



Kansans **CAN**

# Kansas School Mental Health Advisory Council

January 17, 2018

WiFi: Kansas Open

# Approval Agenda and Minutes

- Agenda for January 17, 2018
- Minutes from December 14, 2017

# Overview of the Interconnected Systems Framework

Cherie Blanchat

Handouts





Autism and Tertiary Behavior Supports  
School Mental Health Initiative

# Interconnecting School and Community Partnerships within the Kansas Multi-Tier System of Supports Framework

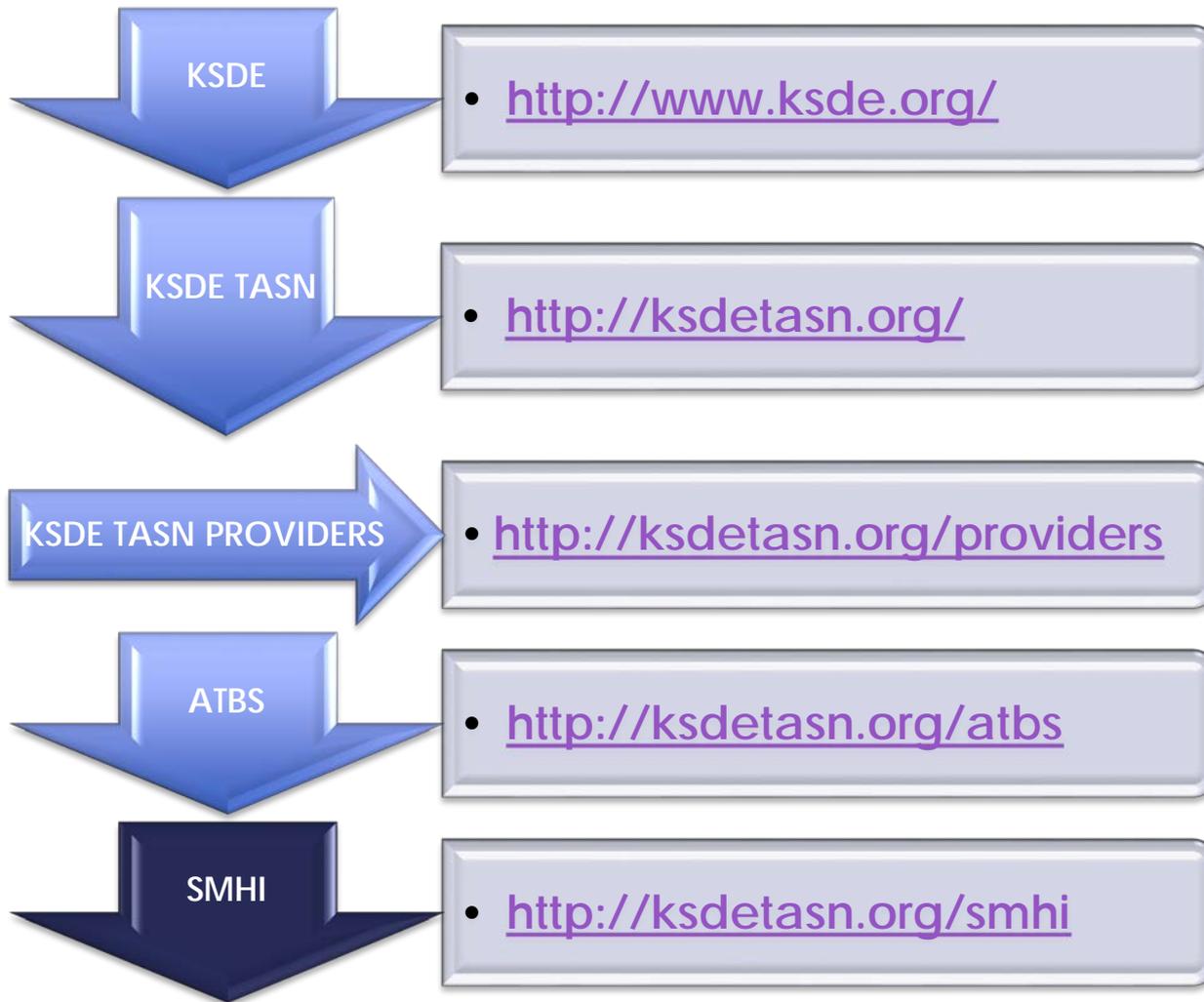
Cherie Blanchat, LCSW  
Systems Coordinator

A circular icon of a globe in shades of teal and light blue, showing the continents of North and South America.

