Promoting Student Safety and Wellness

Mental and Behavioral Health
Julie Wayman

Mental and Behavioral Health Manager
Interagency Liaison
Participants will increase knowledge of:

1. New School Mental Health Related Legislation from 86R Session

2. TEA Workstreams for School Mental Health

3. Engaging and providing recommendations and insights to TEA
Why does mental health matter?
Mental Health Statistics

20% of youth ages 13-18 live with a mental health condition.\(^1\)

10 yrs
The average delay between onset of symptoms and intervention is 8-10 years.\(^1\)

50%
Approximately 50% of students age 14 and older with a mental illness drop out of high school.\(^1\)

Sources: Texas Statewide Behavioral Health Strategic Plan, National Institutes for Health (NIH), National Association for Mental Illness (NAMI)
Suicidal Behavior Among Texas High School Student in Thoughts, Plans, and Attempts, in the Past 12 Months, YRBS 2017

- 17.8% Seriously Thought about Suicide
- 14.5% Made a Plan
- 12.3% Attempted Suicide

In a class of 25 Texas high school students, at least 1 (4.5%) made a suicide attempt so severe in the past 12 months that it required medical intervention.

The Texas YRBS is a biennial survey of students in randomly selected public and charter high schools across Texas. For more information about the Texas Youth Risk Behavior Survey please visit: www.dshs.texas.gov/chs/yrb.
More than 1 in 3 Texas high school students felt so sad or hopeless almost every day for 2 or more weeks in a row in the past 12 months that they stopped doing some usual activities.

The Texas YRBS is a biennial survey of students in randomly selected public and charter high schools across Texas. For more information about the Texas Youth Risk Behavior Survey please visit: www.dshs.texas.gov/chs/yrbs.
“Resilience cannot exist without hope. It is the capacity to be hopeful that carries us through challenges, disappointments, loss, and traumatic stress.”

Dr. Bruce Perry, Child Trauma Academy
Why this work matters?

School Mental Health Matters

3/4 Of youth who receive mental health services, 70-80% access these services in schools.

Positive school climate integrated with social emotional learning improves school safety and decreases bullying.

Students who participate in social emotional learning programs improve academic performance by 11 percentile points.

Youth are 8x more likely to complete mental health treatments in schools than in other community settings.
Connectivity

Every child, prepared for success in college, a career or the military.

Strategic priorities:
- Recruit, support and retain teachers and principals
- Build a foundation of reading and math
- Connect high school to career and college
- Improve low-performing schools

Enablers:
- Increase transparency, fairness and rigor in district and campus academic and financial performance
- Ensure compliance, effectively implement legislation and inform policymakers
- Strengthen organizational foundations (resource efficiency, culture, capabilities, partnerships)
Highlights of School Mental Health Related Bills
• **SB 11 – Overview (not inclusive):**

  - School Safety Committees, Safety Plans and Audits;
  - Safe and Supportive School Program with Teams, Tiered Interventions, Threat Assessments, and Data Collection;
  - Updating the Best Practices Resource List on TEA’s Website – New Requirements for TEA and HHSC;
  - Suicide Prevention Training – Strengthened Requirements Including Training Every 5 Years and Reporting to TEA;
  - District Trauma Informed Care Policy Required;
  - Grief-Informed, Trauma-Informed Training Required;
  - Mental Health Resources Rubric and Inventory – State and Regional; and
  - Developing a State Plan for School Mental Health – Ensuring Access for All.
HB 18 – Overview (not inclusive):

- District Improvement Plans to Include Strategies for Positive Behavior Interventions and Support, Including Interventions that Integrate Grief-Informed and Trauma-Informed Care;
- Educator Training Required to Support Learning for Students with Mental Health Conditions or Who Engage in Substance Abuse;
- District Procedures for Supporting Students in Returning to School from Treatment or a Suicide Attempt;
- District Online Posting of Policies to Promote Mental Health, Posting District Mental Health Services and Information on Accessing Community Services; and
- TEA/HHSC to Develop Guidelines on Accessing Community Services and Guiding Principles on the Coordination of Mental Health Programs and Best Practices.
HB 19 – Overview (not inclusive):

- Placing a Mental Health Professional from the Local Mental Health Authority (LMHA) in each Education Service Center (ESC);
- Position Designed to Serve as a Mental Health Resource for Schools – Knowledge of Public and Private Services;
- Interagency Agreement Required Between ESCs and LMHAs; and
- Providing Training in MHFA and Trauma Informed Practices
HB 906—Overview (not inclusive):

