



Aligning PBIS Efforts with School-Linked Mental Grant Support

Eric Kloos | Assistant Director Special Education, MDE

Kristin Lofgren | Mental Health Consultant | Behavioral Health Division, DHS

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Ten Minnesota Commitments to Equity

1. Prioritize equity.
2. Start from within.
3. Measure what matters.
4. Go local.
5. Follow the money.
6. Start early.
7. Monitor implementation of standards.
8. Value people.
9. Improve conditions for learning.
10. Give students options.

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

- 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

PBIS Defined in MN Statute 122A.627

45.3 Sec. 3. **[122A.627] POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS.**
45.4 "Positive behavioral interventions and supports" or "PBIS" means an evidence-based
45.5 framework for preventing problem behavior, providing instruction and support for positive
45.6 and prosocial behaviors, and supporting social, emotional, and behavioral needs for all
45.7 students. Schoolwide implementation of PBIS requires training, coaching, and evaluation
45.8 for school staff to consistently implement the key components that make PBIS effective for
45.9 all students, including:
45.10 (1) establishing, defining, teaching, and practicing three to five positively stated
45.11 schoolwide behavioral expectations that are representative of the local community and
45.12 cultures:
45.13 (2) developing and implementing a consistent system used by all staff to provide positive
45.14 feedback and acknowledgment for students who display schoolwide behavioral expectations:
45.15 (3) developing and implementing a consistent and specialized support system for students
45.16 who do not display behaviors representative of schoolwide positive expectations:
45.17 (4) developing a system to support decisions based on data related to student progress,
45.18 effective implementation of behavioral practices, and screening for students requiring
45.19 additional behavior supports:
45.20 (5) using a continuum of evidence-based interventions that is integrated and aligned to
45.21 support academic and behavioral success for all students; and
45.22 (6) using a team-based approach to support effective implementation, monitor progress,
45.23 and evaluate outcomes.

House Senate Joint Schedules Legislators Committees Bills Law Multimedia Publications
Minnesota State Legislature
Minnesota Senate

PBIS Definition in Practice

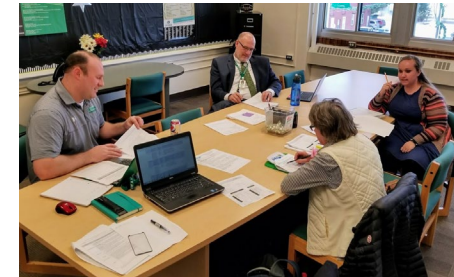
School Leadership Team that supports all staff, students, and families with:

3-5 positive expectations, taught and practiced

Acknowledgement and feedback system

Continuum of procedures to support Behavior

Data-based decision making



KENNEDY CARD						
		Name _____			Teacher	Parent
Materials to Class	Worked and Let Others Work	Followed Directions the First Time	Assignments:			
2	2	2	Work,			
1	1	1				
No	No	No				
2	2	2	Assignments:			
1	1	1	Work,			
No	No	No				
2	2	2	Assignments:			
1	1	1	Work,			
No	No	No				
2	2	2	Assignments:			
1	1	1	Work,			
No	No	No				
2	2	2	Assignments:			
1	1	1	Work,			
No	No	No				
			Goal =			
			36			



Research Supports These PBIS Outcomes When Implemented with Fidelity

Research-supported outcomes



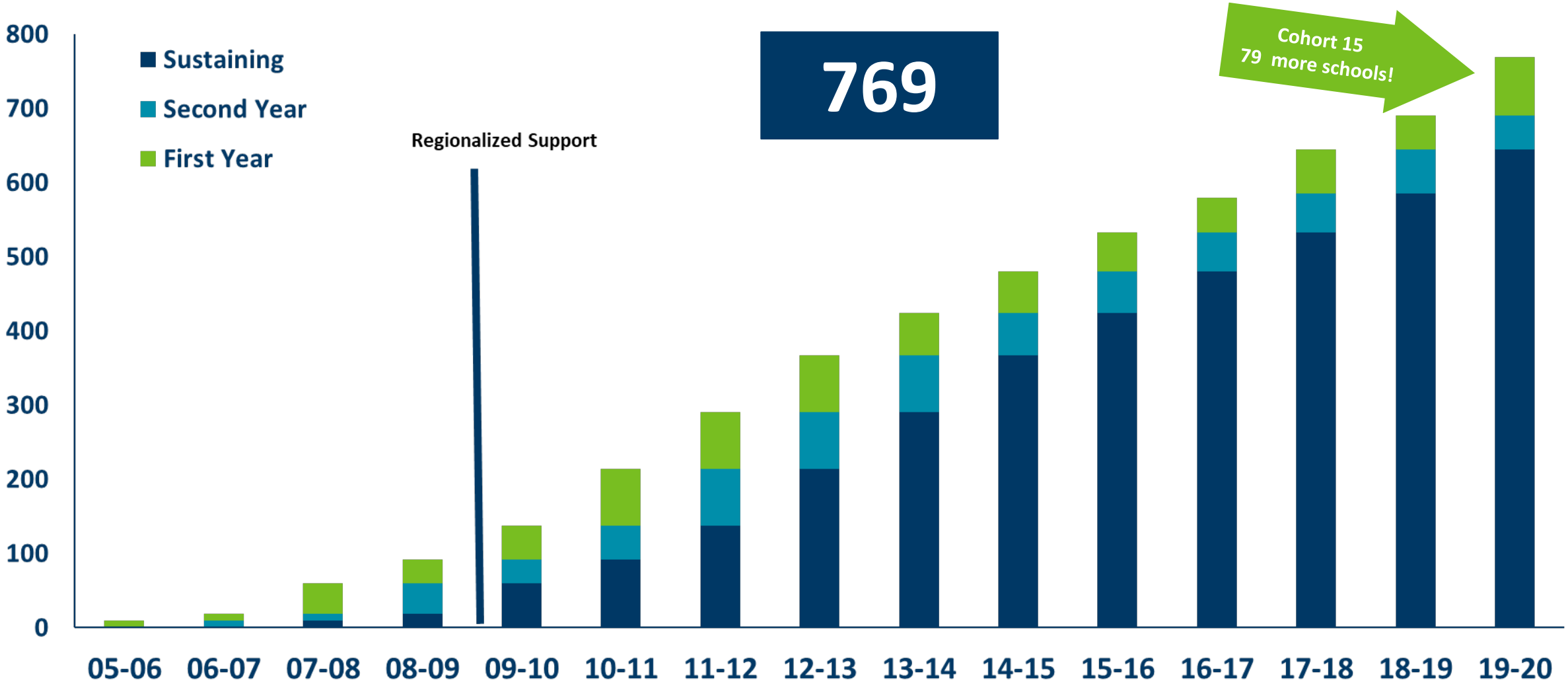
- Reductions in major disciplinary infractions and antisocial behavior.
- Improvements in aggressive behavior, concentration, prosocial behavior, and emotional regulation
- Improvements in academic engagement and achievement
- Enhancements in perceptions of organizational health and safety
- Reductions in teacher and student reported bullying behavior, peer rejection, and substance abuse
- Improvements in school climate