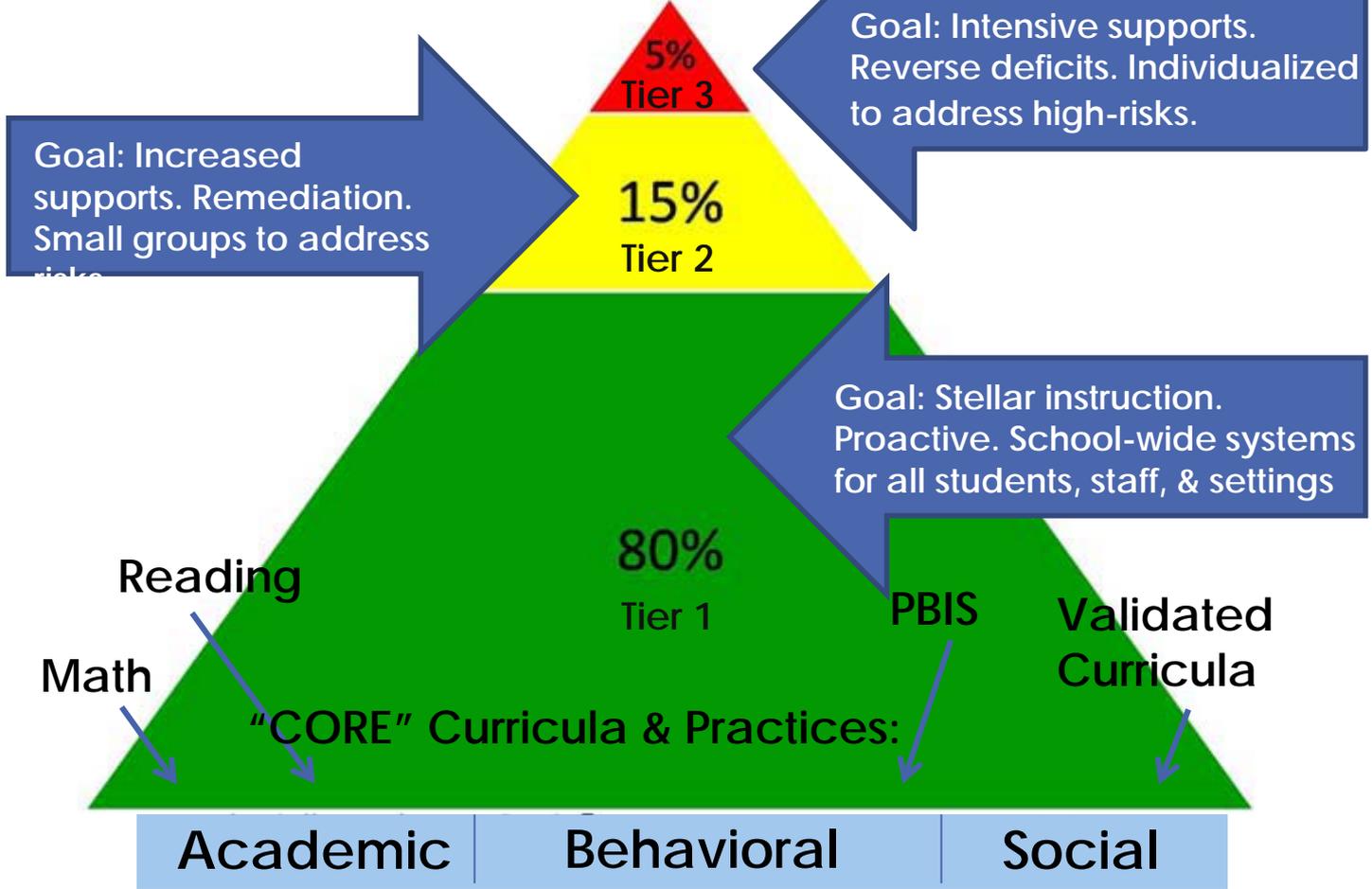
<https://ksdetasn.org/smhi>

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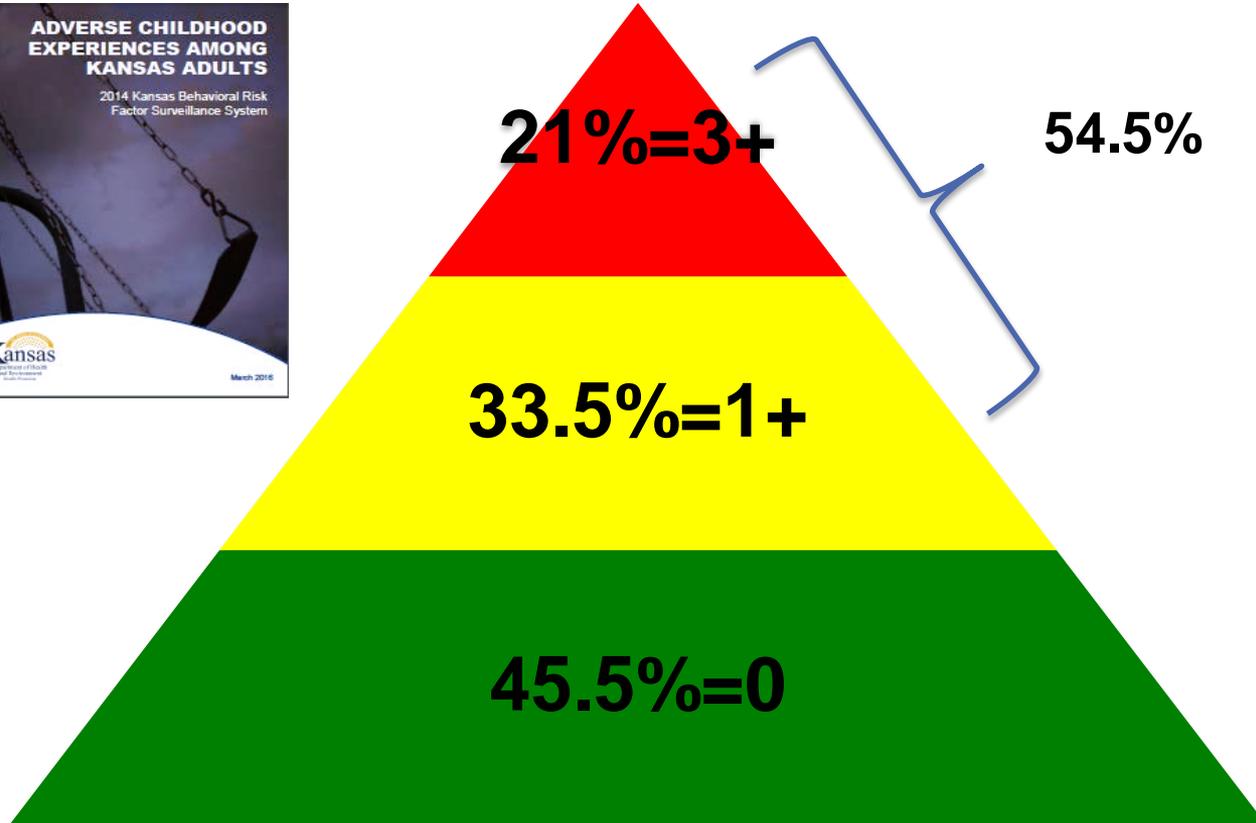
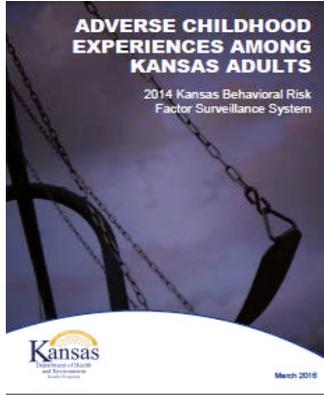
<https://www.facebook.com/TASNSMHI/>  
@TASNSMHI



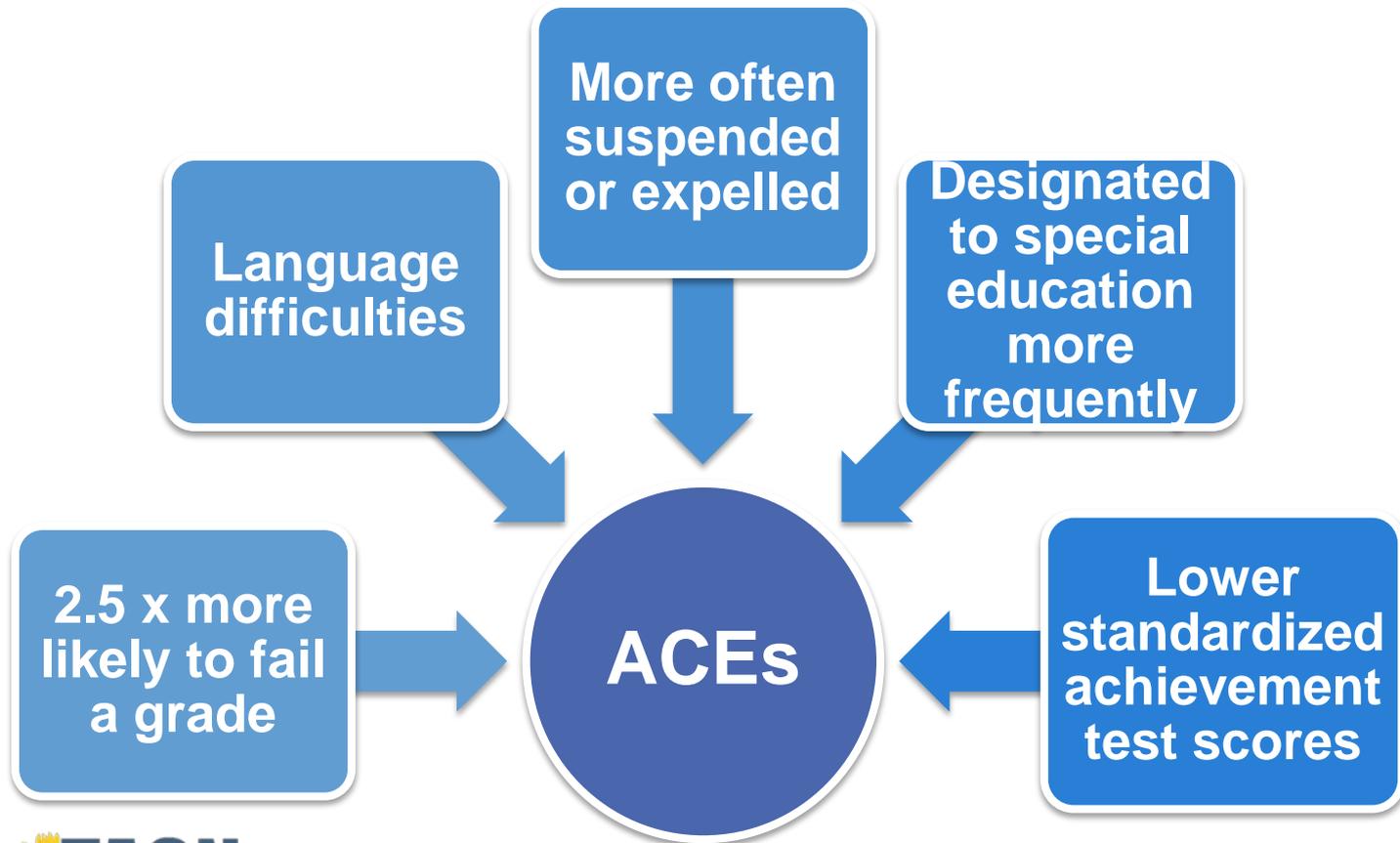
# Kansas Integrated Multi-Tier Systems of Support Framework



# Kansas Adults (18+) with ACEs

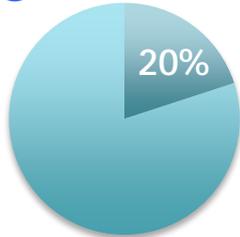


# ACEs and School Performance

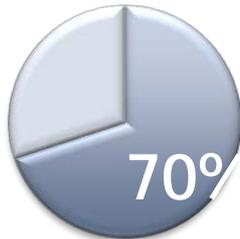


# School Mental Health

Several epidemiological studies of children's mental health needs and services have led to the conclusion that school is the de facto mental health system for children.



**20%** of children & youth have a clearly identified need for mental health services but **only about one-third** of these children receive any help at all.



For children who do receive any type of mental health service, over **70%** receive the service from their school.

# Addressing Mental Health In Kansas School Communities

Report compiled by Center for Children & Families at KU, on behalf of KDADS

Barriers identified in addressing student mental health include:

- Consistency in services
- Relationships with families
- Little mental health training
- Stigma
- Access to services

84% of educators agreed or strongly agreed that further professional development training is needed:

- Mental health disorders
- Behavioral management techniques
- Specialized skill training
- PBIS
- Trauma

“School counselors, psychologists, & social workers all offer unique individual skills that complement one another in such a way that the sum is greater than the parts...”

- ❑ Collect, analyze, & interpret school-level data to improve availability & effectiveness of mental health services.
- ❑ Design & implement interventions to meet the behavioral & mental health needs of students.
- ❑ Promote early intervention services.
- ❑ Provide individual & group counseling.
- ❑ Provide staff development related to positive discipline, behavior, & mental health.
- ❑ Provide risk & threat assessments.
- ❑ Coordinate with community service providers & integrating intensive interventions into the schooling process.



# Develop Cross-System Problem Solving Teams:

- Use tiered prevention logic as overall organizer to develop an action plan.
- Utilize school AND community data to decide which evidence based practices to implement.
- Ongoing progress monitoring for fidelity & impact.
- Ongoing coaching at both the systems & practices level.

# Governor's Behavioral Health Services Planning Council, Children's Subcommittee

Recommendations  
regarding the behavioral  
& mental health of KS  
children & families.

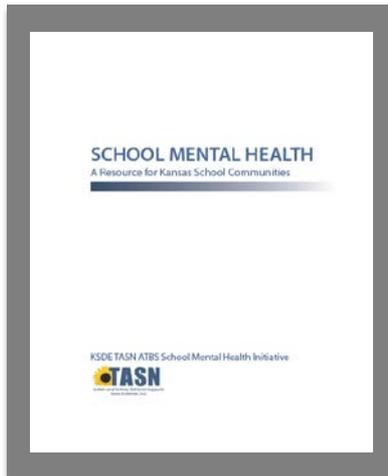
See  
Handout  
!

Need for effective  
"Systems of Care" which  
requires collaboration  
between all systems that  
children come in  
contact with.

"Juvenile justice, child welfare, community mental health centers, psychiatric residential treatment facilities, schools, & other service providers are all too familiar with the difficult situations faced by children & youth."

# School Mental Health: A Resource For Kansas School Communities

*TASN ATBS SMHI in  
Collaboration with:*  
Children's  
Subcommittee, KSDE,  
KS MTSS, KPIRC, Project  
STAY, Former TPS SpEd  
Director, TPS Dept. of  
School Social Work &  
School Psychology



## School Mental Health

- Adverse Childhood Experiences & implications for education.
- Utilizing educational frameworks to support student growth & development.
- Mental health within the functional assessment process
- Family, school & community partnerships.
- Planning for hospitalization to school transitions.