- Creating a School Mental Health Task Force;
- Appointing Universities to Evaluate School Mental Health Services, Programs and Training Funded by the State;
- Collecting Data from Schools and TEA; and
- Making Recommendations and Submitting a Report to the Legislature;
**S.B. 11** – Rubric Development (December 2019 to ESC’s), Updating Best Practice List, Coordination w/HHSC, Coordination w/School Safety Center, Mental Health State Plan (4/20), Trauma-Informed Care Policy Rules (8/20). (*update only - not conclusive of all requirements)

**H.B. 18** – TEA to develop resources and tools, Educator training and certification required to address students with mental health conditions, who engage in substance abuse, trauma-informed education, etc. Rules to be developed for policy and training schedule (8/20) (*update only - not conclusive of all requirements)

**H.B. 19** – Preliminary planning w/HHSC to occur in September (Mental Health Professional from the Local Mental Health Authority (LMHA) located in each Education Service Center (ESC). (*additional engagement and input needed)

**H.B. 906** – Creation of a Mental Health Task Force. (Preliminary planning to determine next steps underway.)
Highlights of TEA Mental and Behavioral Health Workstreams
TEA School Mental Health Workstreams

- Guidance and Tools Aligned with Statutes
- System Fidelity and Quality Measurement
- School Mental Health Website
- Interagency Collaboration and Implementing MOUs
- Training and Technical Assistance
- Grants and Pilots (AWARE, PAX GBG, etc.)
Mental Health and Behavioral Health

Texas has the Texas School Mental Health and Behavioral Health Website. TEA developed these resources to provide information to help schools to support student mental and behavioral health.

Approximately 1 in 5 school-aged youth experiences impairments in life functioning, including academic performance, social success, and personal achievement, due to a mental illness. The number of students experiencing mental health challenges increases as young people grow older.

Outside of a student’s home, schools are the most likely place where mental health concerns will first be noticed. Fortunately, the earlier mental health concerns are detected and addressed, the more likely a student is to avoid the onset and/or progression of a mental illness. Many times signs of deteriorating mental health are noticeable well before a mental illness emerges.

This website seeks to assist school personnel with resources for supporting student mental health. In Texas, there are numerous collaborative efforts, statutes, services, programs and strategies available to support the identification of mental health challenges and to address them. Please bookmark the page, share the link and visit often to learn of new resources and opportunities for promoting school mental health in Texas.

https://tea.texas.gov/About_TEA/Other_Services/Mental_Health/Mental_Health_and_Behavioral_Health/

State Laws:

TEC §38.351 – Annual Update of Best Practices

TEC §21.062 – Website Required

TEC §21.044 - Educator Preparation

TEC §21.054 - Continuing Education

TEC §11.252 – District Needs Assessment and Plan for Suicide Prevention
Mental and Behavioral Health

Best Practice Components

- Mental Health Promotion
- Mental Health Prevention and Early Intervention
- Suicide Prevention, Intervention and Postvention
- Substance Abuse Prevention and Intervention
- Grief Informed and Trauma Informed Practices
- Safe and Supportive School Climate
- Building skills related to managing emotions, establishing, and maintaining positive relationships, and responsible decision making
- Positive Behavior Interventions and Supports
- Positive Youth Development
Priority Project Goal: Develop guidance, resources and tools to equip schools to strengthen support for student mental health

Systems Level: Mental Health Ecosystem Networks Tools
- Assessing needs, identifying and mapping community resources
- Assessing processes against quality school mental health indicators
- Developing community partnerships, collaboration and written agreements
- Planning for mental health prevention, supports and intensive services within an MTSS

Student Level: Early Identification of Mental Health Needs Tools
- Compilation of mental health screeners
- Tools for parent engagement: Informed parent consent
- Sample forms: referral forms, student wellness plans, monitoring plan
- Best practices for early identification, services and supports
Guiding Principles on Coordinating Practices and Programs on Best Practice List (statutory HB 18)

Tool to Identify Team and Team Member Roles

Compilation of Mental Health Screeners, Including Trauma Screening Tools

Compilation of School Climate Inventories

Sample Referral Form

Sample Screening Notification and Opt-Out Form

Sample Informed Consent Form

Student Service Plan and Monitoring Template

Sample Transition Plan and Safety Plan Template

Needs Assessment and Resource Mapping Tool

Quick Links: Look-Up Features to Identify Community Mental Health Resources and Supporting Resources – Will be Web-based