U.S. DEPARTMENT OF EDUCATION

Source: <https://www.ed.gov/news/press-releases/federal-commission-school-safety-first-field-visit-focuses-school-climate>

Growth of PBIS in Minnesota: 2005-Present



PBIS by the Numbers in Minnesota

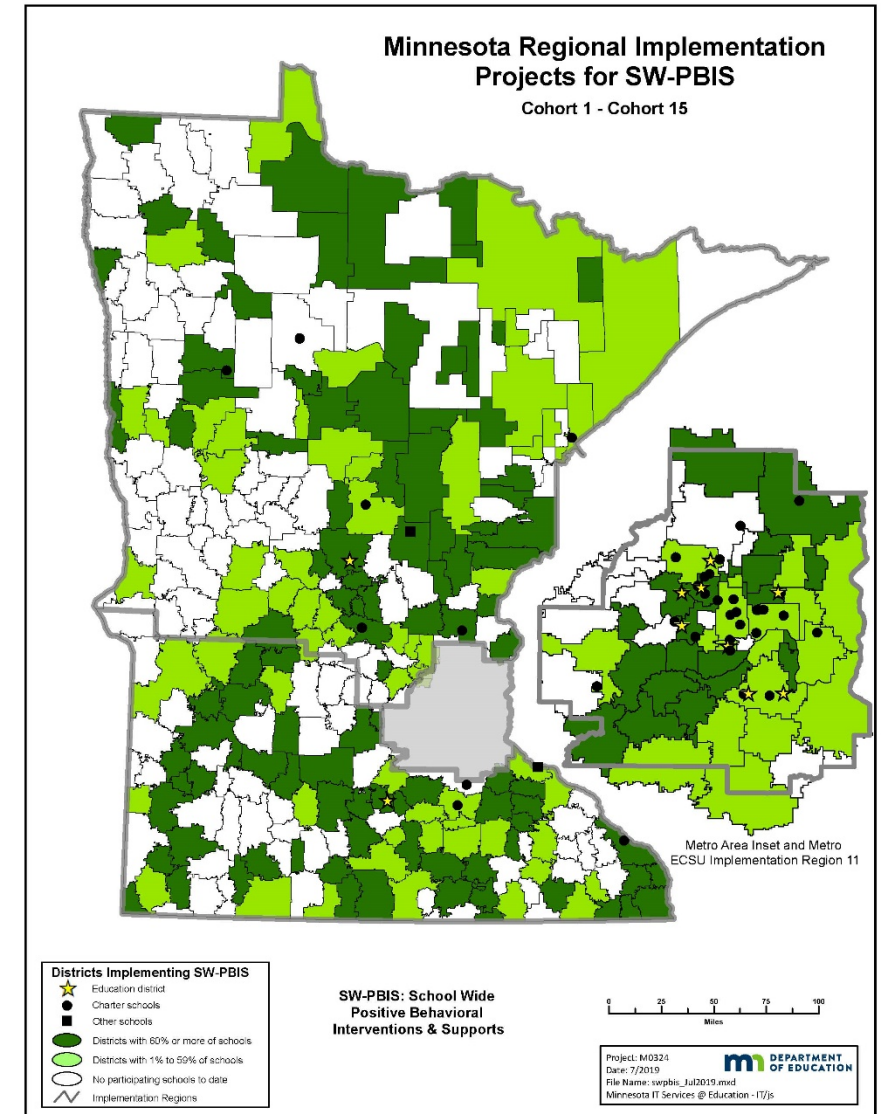
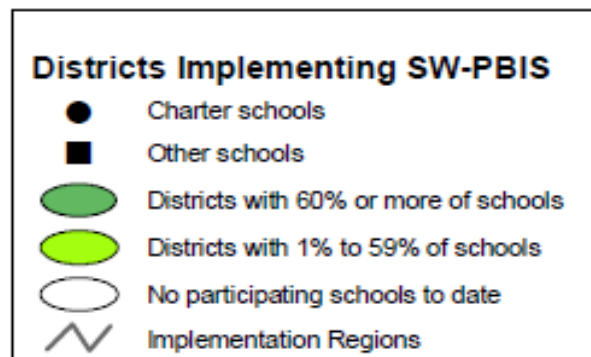
- **242** Districts/Charters
- **769** Schools
 - **60%** Early Childhood and Elementary
 - **15%** Middle School
 - **25%** High Schools or ALC's
- **37%** of the state's schools