## At-Risk Populations

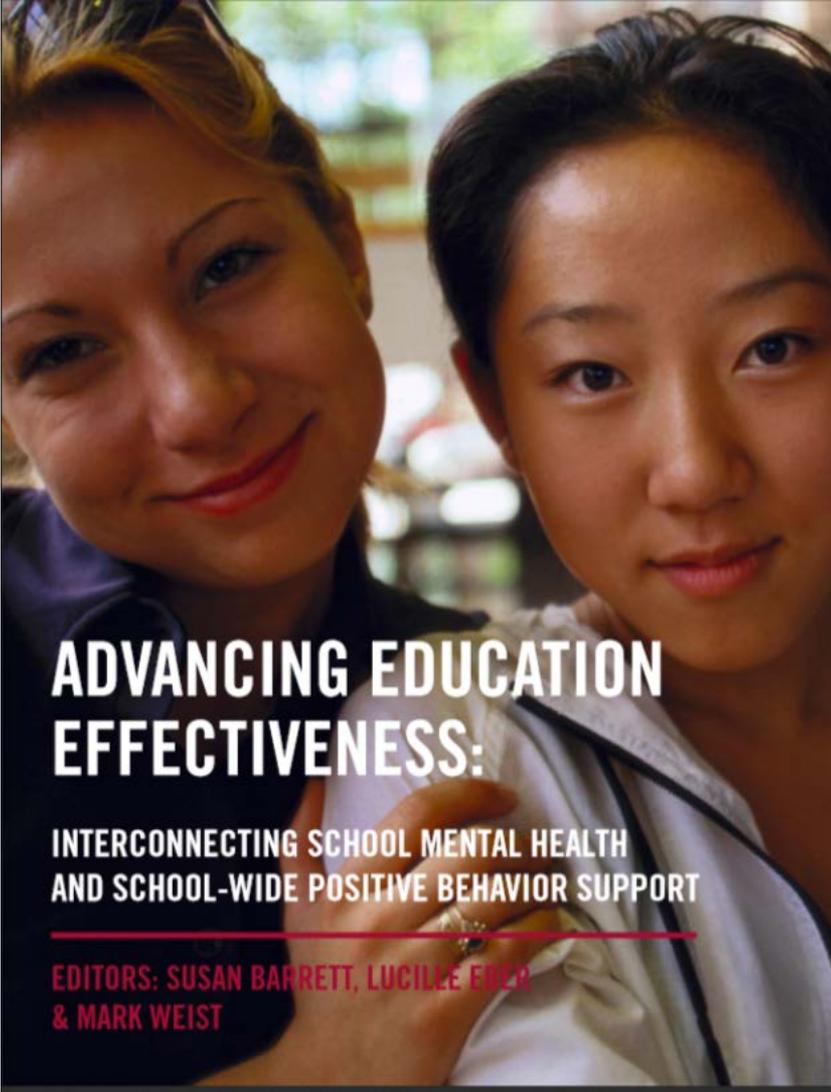
- Information & resources regarding specific student populations.

## Mental Health Disorders

- Individual fact sheets on mental health disorders.
- Classroom specific symptoms & interventions.

## Appendices

- KU Report on school-based mental health
- Trauma-Informed Approaches Across KS Communities
- Additional Resources



# ADVANCING EDUCATION EFFECTIVENESS:

INTERCONNECTING SCHOOL MENTAL HEALTH  
AND SCHOOL-WIDE POSITIVE BEHAVIOR SUPPORT

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EDITORS: SUSAN BARRETT, LUCILLE EBER  
& MARK WEIST

# Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide Positive Behavior Support

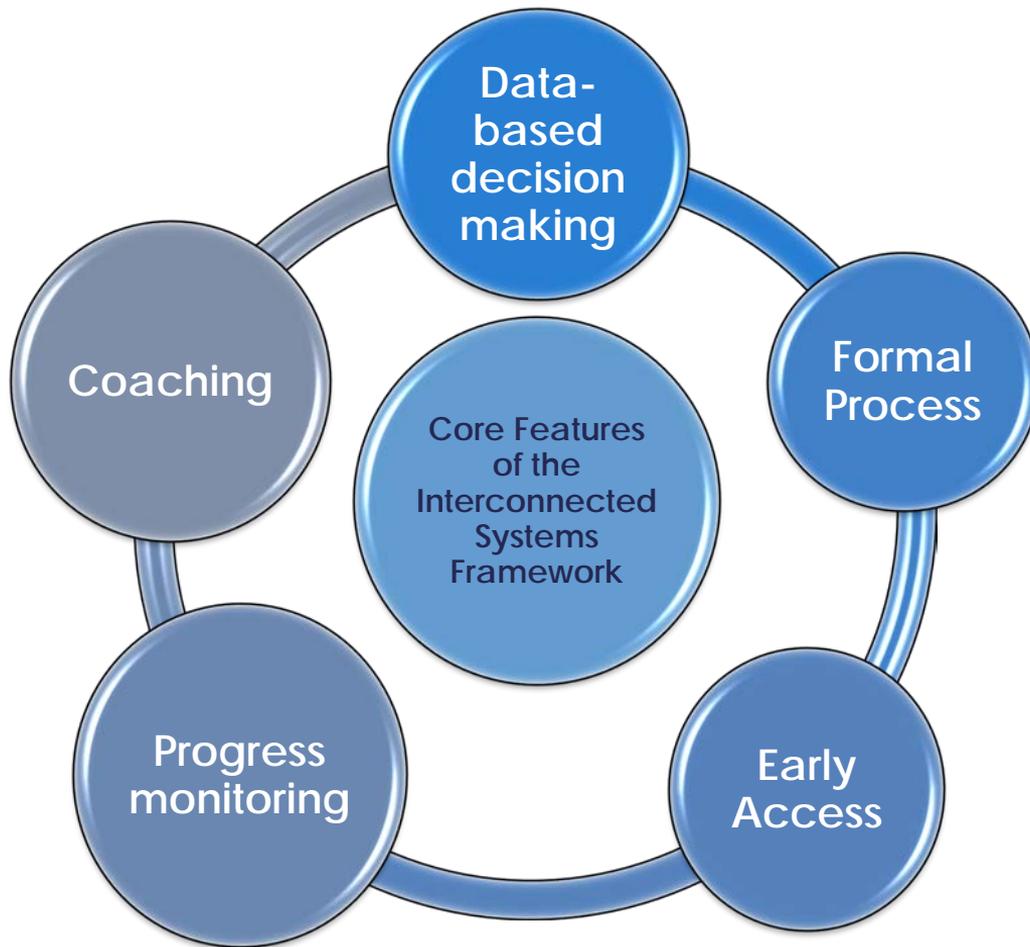
*Editors: Susan Barrett,  
Lucille Eber and Mark Weist*

[pbis.org](http://pbis.org)

[csmh.umaryland](http://csmh.umaryland)

IDEA Partnership NASDSE





## Traditional

MH counselor “sees” student at appt.

Clinicians only do “mental health”

Case management notes determine effectiveness

## An Interconnected MTSS

MH person on teams all tiers and connected to core social curriculum

Contribute to integrated plan and to develop social emotional capacity across staff

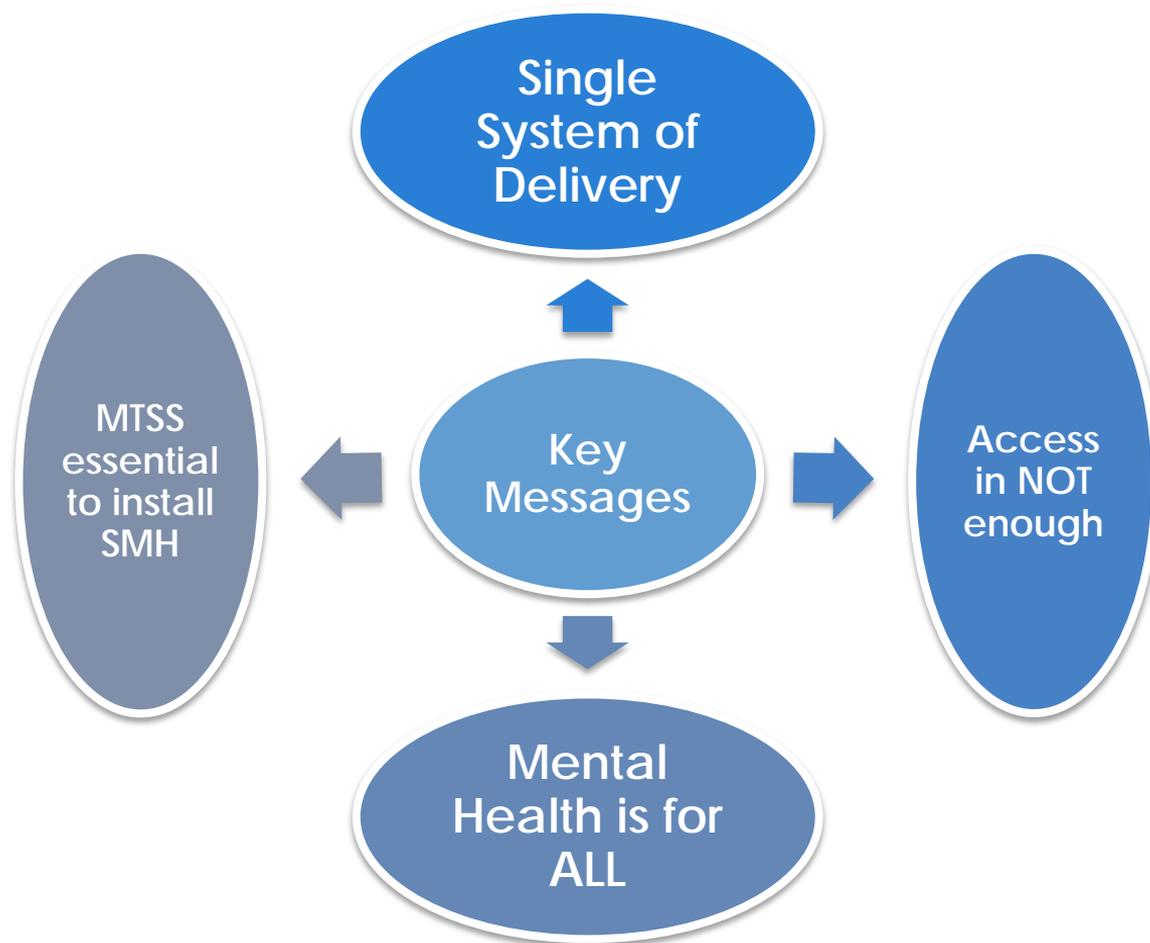
Use of fidelity & outcome data for ALL interventions reviewed through integrated teams

## Traditional

- Each school works out their own plan with Mental Health (MH) agency.
- A MH professional is housed in a school building 1 day a week to “see” students.
- No data to decide on or monitor interventions.