Comprehensive Service Plan Template – All Tiers

Supplemental Service Planning and Monitoring Tools:
  - Data Collection Plan for Interventions
  - Provider Plan and Tracking Tool
  - Student Roster
  - Calendar

Sample Memorandum of Understanding with Providers

7 Quality School Mental Health Domains and Performance Indicators- Self Assessment Tool

Brief on Telemedicine – Telepsychiatry (Tentative)
## Early Identification of Mental Health Needs

**35 Screeners Identified by Experts**

**School-Based Mental and Behavioral Health Screening Tools**

### Instrument
<table>
<thead>
<tr>
<th>Instrument</th>
<th>Description</th>
<th>Target Population</th>
<th>Length</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DNA</strong></td>
<td>The DNA (Diagnostic and Neurodevelopmental Assessment) is a multidisciplinary tool for identifying mental health needs in children and adolescents. It includes measures for anxiety, depression, conduct problems, and peer problems.</td>
<td>Ages 8-18</td>
<td>100 items</td>
<td><a href="https://www.psychoeducational.com/assessment/dna/">https://www.psychoeducational.com/assessment/dna/</a></td>
</tr>
<tr>
<td><strong>CAMS-25</strong></td>
<td>The CAMS-25 (Children's Assessment of Maladaptive Symptoms) is a brief, computer-administered measure of internalizing and externalizing behaviors.</td>
<td>Ages 7-17</td>
<td>25 items</td>
<td><a href="https://www.psychoeducational.com/assessment/cams-25/">https://www.psychoeducational.com/assessment/cams-25/</a></td>
</tr>
<tr>
<td><strong>SDQ</strong></td>
<td>The Strengths and Difficulties Questionnaire (SDQ) is a brief, computer-administered measure of mental health status in children and adolescents. It includes measures for social, emotional, and behavioral problems.</td>
<td>Ages 3-18</td>
<td>25 items</td>
<td><a href="https://www.psychoeducational.com/assessment/sdq/">https://www.psychoeducational.com/assessment/sdq/</a></td>
</tr>
<tr>
<td><strong>SCAT</strong></td>
<td>The Strengths and Challenges Assessment Tool (SCAT) is a brief, computer-administered measure of strengths and resilience in children and adolescents.</td>
<td>Ages 6-18</td>
<td>10 items</td>
<td><a href="https://www.psychoeducational.com/assessment/scat/">https://www.psychoeducational.com/assessment/scat/</a></td>
</tr>
<tr>
<td><strong>Suicide Risk</strong></td>
<td>The Suicide Risk Assessment Tool (SuRAT) is a brief, computer-administered measure of suicide risk in children and adolescents.</td>
<td>Ages 8-18</td>
<td>10 items</td>
<td><a href="https://www.psychoeducational.com/assessment/surat/">https://www.psychoeducational.com/assessment/surat/</a></td>
</tr>
</tbody>
</table>

### School-Based Mental and Behavioral Health Screening Tools

**Instrument**

- **Anxiety**
  - Inventory of Behavioral Experiences (IBEX)
  - **CAMS-25**
  - **SDQ**
  - **SCAT**
  - **Suicide Risk**

**Description**

- Inventory of Exposure to Traumatic Events
- **CAMS-25**
- **SDQ**
- **SCAT**
- **Suicide Risk**

**Target Population**

- 12 and up
- 10 items
- 25 items
- 10 items
- 10 items

**Time**

- 15 minutes
- 10 minutes
- 10 minutes
- 10 minutes
- 10 minutes

**Language**

- English
- Spanish
- English
- Spanish
- English
# Early Identification of Mental Health Needs

**Example Universal Screening Tool - Aligned with PBIS and SMH**

## STUDENT RISK SCREENING SCALE for Internalizing and Externalizing Behaviors (SRSS-IE) - MS/HS

<table>
<thead>
<tr>
<th>TEACHER NAME</th>
<th>NUMBER OF STUDENTS SCREENED</th>
</tr>
</thead>
</table>

**USE THIS SCALE TO RATE EACH ITEM FOR EACH STUDENT**

**0 = NEVER**

**1 = OCCASIONALLY**

**2 = SOMETIMES**

**3 = FREQUENTLY**

"Please note that Peer Rejection is summed to both the SRSS-IE and "SRSS-IE total scores."