Schoolwide PBIS Across Districts and Charters

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

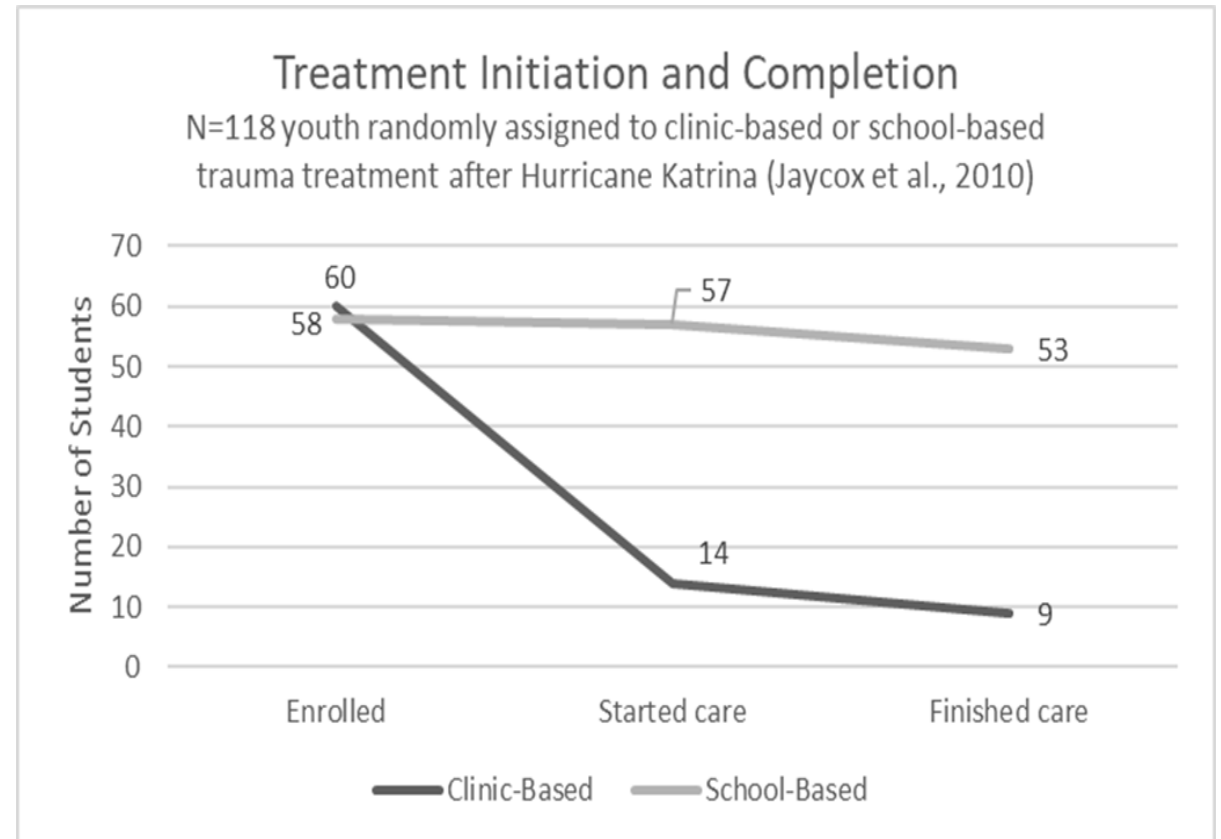


School Linked Mental Health (SLMH) Grants

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)



National School Mental Health Curriculum

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

Second Round of DHS SLMH Grants (2014-2018)

- 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

History of School Linked Mental Health Grants

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:

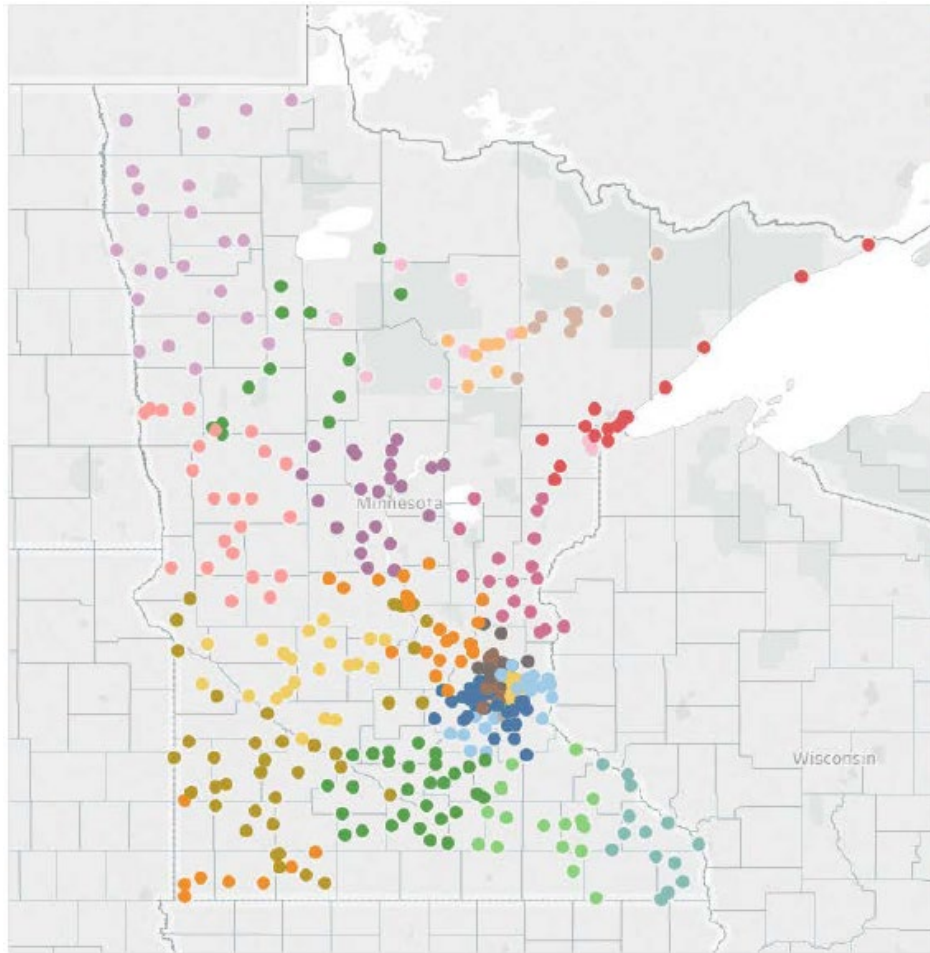
- Direct clinical services, and
 - To underinsured and uninsured children
- Ancillary services, and
 - Consultation time with school staff, attendance at IEP meetings, school-wide trainings
- Capacity enhancement
 - Building and sustaining a work force of trained clinicians