## Preferred

- District has a plan for integrating MH at all buildings - based on community data as well as school data.
- MH professional participates in teams at all 3 tiers.
- MH professional leads group or individual interventions based on data.



# Single System of Delivery:

## *Role of the ISF District-Level Community Team “Facilitators”*

Coordinates and leads state teams through the process of establishing and maintaining the implementation of ISF.

- Coordinates and communicates across levels of implementation with direct connection to state/region and building
- Provides coordination and leadership for team and action plan implementation.

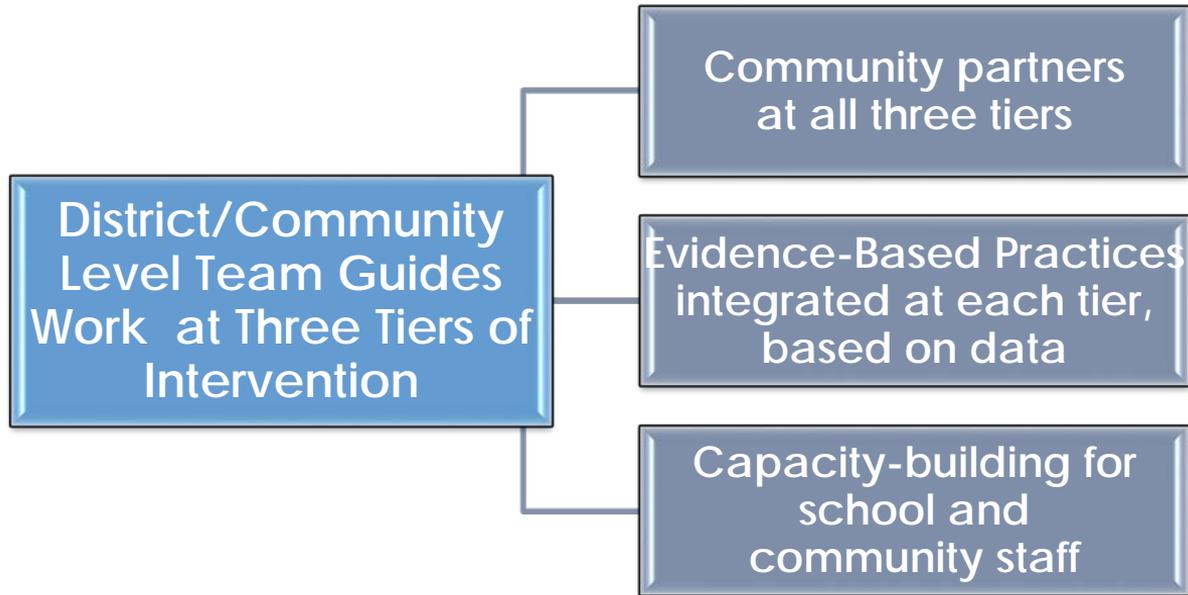
Facilitates the collection, aggregation, and utilization of data for decision making.

Select local district/community(s) to work through the ISF.

Assesses training needs, arranges training experiences and develops capacity.

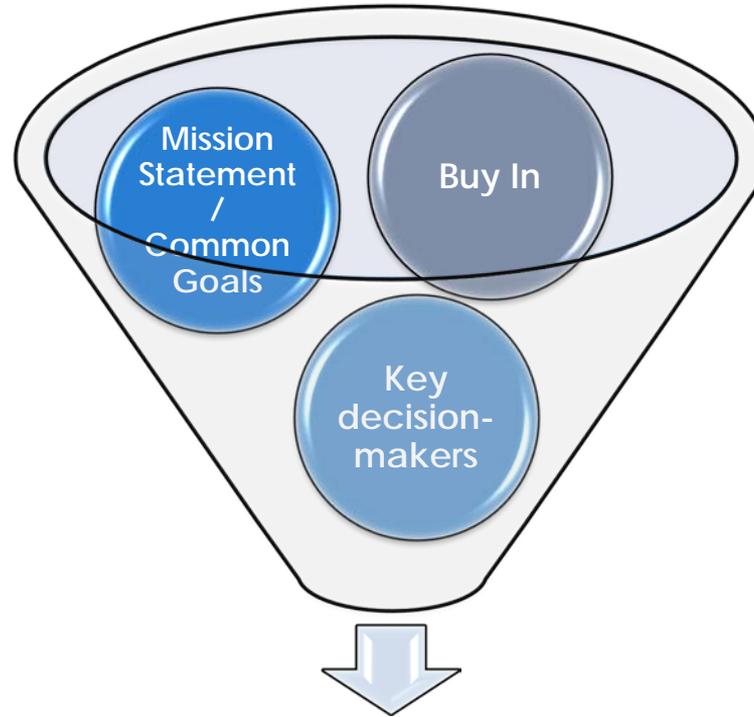
- Provides training and technical assistance to district community teams.

# Single System of Delivery



# Single System of Delivery:

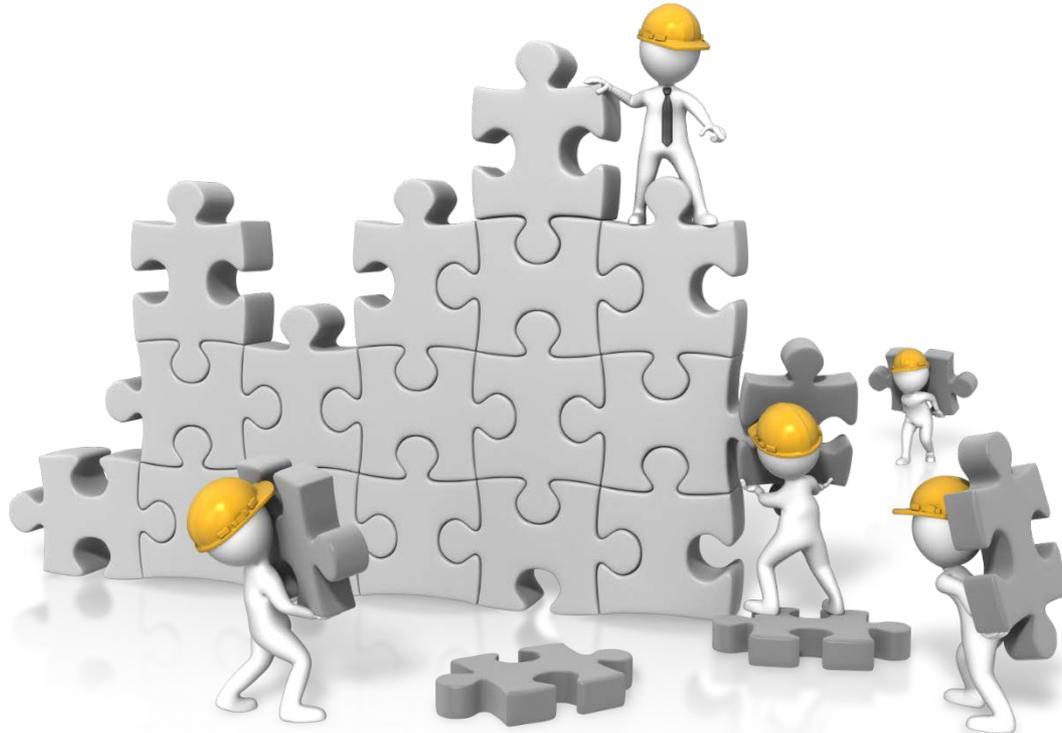
## *Engaging Stakeholders to Work Differently*



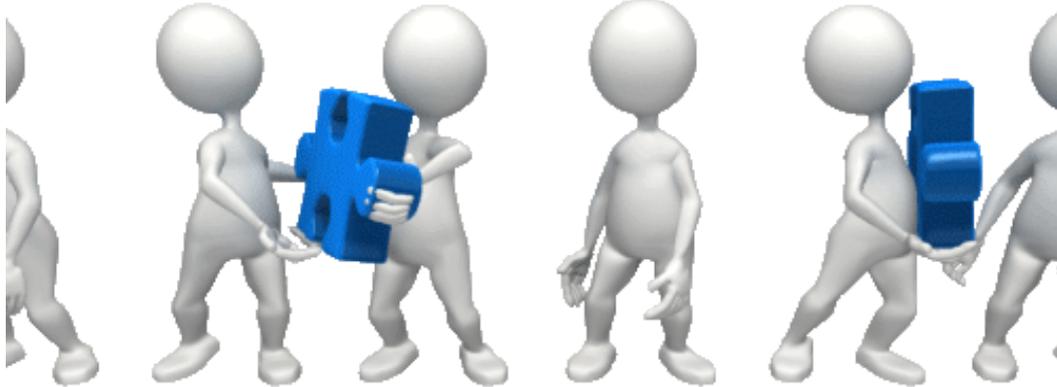
Engaging Stakeholders

# Access is Not Enough

*All work is focused on ensuring positive outcomes for ALL children and youth and their families.*