<table>
<thead>
<tr>
<th>NUMBER OF STUDENTS SCREENED</th>
<th>STUDENT ID#</th>
<th>STUDENT NAME</th>
<th>TEACHER NAME</th>
<th>Externalizing Behaviors</th>
<th>Internalizing Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lie, Cheat, Sneak, Behavior Problem, Peer Rejection, Academic Achievement, Negative Attitude, Aggressive Behavior, Emotionally Flat, Shy, Withdrawn, Sad, Depressed, Anxious, Lonely</td>
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</table>

**Tools:** StudentNameHelp, StudentScores, Externalizing_Fcers, ExternalizingTriangle, ExternalizingStudentChart, Internalizing_Fcers, InternalizingTriangle
The Campus Service Plan template is used to document the comprehensive mental health service delivery plan developed for your campus. It should incorporate information gathered from your school mental health needs assessment and eco-system asset mapping process. This plan should be developed by a representative leadership team that has the authority to ensure implementation of planned activities. The Campus Service Plan should be reviewed regularly and modified as needed throughout the year.

The Campus Service Plan incorporates an Interconnected Systems Framework (ISF) that integrates Positive Behavioral Interventions and Supports (PBIS) and School Mental Health (SMH) interventions within a school. This includes planning around a framework of Multi-Tiered System of Supports (MTSS) to link the academic and behavioral health needs of students. Planned interventions should increase with intensity based on student need.

The Campus Service Plan is broken into two sections. The Campus Service Plan Template is used to capture planned mental health programs, levels. The Supplemental Planning Tools can be used to capture additional information about planned activities as needed.

**Campus Service Plan Template**

Use this document to capture all interventions planned for the year. Include specific information about the need to be addressed with each intervention and who will facilitate each intervention and the location each intervention will take place. Document the specific timeframe each intervention will occur and the duration of the intervention during the year. Identify any resources needed to provide each intervention. Modify this plan as needed.

**Supplemental Planning Tools**

- **Data Collection Plan**
  - Use this document to capture the data collection process for each intervention planned for the year. Specifically identify any measurement tools to be used during the intervention, the specific schedule for their administration and any communication necessary regarding data collection (e.g., parental consent).

- **Provider Detail Plan**
  - Use this document to capture specific information about all service providers engaged for the year. Include specific contact information and affiliation. Ensure all necessary agreements and data sharing considerations are in place. Identify any orientation or training needed for each provider (e.g., school protocols).

- **Student Roster**
  - Use this document to capture information about the specific students receiving services during the year and specific baseline and progress data collected.

- **Calendar Template**
  - Use this template to map when each intervention is scheduled throughout each month.

**Campus Service Plan Template**

<table>
<thead>
<tr>
<th>Program, Training or Intervention Tier I, II or III</th>
<th>Need Addressed / Desired Impact</th>
<th>Who Facilitates</th>
<th>Location</th>
<th>Schedule / Duration</th>
<th>Resources Needed</th>
</tr>
</thead>
</table>

**Supplemental Planning Tools: Calendar**

<table>
<thead>
<tr>
<th>MONTH:</th>
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<tbody>
<tr>
<td>Sunday</td>
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What Does School Mental Health Look Like?

**Systems of Prevention and Promotion**
All students receive a safe and healthy school climate with age-appropriate social, emotional, and behavioral skill building, supported by universal screening, referral pathways and access to needed support services (Universal).

**Systems of Early Intervention**
Students identified as at-risk and needing individualized screening, staffing and interventions receive targeted classroom, individual or group skill-building and supports (Targeted).

**Systems of Treatment**
Students identified as needing intensive interventions, safety plans, and wraparound are provided with school-based treatment and effective connections to community-based services. (Indicated)

Foundation: Data, School, Family and Community Partnerships

Evidence-Based Practices with Fidelity
Adverse Childhood Experience (s)

Disrupted Neuro-Development

- Parental Separation
- Divorce
- Parent Incarceration

Adverse Childhood Experiences (ACEs) Conceptual Framework of Trauma

Opportunity in education to Intervene

Social, Emotional, Cognitive Impairment

- Domestic Violence
- Substance Abuse
- Household Mental Illness

Adoption of Risky Behaviors – Increased Health Risk

- Emotional Neglect
- Physical Neglect
- Physical Abuse
- Sexual Abuse
- Emotional Abuse

