start from within.
4. Go local.
5. Follow the money.
7. Monitor implementation of standards.
8. Value people.
10. Give students options.
Overview

History of Positive Behavioral Interventions and Supports (PBIS)

History of School Linked Mental Health (SLMH) Grants

Working across state agencies DHS and MDE

Alignment of these two initiatives
History of PBIS in Minnesota
What is PBIS?

- A systemic **framework** which supports the implementation of practices to improve student success and school climate
- About increasing **positive interactions** between adults and students
- About **continual use of data** to make decisions
- Responsive to the unique **context** and **cultures** of each school or program
Sec. 3. (122A.627) POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS.

"Positive behavioral interventions and supports" or "PBIS" means an evidence-based framework for preventing problem behavior, providing instruction and support for positive and prosocial behaviors, and supporting social, emotional, and behavioral needs for all students. Schoolwide implementation of PBIS requires training, coaching, and evaluation for school staff to consistently implement the key components that make PBIS effective for all students, including:

(1) establishing, defining, teaching, and practicing rules to five positively stated schoolwide behavioral expectations that are representative of the local community and cultures;

(2) developing and implementing a consistent system used by all staff to provide positive feedback and acknowledgment for students who display schoolwide behavioral expectations;

(3) developing and implementing a consistent and specialized support system for students who do not display behaviors representative of schoolwide positive expectations;

(4) developing a system to support decisions based on data related to student progress, effective implementation of behavioral practices, and screening for students requiring additional behavior supports;

(5) using a continuum of evidence-based interventions that is integrated and aligned to support academic and behavioral success for all students, and

(6) using a data-based approach to support effective implementation, monitor progress, and evaluate outcomes.
PBIS Definition in Practice

School Leadership Team that supports all staff, students, and families with:

3-5 positive expectations, taught and practiced

Acknowledgement and feedback system

Continuum of procedures to support Behavior

Data-based decision making

Source: https://www.revisor.mn.gov/laws/?id=5&year=2017&type=1#laws.2.26.0
<table>
<thead>
<tr>
<th>Research-supported outcomes</th>
</tr>
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<tbody>
<tr>
<td>- Reductions in major disciplinary infractions and antisocial behavior.</td>
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<tr>
<td>- Improvements in aggressive behavior, concentration, prosocial behavior, and emotional regulation</td>
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<tr>
<td>- Improvements in academic engagement and achievement</td>
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<tr>
<td>- Enhancements in perceptions of organizational health and safety</td>
</tr>
<tr>
<td>- Reductions in teacher and student reported bullying behavior, peer rejection, and substance abuse</td>
</tr>
<tr>
<td>- Improvements in school climate</td>
</tr>
</tbody>
</table>

Growth of PBIS in Minnesota: 2005-Present

769

Cohort 15
79 more schools!
PBIS by the Numbers in Minnesota

• **242** Districts/Charters

• **769** Schools
  
  o **60%** Early Childhood and Elementary  
  o **15%** Middle School  
  o **25%** High Schools or ALC’s

• **37%** of the state’s schools
Cohorts 1-15
(2005-2021)

- Three PBIS Regions in Minnesota
  - Northern
    - Regions 1, 2, 3, 4, 5 & 7
  - Metro
    - Region 11
  - Southern
    - Regions 6, 8, 9 & 10
History of School Linked Mental Health Grants
Why Mental Health Treatment in Schools?

• Youth are 6x more likely to complete mental health treatment in schools than in community settings (Jaycox et al., 2010)

• Mental health treatment has large effects on decreasing mental health symptoms (Sanchez et al., 2018)

• Mental health services are most effective when they are integrated into students’ academic instruction (Sanchez et al., 2018)
History of School Linked Mental Health Grants

Early Round of DHS Grants to 22 Collaboratives (2006-2008)

First Round of DHS SLMH Grants (2008-2013)
  • 20 grantees serving 65 counties, about 150 districts and 450 schools
  • 22% of the public schools; 46% of the school districts
  • State Grant Funds- $4.7 Million

  • 36 grants serving 79 counties, 287 school districts and 953 school programs
  • 46% of the public schools; 52% of the school districts
  • 14,971 students
  • State Grant Funds- $9.54 Million

Current annual funding: $11 Million
Third Round of DHS SLMH Grants (2018-2021)