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>
 - Trauma-focused Cognitive Behavior Therapy (TF-CBT)
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

School Linked Mental Health School/Program Sites

July 2018 December 2018



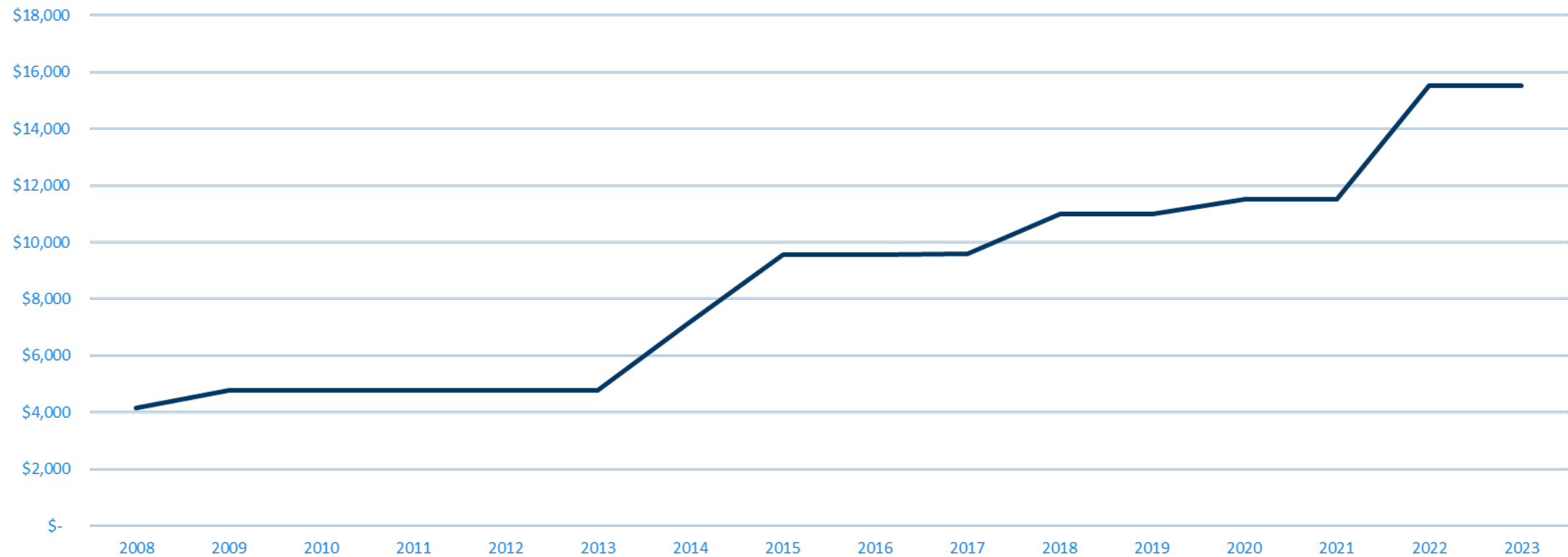
- Reported Grantee
- ASSOCIATED CLINIC OF PSYCHOLOGY
 - CANVAS HEALTH
 - CENTRAL MINNESOTA MENTAL HEALTH CE...
 - CHILDREN'S MENTAL HEALTH SERVICE/RE...
 - COUNSELING SERVICES OF SOUTHERN MIN..
 - FERNBROOK FAMILY CENTER
 - GREATER MINNESOTA FAMILY SERVICES
 - GUADALUPE ALTERNATIVE PROGRAMS
 - HEADWAY EMOTIONAL HEALTH
 - HIAWATHA VALLEY MENTAL HEALTH CENT..
 - HUMAN DEVELOPMENT CENTER
 - LAKELAND MENTAL HEALTH CENTER
 - LEE CARLSON CENTER
 - LIFE DEVELOPMENT RESOURCES
 - LIGHTHOUSE CHILD AND FAMILY SERVICES
 - NORTH HOMES
 - NORTHERN PINES MENTAL HEALTH CENTER
 - NORTHWESTERN MENTAL HEALTH CENTER
 - PEOPLE INCORPORATED
 - RANGE MENTAL HEALTH CENTER
 - RELATE COUNSELING CENTER
 - SCOTT COUNTY MENTAL HEALTH CENTER
 - SOUTHWESTERN MENTAL HEALTH CENTER
 - ST DAVID'S CENTER
 - STELLER HUMAN SERVICES
 - WASHBURN CENTER FOR CHILDREN
 - WESTERN MENTAL HEALTH CENTER
 - WOODLAND CENTERS

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.***

Legislative Appropriations

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

AREA	% of Principals
<i>Increase in the number of students with emotional problems</i>	73.7
<i>Student mental health issues</i>	65.5
Students not performing to their level of potential	62.3
Providing a continuum of services for students who are at risk	61.6
Student assessment	57.2
Student poverty	56.5
Instructional practices	55.8
Teacher performance/effectiveness	55.1
Professional development of staff	55.0
Fragmentation of principal's time	53.5
Management of student behavior	52.5
Financial resources	50.8

[The Pre-K-8 School Leader in 2018: A 10 Year Study](#), from the [National Association of Elementary School Principals](#) and the [University Council for Educational Administration](#)