ACE Score =

- Graded Impact
- Accumulative Impact

Disease, Disability and Social Problems

Early Death

ACEs Impact Across the Life Span

Adapted From: https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html
Trauma Informed Practices Resources:
A Trauma Informed Approach for Building Resilience and Wellbeing

Reduce or Mitigate Against Risk Factors

Increase Promotive and Protective Factors

Resilience, Mental Health, Healthy Development and Wellbeing
Few Intensive Services

Targeted Mental Health Supports for Some

Universal Prevention Best Practices and Mental Health Training

AWARE TEXAS
Advancing Wellness and Resilience in Education

Collaboration & PLC

SAMHSA Grants

Evidence-Based Practices

Direct MH Services

The University of Texas at Austin
Texas Institute for Excellence in Mental Health
Steve Hicks School of Social Work

GOOSE CREEK CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

WOODSBORO ISD
EXCELLENCE IS TEACHING AND LEARNING

Refugio

The University of Texas at Austin
Texas Institute for Excellence in Mental Health
Steve Hicks School of Social Work

BRIDGE CITY ISD
Home of the Cardinals

REGION 5
Education Service Center

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AWARE Texas- Advancing Wellness and Resilience in Education

- SAMHSA Grant- 5-year grant – Partnership with HHSC and Mental Health Authorities, ESC 2, 3, 4, 5, and 5 school districts, 15 schools
- Mental health specialists in schools
- PBIS/Integrated Systems Framework (ISF) for mental health
  - Screening for mental health needs
  - Evidence based practices within an MTSS (CBITS, CPS, PAX GBG, YMHFA...)
  - Mental health and trauma Informed interventions
  - Access to MH care
  - Mental health awareness training
  - School/Parent/Community Partnerships
- Evaluation – UT Austin – Institute for Excellence in Mental Health
- Infrastructure Development
SHAPE helps schools and districts improve their school mental health systems! HOW?

- SHAPE users map their school mental health services and supports.
- Assess system quality using national performance standards.
- Receive custom reports and strategic planning guidance and resources.
- Utilize additional SHAPE features including the Screening and Assessment Library and Trauma-Responsive Schools Assessment and Resources.
- Use district and state dashboards to collaborate with schools and districts in your region.
Fidelity: Quality School Mental Health Domains

- Teaming
- Needs Assessment, Resource Mapping, Planning
- Screening
- Mental Health Promotion and Prevention
- Early Intervention and Treatment
- Funding and Sustainability
- Impact

7 Quality Self Assessment Domains with 43 indicators for Comprehensive School Mental Health
School leaders can organize multi-disciplinary safe and supportive school teams in alignment with SB 11 (86R)

School leaders can develop and implement multi-tiered systems of support (MTSS) to support student behavioral health, mental health and safety, in alignment with SB 11 (86R)

School leaders can identify and map both school and community mental health resources available to support students and families, identify gaps and develop plans to address gaps in the school’s MTSS service plan.

School leaders can build community partnerships, hire or contract with non-physician mental health professionals, as authorized in SB 11 (86R), and coordinate safe and supportive services through the school’s MTSS service delivery plan.
Mental Health Art Contest Student Winners: What Mental Health Means to Me
Mental Health Art Contest Student Winners: What Mental Health Means to Me

SEE MORE ART
gallery.txsystemofcare.org
Announcements

SAVE THE DATE!
4th Annual Summit on Advancing Behavioral Health Collaboratives

STRONG SCHOOLS
Advancing Student Wellness and Resiliency in Texas

NOV 6 2019
Hilton Austin
500 E 4th St
Austin, TX

A preconference event at the 2019 Annual Conference on Advancing School Mental Health

https://sites.utexas.edu/mental-health-institute/strong-schools/
Announcements

2019 National Conference on Advancing School Mental Health

November 7-9 (Preconference November 6)

Austin, TX Hilton

Register: http://csmh.umd.edu/Conferences/Annual-Conference-on-Advancing-School-Mental-Health/
Discussion

1. What are goals for school mental health and wellness?:

   For these groups:
   I. Students
   II. Staff
   III. Parents

2. What are the strengths of schools that contribute to addressing student mental health?

3. What are the gaps in schools for addressing student mental health?

4. What are the barriers?

5. What strategies would help schools to meet goals for providing school-based mental health?
Mental and Behavioral Program Contact

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https://tea.texas.gov/About_TEA/Other_Services/Mental_Health/Mental_Health_and_Behavioral_Health/

Phone: 512-936-6403