- 28 contracts with 57 Providers
- 1100+ School programs within 300 School Districts
- Projected number of students: 18,000
- Annual budget: 11 million
Three general categories:

- **Direct clinical services, and**
  - To underinsured and uninsured children

- **Ancillary services, and**
  - Consultation time with school staff, attendance at IEP meetings, school-wide trainings

- **Capacity enhancement**
  - Building and sustaining a work force of trained clinicians
Evidence-Based Practices

- Greater focus on clinical services using Evidence Based Practices (EBP)
  - Includes Capacity Enhancement – to strengthen clinical infrastructure by providing training and consultation in EBP
  - Focus on three EBP:
    - Managing and Adapting Practice (MAP)
      - [https://www.practicewise.com/Community/MAP](https://www.practicewise.com/Community/MAP)
    - Trauma-focused Cognitive Behavior Therapy (TF-CBT)
      - [http://www.nctsn.org/sites/default/files/assets/pdfs/tfcbt_general.pdf](http://www.nctsn.org/sites/default/files/assets/pdfs/tfcbt_general.pdf)
    - Cognitive Behavior Intervention for Trauma in Schools (CBITS)
      - [http://www.nctsn.org/sites/default/files/assets/pdfs/cbits_general.pdf](http://www.nctsn.org/sites/default/files/assets/pdfs/cbits_general.pdf)
Grantee duties

Achieve the Project Outcomes:

1. Improve clinical and functional outcomes for students through the provision of direct clinical and ancillary mental health services.

2. Improve clinical service quality through the support, training, and provision of evidence-based treatments.

3. Increase in the number of mental health clinicians who are trained in and providing Evidence-Based Practices (EBP).

4. Improve capacity and infrastructure development to support the expansion and sustainability of services long-term throughout the state of Minnesota.

5. Develop and strengthen partnerships between mental health providers and host school districts and Increase the number of school districts who have both a School-Linked Mental Health (SLMH) and Positive Behavioral Interventions and Supports (PBIS) framework.
School-Linked Mental Health Grant Appropriations
WHAT ARE COMPREHENSIVE SCHOOL MENTAL HEALTH SYSTEMS?

Comprehensive School Mental Health Systems (CSMHS) provide a full array of tiered supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness and substance use. CSMHSs are built on a strong foundation of district and school professionals, including administrators and educators, specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses, and other school health professionals), in strategic collaboration with students, families, and community health and mental health partners. These systems also assess and address the social, political, and environmental structures, including public policies and social norms, that influence mental health outcomes.
Alignment of PBIS and SLMH
Why Schools?

• One-fifth of the U.S. population can be found in schools

• Opportunity for mental health promotion, early identification and intervention, and clinical treatment

• Increase access and decrease stigma

• Untreated mental health issues are a significant barrier to learning and educational success
## Current National Data: Principals’ Concerns
Areas Characterized an Extreme or High Concern by 50% or More Principals, 2018

<table>
<thead>
<tr>
<th>AREA</th>
<th>% of Principals</th>
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<tbody>
<tr>
<td>Increase in the number of students with emotional problems</td>
<td>73.7</td>
</tr>
<tr>
<td>Student mental health issues</td>
<td>65.5</td>
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<tr>
<td>Students not performing to their level of potential</td>
<td>62.3</td>
</tr>
<tr>
<td>Providing a continuum of services for students who are at risk</td>
<td>61.6</td>
</tr>
<tr>
<td>Student assessment</td>
<td>57.2</td>
</tr>
<tr>
<td>Student poverty</td>
<td>56.5</td>
</tr>
<tr>
<td>Instructional practices</td>
<td>55.8</td>
</tr>
<tr>
<td>Teacher performance/effectiveness</td>
<td>55.1</td>
</tr>
<tr>
<td>Professional development of staff</td>
<td>55.0</td>
</tr>
<tr>
<td>Fragmentation of principal's time</td>
<td>53.5</td>
</tr>
<tr>
<td>Management of student behavior</td>
<td>52.5</td>
</tr>
<tr>
<td>Financial resources</td>
<td>50.8</td>
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*The Pre-K-8 School Leader in 2018: A 10 Year Study*, from the [National Association of Elementary School Principals](https://www.naees.org) and the [University Council for Educational Administration](https://www.ucea.org)
Partnering with the Minnesota Division of Human Services
School-Linked Mental Health Grants

• Two funded systems—SLMH and PBIS—have become increasingly aligned over the years

• Numbers from the current SLMH grant
  • 1,100+ schools served by SLMH grantees;
  • 41% (506) are PBIS buildings
  • 67% of all cohort-trained PBIS schools are served by an SLMH grantee

• The Core Components of both SLMH Grants and PBIS support and enhance opportunities of partnership between SLMH and host schools

• Both support mental health of all students

• Prevention, early access commensurate with level of need
• School-based mental health services reach children in typical, every-day environments. The natural, non-stigmatizing location offers an early and effective environment for intervention.