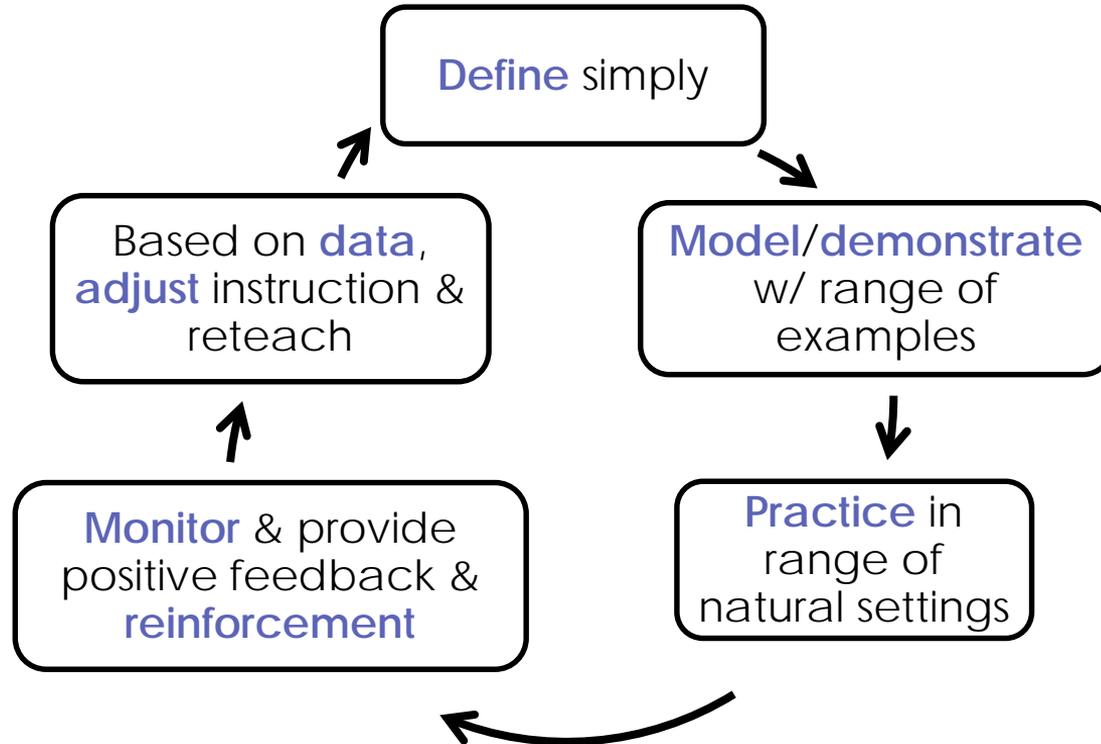


# Mental Health is for ALL



# Mental Health is for All:

## *Teaching and Building Skills to Support Mental Health Needs*



# Mental Health is for All

## Utilizing School and Community Data to Determine Mental Health Interventions

### Data Types:

Child welfare contacts  
Violence rates  
Incarceration rates  
Deployed families  
Homeless families  
Unemployment spikes

### CMHCs:

Number of students served by zip code/catchment area  
Number of students with different diagnoses  
Number of students who received different services

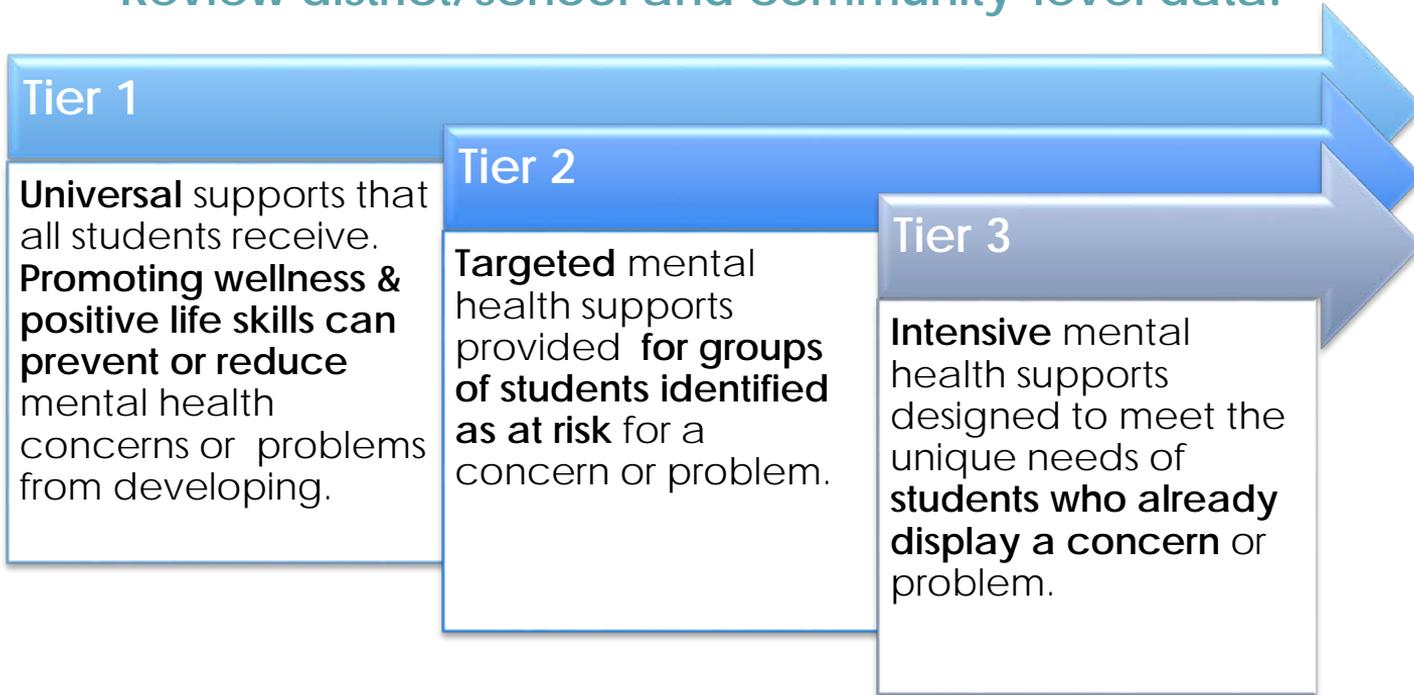
### District and School-Level Data:

Disciplinary data  
Truancy data  
Dropout rates  
School counselors' data on number of students served in a school year

# Mental Health is for All:

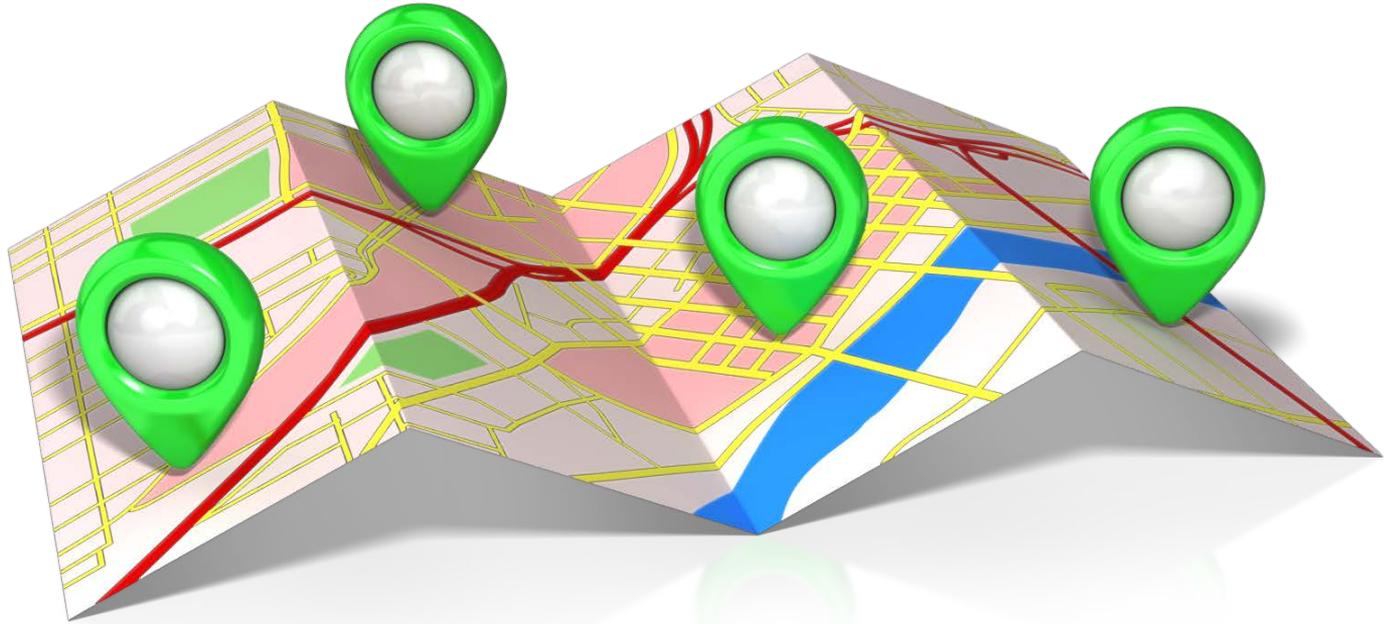
## *Determining Which Tier(s) to Target*

Review district/school and community-level data!