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

Systems Alignment: School-Linked Mental Health

- 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

Focus Area	SLMH Get	School Get	SLMH Give	School Give	Shared Outcomes	
Collaboratively identifying and implementing an Evidence Based Practice (EBP)	<ul style="list-style-type: none"> • Allows for mutual selection • Better understanding of what is expected between schools and grantees • Supports buy-in from the beginning 					
Data-based decision making						<ul style="list-style-type: none"> • Promote a common vision in service to student outcomes through school and community staff collaboration
Professional Development (PD)						<ul style="list-style-type: none"> • Outcomes should be measurable



Give and Get Chart Example

School Linked Mental Health (SLMH) to Children and Families Across Minnesota SLMH & School Partnership Give and Get Agreement

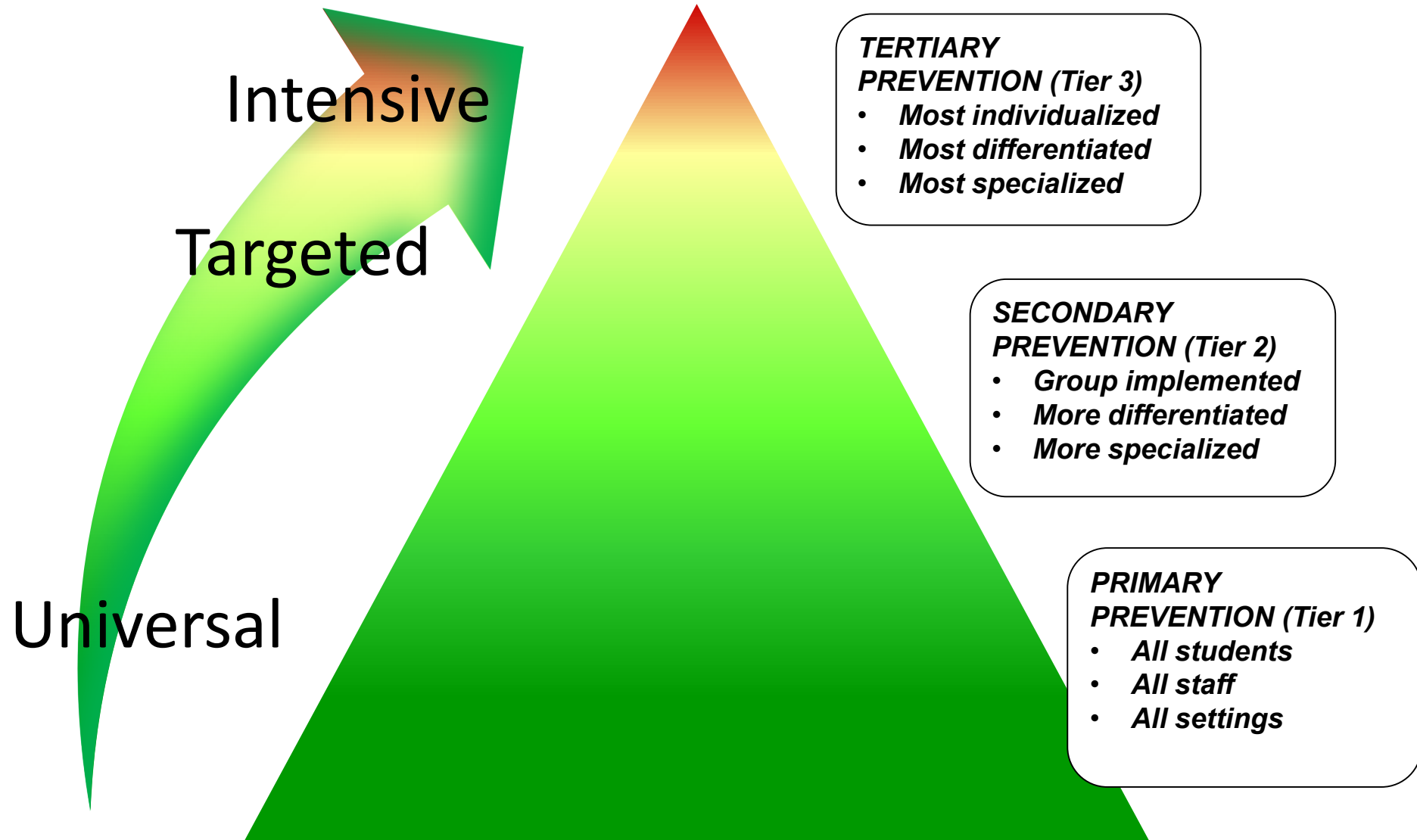
Focus Area	SLMH Get	School Get	SLMH Give	School Give	Shared Outcomes
Collaboratively Identifying and Implementing an Evidence Based Practice (EBP)	SLMH staff have a clear understanding of how to implement the identified EBP via direct clinical services and/or ancillary supports within the context and needs of the partnering school	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	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	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	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
Data-based decision making	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	Transparency and precision in the identification of students who would benefit from SLMH EBP, evidence of implementation with fidelity (e.g., Tiered Fidelity Inventory) and student progress	Agreement to collect and share implementation and progress data within the guidelines of both educational and medical legal requirements (i.e., HIPPA, FERPA) with designated school team	Provide regular access to data review meetings to systematically identify students, or groups of students who would likely benefit from SLMH EBP	Transparency in the process of monitoring the implementation of the SLMH EBP, identification of students who would benefit from SLMH EBP and progress data for both
Professional Development (PD)	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	School staff develops a better understanding of the SLMH staff role as well as of the EBP(s) being provided to students across tiers	SLMH staff will provide the professional development for school staff to related to mental health in schools across tiers and info on EBP(s) being provided	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	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

“...joining our best programs to our best implementation strategies...”