• These school-connected clinical mental health treatments include interventions that:

  Improve identification of mental health issues for children and youth

  Increase accessibility for children and youth who are uninsured or underinsured

  Improve clinical and functional outcomes for children and youth with a mental health diagnosis
### Give and Get Agreement

**School Linked Mental Health (SLMH) to Children and Families Across Minnesota**

**SLMH & School Partnership Give and Get Agreement**

<table>
<thead>
<tr>
<th>Focus Area</th>
<th>SLMH Get</th>
<th>School Get</th>
<th>SLMH Give</th>
<th>School Give</th>
<th>Shared Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaboratively identifying and implementing an Evidence Based Practice (EBP)</td>
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<td></td>
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<tr>
<td>Data-based decision making</td>
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<tr>
<td>Professional Development (PD)</td>
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</table>

- Allows for mutual selection
- Better understanding of what is expected between schools and grantees
- Supports buy-in from the beginning

- Promote a common vision in service to student outcomes through school and community staff collaboration
- Outcomes should be measureable
## Give and Get Chart Example

### School Linked Mental Health (SLMH) to Children and Families Across Minnesota

<table>
<thead>
<tr>
<th>Focus Area</th>
<th>SLMH Got</th>
<th>School Got</th>
<th>SLMH Give</th>
<th>School Give</th>
<th>Shared Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaboratively identifying and implementing an Evidence Based Practice (EBP)</td>
<td>SLMH staff have a clear understanding of how to implement the identified EBP via direct clinical services and/or ancillary supports within the context and needs of the partnering school.</td>
<td>School staff have a clear understanding of the capacity of the SLMH provider agency to implement the EBP within their school via direct clinical services and/or ancillary supports.</td>
<td>SLMH staff provide a menu of opportunities of EBPs, direct clinical services and/or ancillary services (e.g., training, consultation, etc.) available to support the requirements and priorities of the grant.</td>
<td>School staff will provide time, resources and appropriate space to implement SLMH EBP (clinical service or and/or ancillary services) within existing multi-tiered system of support (MTSS) e.g., PBIS.</td>
<td>SLMH staff grantee and designated school staff have identified (e.g., resource mapping) agreed upon EBPs across the tiers and are implementing the identified EBPs with fidelity.</td>
</tr>
<tr>
<td>Data-based decision making</td>
<td>Access to data reflecting school MTSS* system (e.g., PBIS), including a process to identify students needing additional support and or who would benefit from the identified SLMH EBP.</td>
<td>Transparency and precision in the implementation of SLMH EBP, evidence of educational and medical legal requirements (i.e., HIPPA, FERPA) with designated school team.</td>
<td>Agreement to collect and share implementation and progress data within the guidelines of both educational and medical legal requirements (i.e., HIPP, FERPA, FERPA) with designated school team.</td>
<td>Provide regular access to data review meetings to systematically identify students or groups of students who would likely benefit from SLMH EBP.</td>
<td>Transparency in the process of monitoring the implementation of SLMH EBP, identification of students who would benefit from SLMH EBP.</td>
</tr>
<tr>
<td>Professional Development (PD)</td>
<td>SLMH team staff will have opportunity to participate in school PD opportunities to understand the culture of a school building and how SLMH services can be aligned within the educational setting.</td>
<td>School staff develops a better understanding of the SLMH staff role as well as the EBPs being provided to students across tiers.</td>
<td>SLMH staff will provide the professional development for school staff to related to mental health in schools across tiers and info on EBPs being provided.</td>
<td>School staff will provide access to SLMH staff to participate in school PD opportunities to learn about school culture and systems to better align supports across existing tiers.</td>
<td>School staff and SLMH staff will develop a mutual understanding of each partner's role and function in a multi-tiered and multi-disciplinary relationship.</td>
</tr>
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7/16/2019  
Leading for educational excellence and equity, every day for every one.  
education.state.mn.us
“...joining our best programs to our best implementation strategies...”