# Mental Health is for All:

## *Resource Mapping*



Resource Mapping Tool:

[http://csmh.umaryland.edu/media/SOM/Microsites/CSMH/docs/Resource-Mapping-in-Schools-and-School-Districts10.14.14\\_2-\(1\).pdf](http://csmh.umaryland.edu/media/SOM/Microsites/CSMH/docs/Resource-Mapping-in-Schools-and-School-Districts10.14.14_2-(1).pdf)

# Mental Health is for All:

## *Multiple Evidence-Based Interventions of Varying Intensity*

- ❑ Install foundational interventions School-wide
- ❑ Ensure identification, monitoring, and selection process are in place
- ❑ Identify additional interventions that might be needed such as:
  - ❑ Trauma Informed Interventions
  - ❑ Coping Cat
  - ❑ Check and Connect
  - ❑ Restorative Practices
  - ❑ Positive Family Support

# Mental Health is for All:

## *Functions/Roles to Consider*

### Coordinator

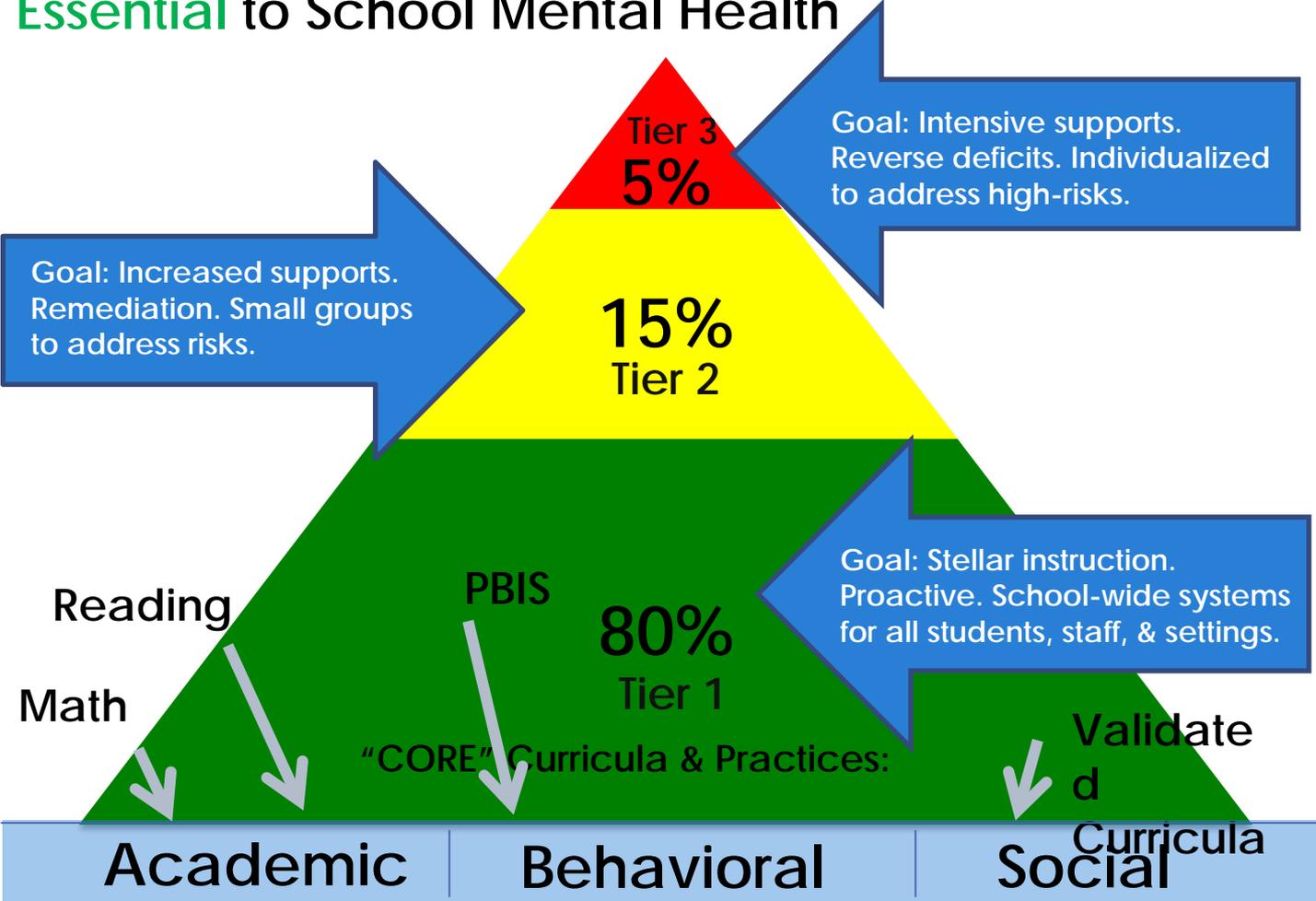
- Organizes and/or oversees the specific interventions such as CICO, Skill groups
- Roles may include: scheduling meetings, reviewing & collecting data to share during team meetings, curriculum development, training, mentoring, etc...

### Facilitator

- Directly provides intervention support services to youth/families
- Roles include: meeting with students for CICO, running groups, delivering mentoring support, etc.

# Kansas Multi-Tier System of Supports

## Essential to School Mental Health



# MTSS Essential to School Mental Health:

## *Example of Process to Building the Structure*

- ❑ Select District and Schools
- ❑ Form or Expand District Team (Workgroup of existing team?)
  - ❑ Membership
- ❑ Establish Operating Procedures
- ❑ Conduct Resource Mapping of current programs/initiatives/teams
  - ❑ Identify gaps/needs
  - ❑ Assess staff utilization
  - ❑ Examine organizational barriers
  - ❑ Establish priority- measureable outcomes
- ❑ Develop Evaluation Plan
  - ❑ District and School Level
  - ❑ Tools Identified
  - ❑ Economic Benefits
- ❑ Develop Integrated Action plan
  - ❑ Identification of Formal Process for Selecting Evidence-Based Practices
  - ❑ System for Screening
  - ❑ Communication and Dissemination Plan
- ❑ Write MOU- Determine who will implement the plan

# MTSS Essential to School Mental Health: Example of a Memorandum of Understanding

## Transitioning Students From Psychiatric Hospitalization Back to School

- Describes complications that often arise when students transition from a psychiatric residential treatment facility back into the school setting and provides examples of protocols and/or guidelines that can be developed to support more effective transitions.

### Resource

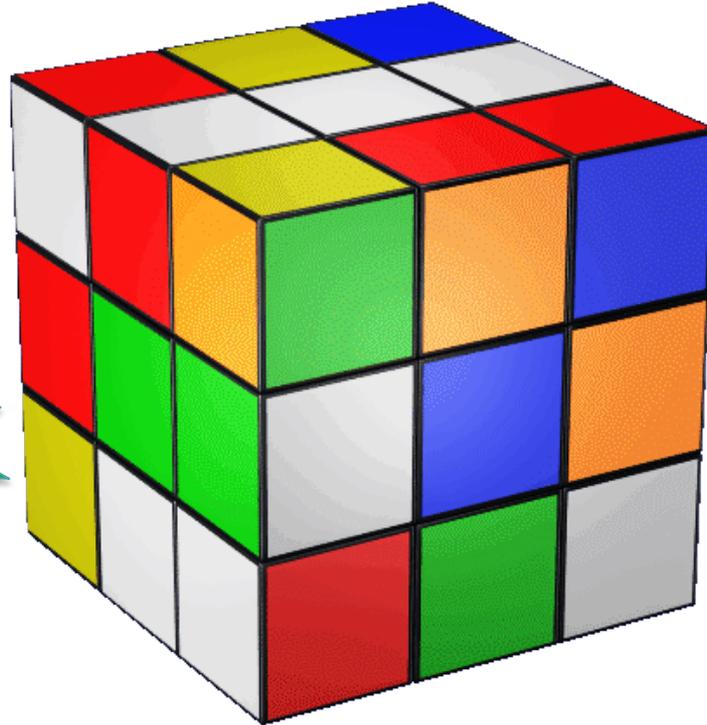
[https://ksdetasn.s3.amazonaws.com/uploads/resource/upload/1265/Transitioning\\_Students\\_from\\_Psychiatric\\_Hospitalization\\_Back\\_to\\_School\\_2016.07.pdf](https://ksdetasn.s3.amazonaws.com/uploads/resource/upload/1265/Transitioning_Students_from_Psychiatric_Hospitalization_Back_to_School_2016.07.pdf)

# KSDE School Personnel Professional Development Grant (SPDG): *School Mental Health Professional Development and Coaching System*



- Objective 1: Build capacity for cross-system school/community teams to implement a structured process for recognizing, assessing, identifying, and responding to students at risk or experiencing mental health difficulties and mental health emergencies.
- Objective 2: Cross-system teams implement evidence-based, multi-tier, trauma-informed mental health interventions with fidelity.
- Objective 3: Cross-system teams utilize data-based decision making for continuous improvement.
- Objective 4: All Kansas districts and communities will have access to evidence-based resources, protocols, processes, and professional learning shown to be effective in meeting the mental health needs of Kansas students.