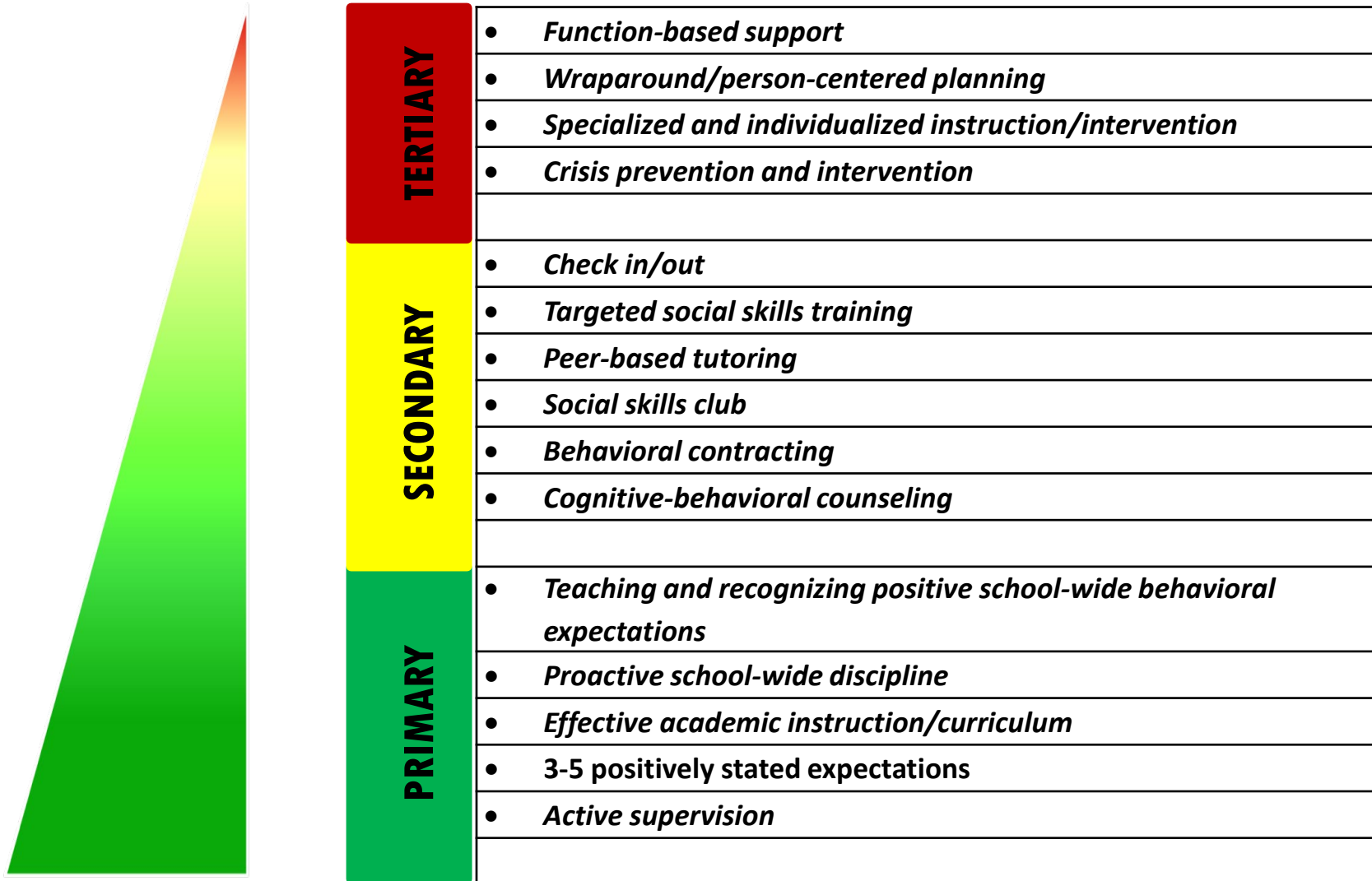
“[I]n the form of PBIS and MTSS, the education sector benefits from ‘operating systems’ that are not only informed by implementation science, but that attempt to mobilize implementation science via an organized system of practical strategies....[O]ne could argue that school mental health and positive 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)

- Lyon, A. R., & Brun, E. J. (2019). From evidence to impact: Joining our best school mental health practices with our best implementation strategies. *School Mental Health, 11*, 106-114.