“[I]n the form of PBIS and MTSS, the education sector benefits from ‘operating systems’ that are not only informed by implementation science, but that attempt to mobilize implementation science via an organized system of practical strategies....[O]ne could argue that school mental health and positive behavioral support provides one of the most comprehensive examples currently available for the potential power of implementation science to promote evidence-based programs....By joining our best programs to our best implementation strategies, we can meaningfully advance both the emerging field of implementation science and the social, emotional, and behavioral wellness of our students.” (pp. 111-112)

Continuum Logic: Support for All

Universal

Primary Prevention (Tier 1)
- All students
- All staff
- All settings

Targeted

Secondary Prevention (Tier 2)
- Group implemented
- More differentiated
- More specialized

Intensive

Tertiary Prevention (Tier 3)
- Most individualized
- Most differentiated
- Most specialized
**MN PBIS School Examples of Tiered Support Services Map**

<table>
<thead>
<tr>
<th>PRIMARY</th>
<th>SECONDARY</th>
<th>TERTIARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Teaching and recognizing positive school-wide behavioral expectations</td>
<td>• Targeted social skills training</td>
<td>• Check in/out</td>
</tr>
<tr>
<td>• Proactive school-wide discipline</td>
<td>• Peer-based tutoring</td>
<td>• Specialized and individualized instruction/intervention</td>
</tr>
<tr>
<td>• Effective academic instruction/curriculum</td>
<td>• Social skills club</td>
<td>• Crisis prevention and intervention</td>
</tr>
<tr>
<td>• 3-5 positively stated expectations</td>
<td>• Behavioral contracting</td>
<td>• Function-based support</td>
</tr>
<tr>
<td>• Active supervision</td>
<td>• Cognitive-behavioral counseling</td>
<td>• Wraparound/person-centered planning</td>
</tr>
</tbody>
</table>
Help teams go from this...
Culturally Responsive School-wide Social Skills Instruction
Trauma Informed Cognitive Behavior Counseling
Check In Connect Check Out
Targeted Group Social Skills Instruction
Positive Reinforcement
Restorative Discipline
Culturally Responsive School-wide Social Skills Instruction
Instructional Classroom Management

Wraparound Function-based Support
Academic and Behavior Success
School-Wide Systems for Student Success: A Multi-Tiered System of Support (MTSS) Model: 

*Organizing Supports and Systems Not people*

Grantee Systems

- Tier 3/Tertiary Interventions 1-5%
- Tier 2/Secondary Interventions 5-15%
- Tier 1/Universal Interventions 80-90%

School Systems

- Tier 3/Tertiary Interventions 1-5%
- Tier 2/Secondary Interventions 5-15%
- Tier 1/Universal Interventions 80-90%

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A project to study SLMH and PBIS alignment in a sample of schools

- Staff FTE of 1.0 or more in the school
- Geographic location
- Student age
- Type of program
- Review of Give and Get
- Tier 2 and 3 scores if needed
- Cohort-trained and out of training for at least a year
- Fidelity, measured within the last year, at or above 70 for Tier 1 on the TFI or comparable fidelity measure
PBIS and SLMH Alignment Outcomes

• Intentionally and systematically interconnecting school mental health and PBIS/MTSS

• Earlier access to EBPs with enhanced prevention services

• Higher quality of care when practices are implemented within a tiered framework

• Clearly defined roles and relationships among school-employed and community-employed providers

• Cross-system leadership and training will promote common approach
• Interventions will have an increased likelihood of generalization with impact across settings

• Accessing services within the school setting will become less stigmatizing

• Effective cross-teaming structures will promote communication, coordination of services, and enhanced family engagement with systematic ways to progress monitor and measure impact or fidelity

• Linking the professionals in these two systems into a complimentary process that utilizes the combined strengths of each
Questions, Other Takeaways and Websites

• Department of Human Services School Linked Mental Health
  • https://mn.gov/dhs/partners-and-providers/policies-procedures/childrens-mental-health/school-linked-mh-services/

• Minnesota Positive Behavior Interventions and Supports
  • http://pbismn.org/
Thank you!

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