# Challenges and Solutions: *State, Regional, District, and Building Levels*



# Kansas School Mental Health Framework



Integrating School Mental Health within Multi-Tier System of Supports:

1. Strong Universal Implementation
2. Integrated Leadership Teams
3. Youth-Family-School-Community Collaboration at all Levels
4. Culturally Responsive Evidence Based Practices
5. Data-Based Continuous Improvement
6. Positive School Culture & Climate
7. Staff Mental Health Attitudes, Competencies & Wellness
8. Systemic Professional Development & Implementation
9. Confidentiality & Mental Health Promotion Policies
10. Continuum of Supports



# Where to Find Resources



# Public Comment



# Integrated Plan for Mandatory Trainings

Kathy Busch, Chair



# Presentation to the State Board

January 10, 2018

Handouts





Kansans **CAN**  
KANSAS STATE BOARD OF EDUCATION  
SCHOOL MENTAL HEALTH ADVISORY  
COUNCIL

“Changing the Way We Have Conversations”

Kathy Busch, Chair

Kelly Robbins, Vice Chair

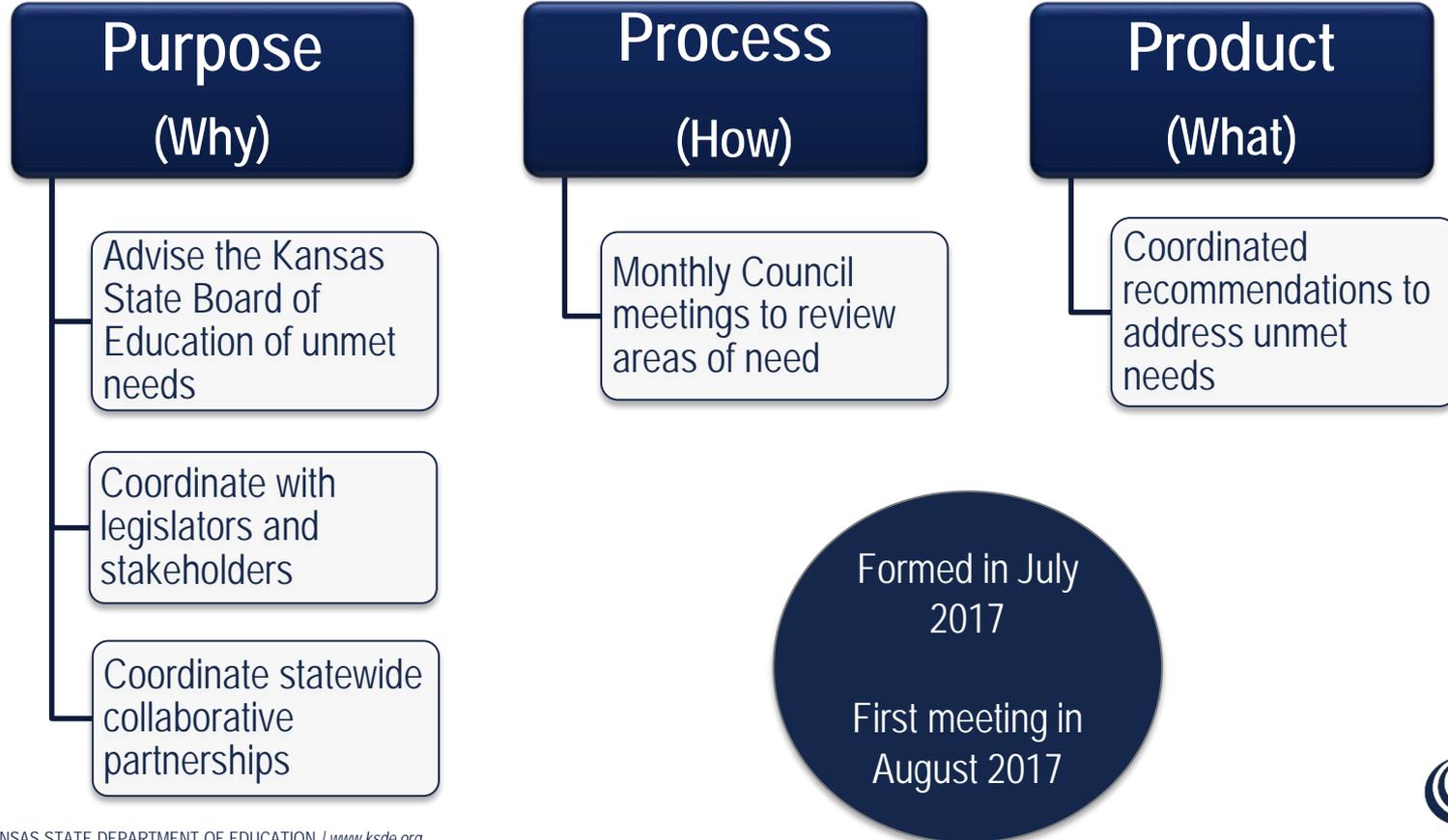
[2017-2018 Members](#)

Kansas leads the world in the success of each student.

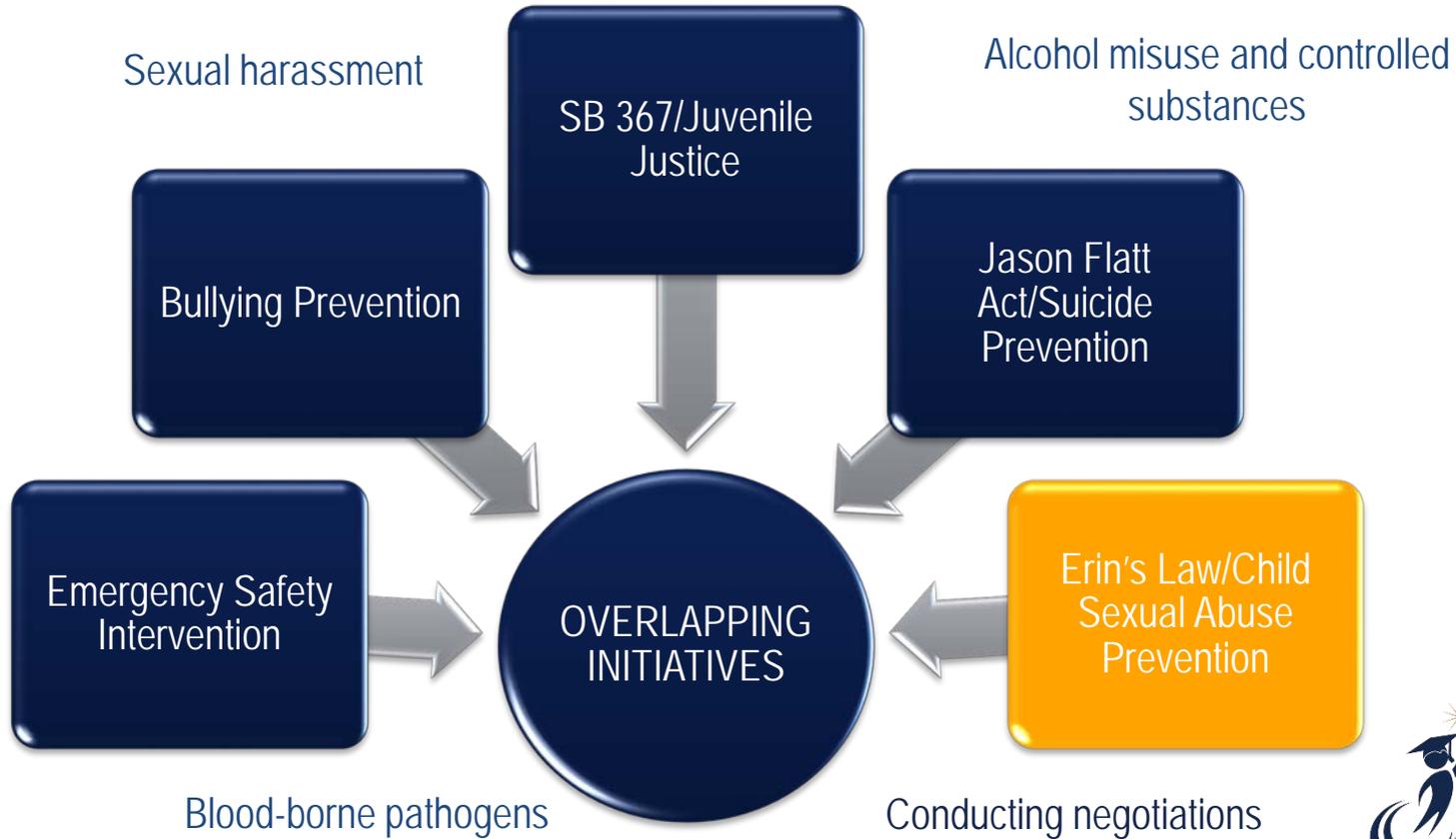
# KSBE SCHOOL MENTAL HEALTH ADVISORY COUNCIL