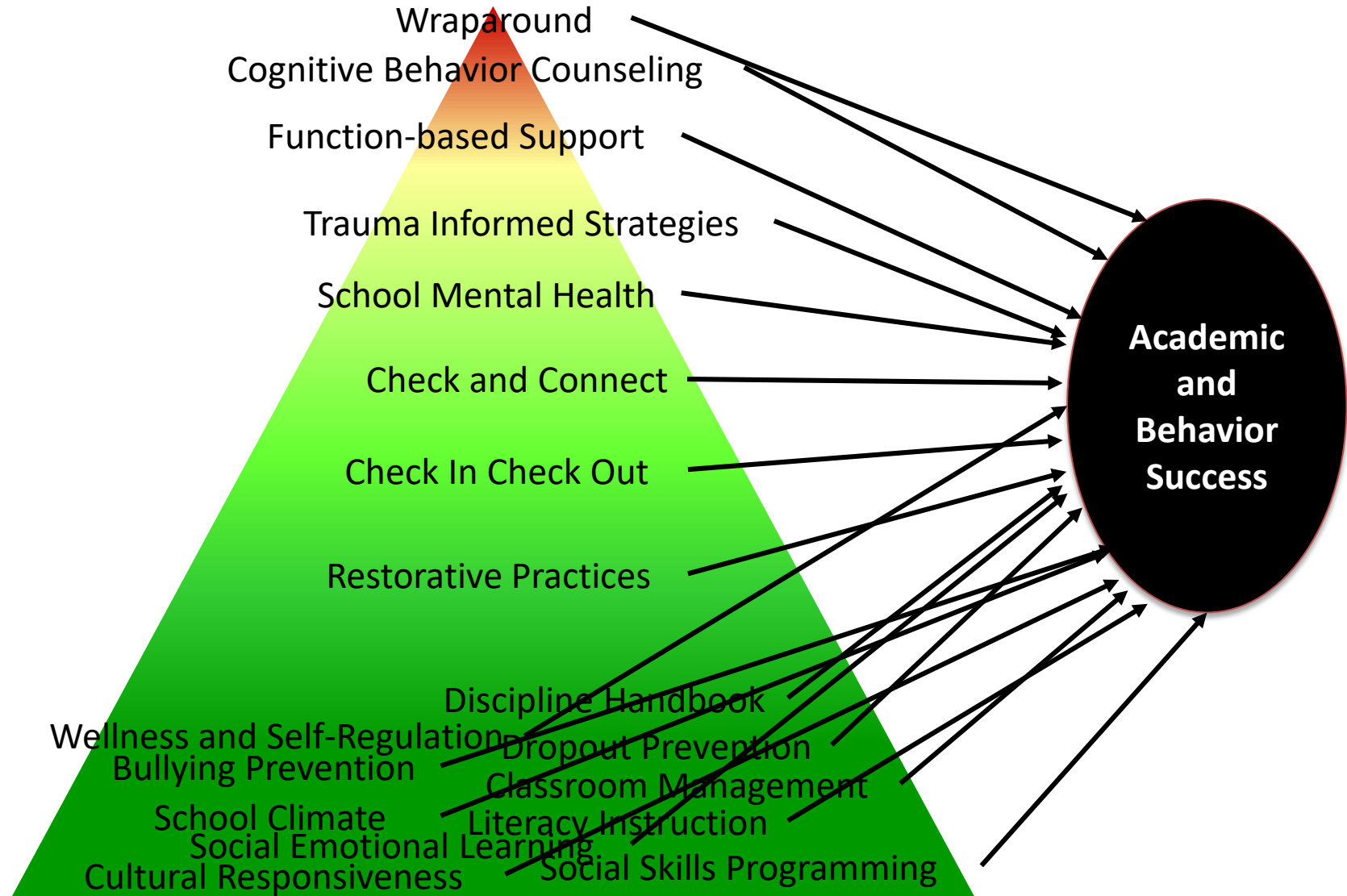
Continuum Logic: Support for All



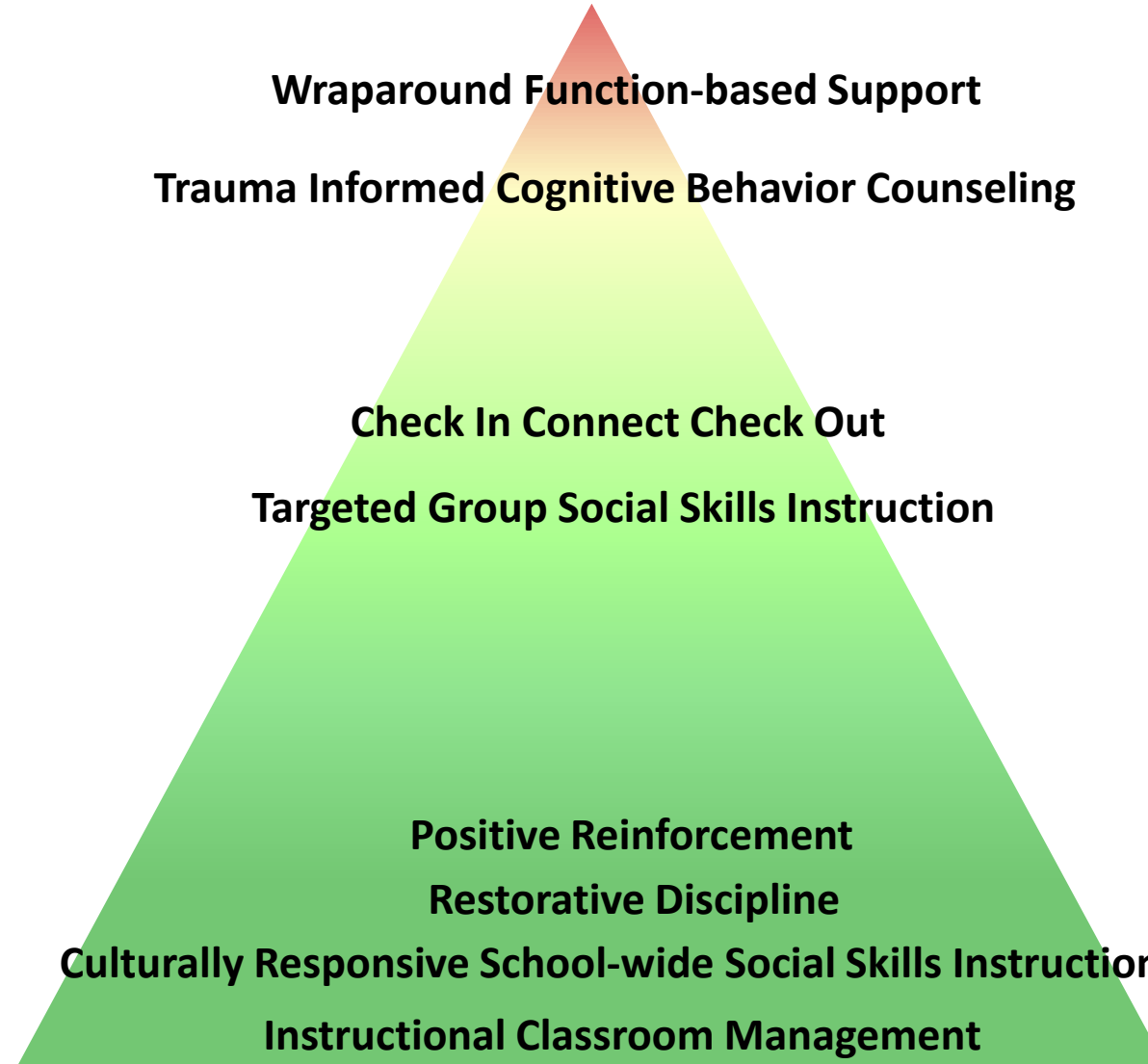
MN PBIS School Examples of Tiered Support Services Map



Help teams go from this...



To this...