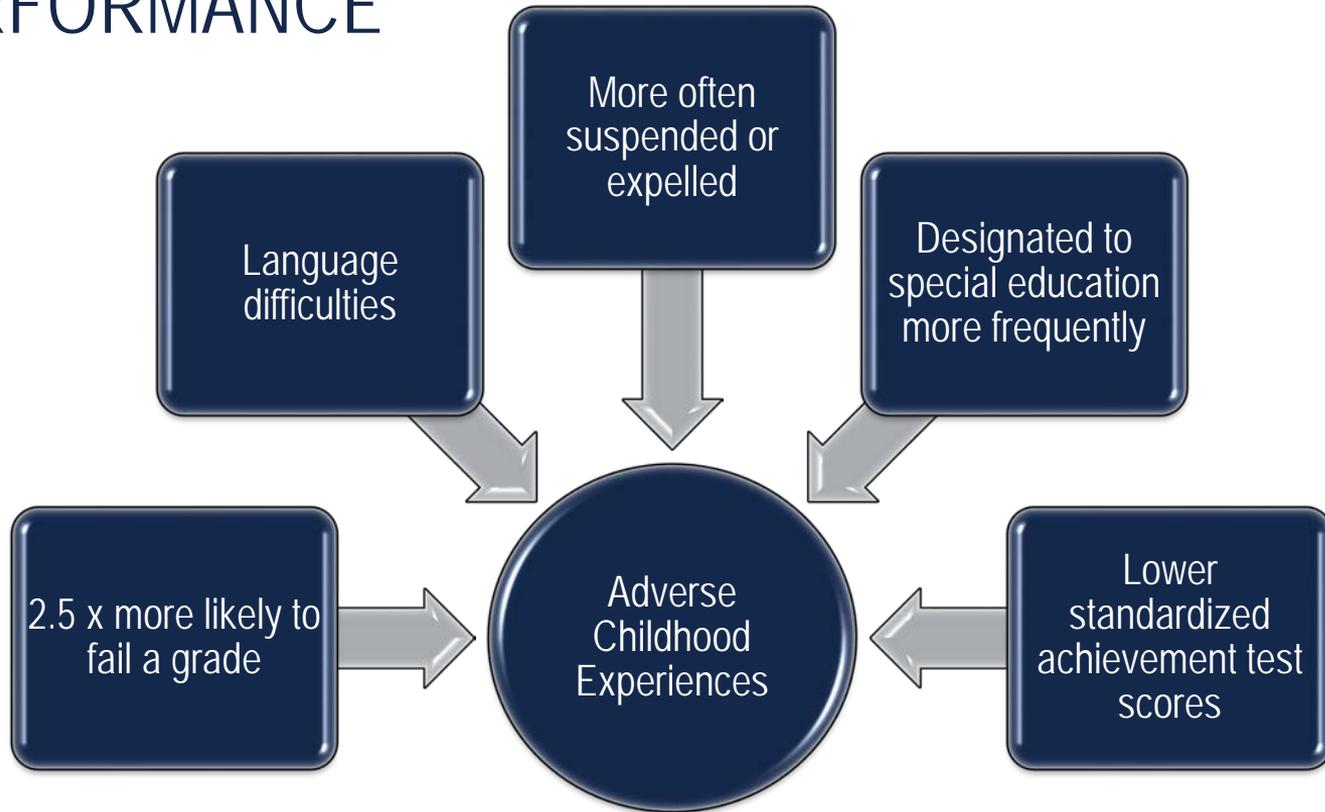
# SCHOOL MENTAL HEALTH ADVISORY COUNCIL



# MANDATES AND REQUIRED TRAININGS

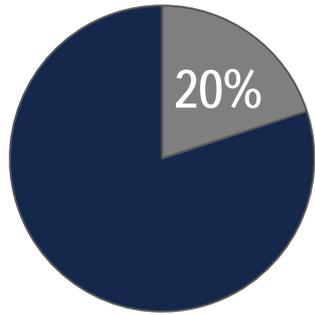


# ADVERSE CHILDHOOD EXPERIENCES AND SCHOOL PERFORMANCE

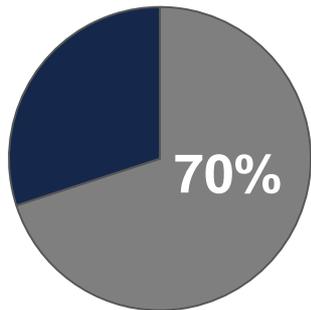


Compassionate Schools: Heart of Teaching and Learning

# SCHOOLS AS DE FACTO MENTAL HEALTH SYSTEM FOR CHILDREN.



**Twenty percent** of children and youth have an identified need for mental health services but **only one-third of these children receive services.**



For children who do receive mental health services, **more than 70 percent receive the service from their school.**

Barrett, S., Eber, L., & Weist, M. (n.d.). *Advancing education effectiveness: Interconnecting school mental health and school-wide positive behavior support*. Baltimore, MD: University of Maryland, Center for School Mental Health.

# KANSANS CAN BOARD GOAL ONE UPDATE: SOCIAL-EMOTIONAL CHARACTER DEVELOPMENT

## GOAL:

Each student develops the social, emotional, and character competencies that promote learning and success in life.

## STRATEGIES:

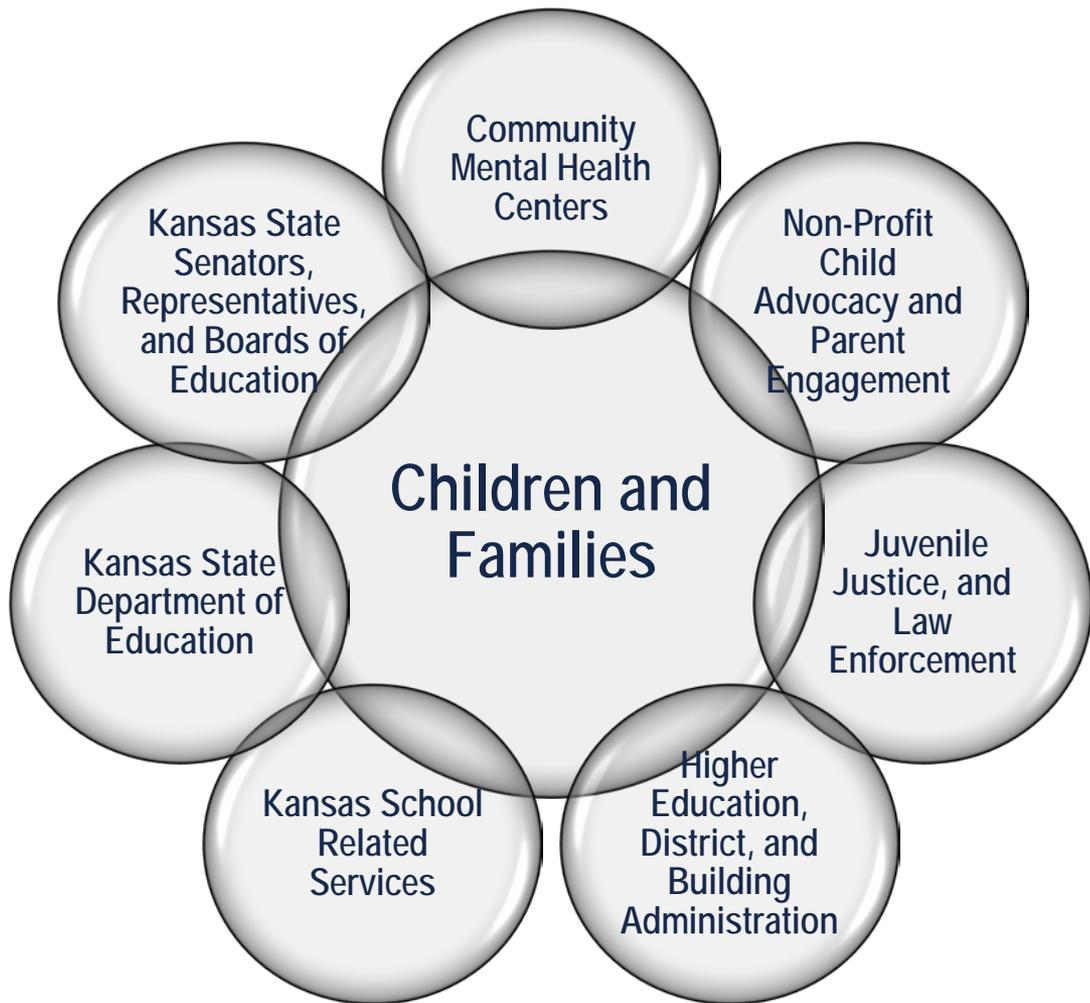
- Comprehensive Integrated Policy Framework
- Collaborative coordinated continuum of Resources
- Increased Access to Licensed Staff for Student Support
- Stakeholder Partnerships and Network Development
- Coordinated Funding Approaches

School Mental  
Health

Systems

School Mental  
Health

Practices



# STRENGTHENED STATE, REGIONAL, AND LOCAL PARTNERSHIPS



# SCHOOL MENTAL HEALTH PERSONNEL DEVELOPMENT PLAN

## Objective 1

Scaling up school capacity

## Objective 2

Implementing tiered mental health interventions

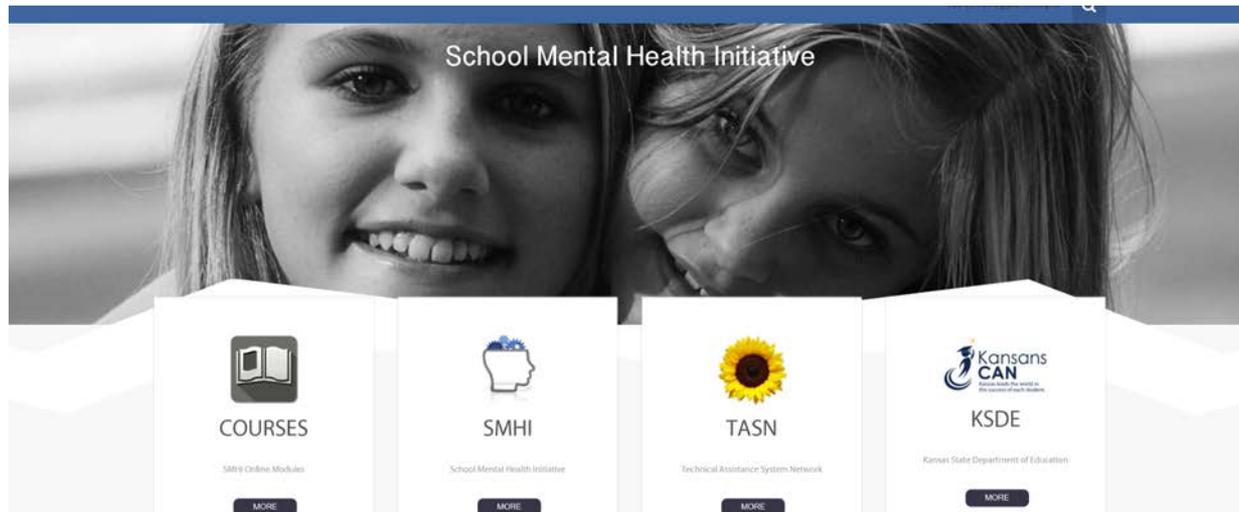
## Objective 3

Structured processes for community partnerships

## Objective 4

Systemic resources replicated statewide

# CHILD SEXUAL ABUSE ONLINE LEARNING MODULES



## Objectives:

- Define child sexual abuse
- Identify signs of child sexual abuse
- How to make a mandated report
- Resources for child sexual abuse prevention.

# WORK OF THE SCHOOL MENTAL HEALTH ADVISORY COUNCIL

Collaborative Process with State Partners

Common Language

Definitions and acronyms

Training Components

(In Process)

Training Development Outline

- Knowledge
- Application and analysis
- Synthesis and evaluation

# KSDE CONTACTS

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# Legislative Committee Presentation

Juvenile Justice Committee Presentation

January 17, 2018

1:30 PM

Statehouse Room 152 S

Handouts

# Wrap Up and Review of March 1, 2018 meeting

Kathy Busch

March 1, 2018

Washburn Technical School

Lower Level Conference Center

5724 SW Huntoon

Topeka, KS



Kansas leads the world  
in the success of each student.

# Kansans CAN

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