School-Wide Systems for Student Success:
A Multi-Tiered System of Support (MTSS) Model:
Organizing Supports and Systems Not people

Grantee Systems

School Systems

Tier 3/Tertiary Interventions

1-5%

1-5%

Tier 3/Tertiary Interventions

- _____
- _____
- _____

- _____
- _____
- _____

Tier 2/Secondary Interventions

5-15%

5-15%

Tier 2/Secondary Interventions

- _____
- _____
- _____
- _____
- _____
- _____

- _____
- _____
- _____
- _____
- _____
- _____

Tier 1/Universal Interventions

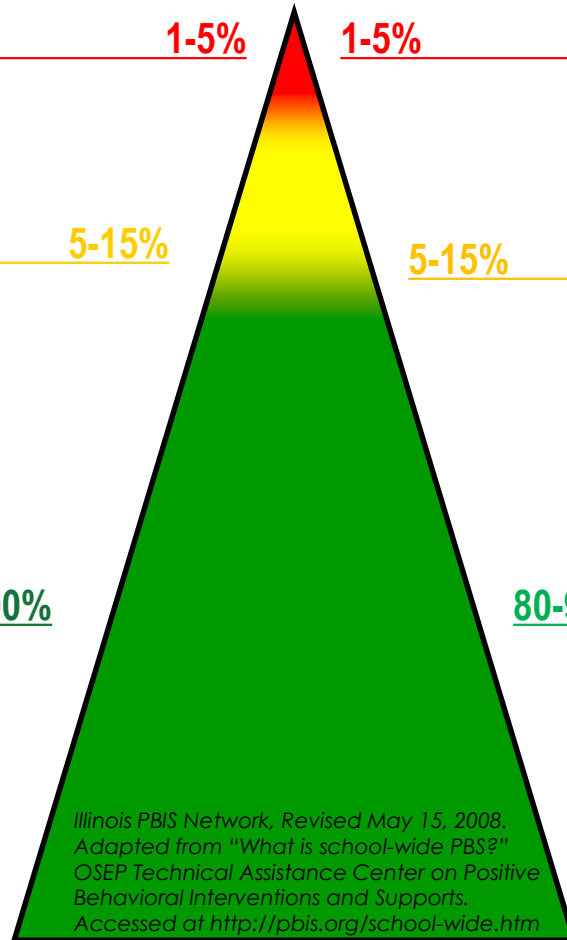
80-90%

80-90%

Tier 1/Universal Interventions

- _____
- _____
- _____
- _____
- _____
- _____
- _____

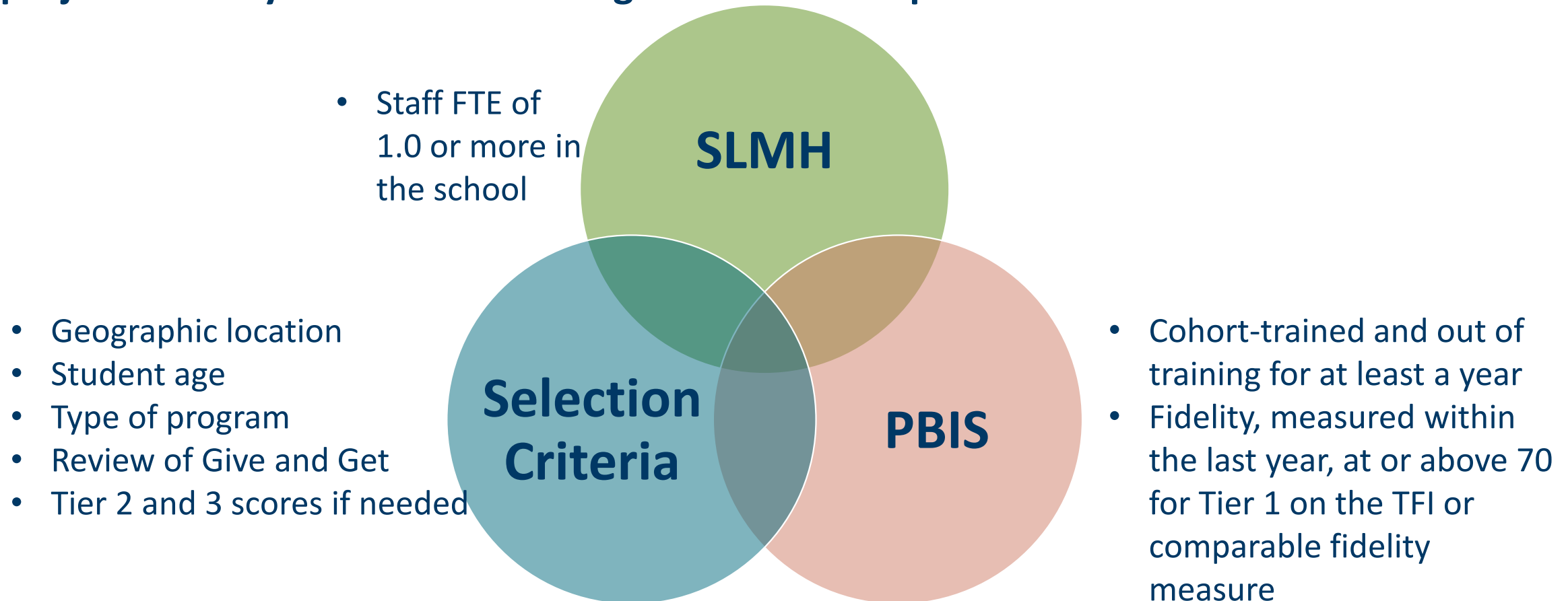
- _____
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- _____



Illinois PBIS Network, Revised May 15, 2008.
Adapted from "What is school-wide PBS?"
OSEP Technical Assistance Center on Positive
Behavioral Interventions and Supports.
Accessed at <http://pbis.org/school-wide.htm>

A Study of SLMH and PBIS Alignment

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



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

PBIS and SLMH Alignment Outcomes

- 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!

Eric Kloos

Eric.Kloos@state.mn.us

Kristin Lofgren

Kristin.Lofgren@state.mn.us