



# Mental Health Matters

ACET October 22, 2019

10:00 AM

2:45 PM

San Antonio, Texas



# Promoting Student Safety and Wellness

## Mental and Behavioral Health



# Presenter


**Julie Wayman**

**Mental and Behavioral Health Manager  
Interagency Liaison**



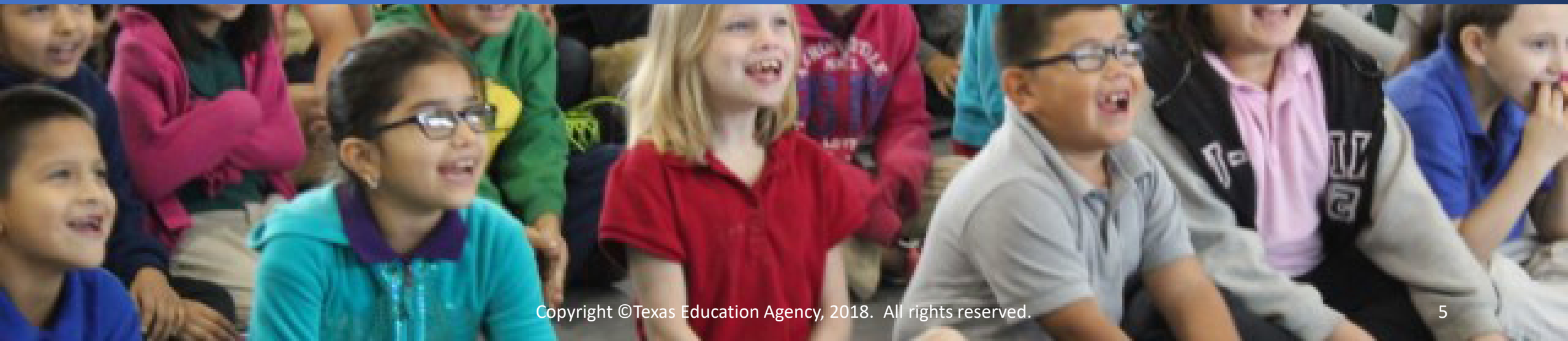


Participants will increase knowledge of:

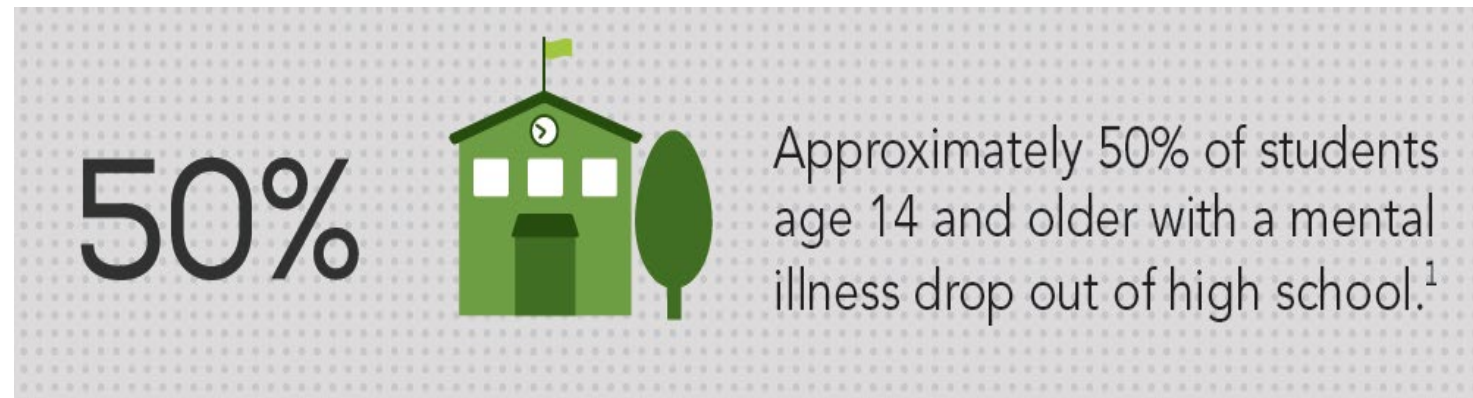
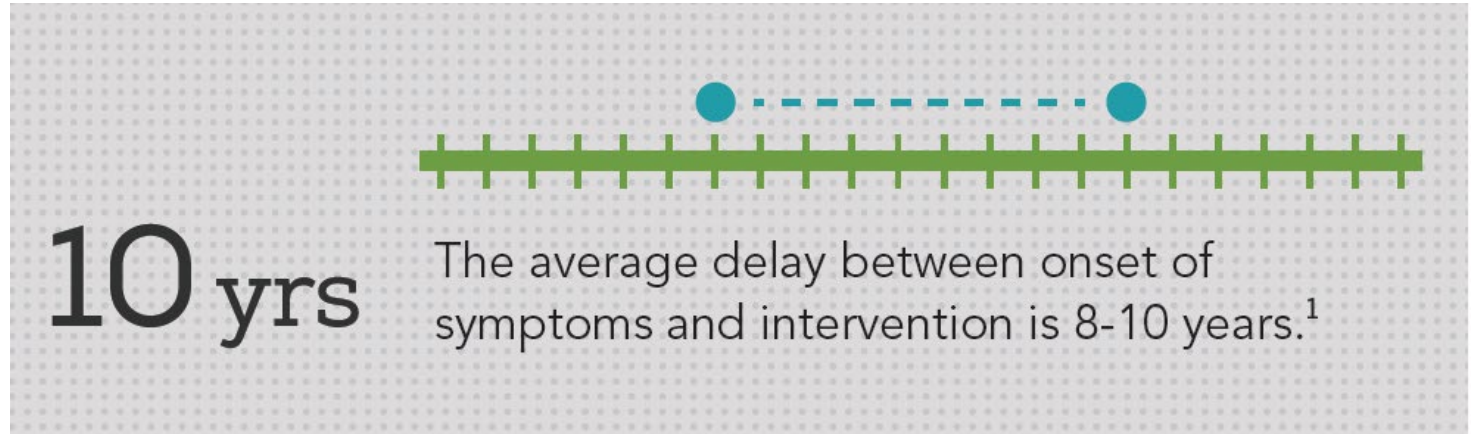
1. New  School Mental Health Related Legislation from 86R Session
2. TEA Workstreams for School Mental Health
3. Engaging and providing recommendations and Insights to TEA



# Why does mental health matter?



# Mental Health Statistics



Sources: Texas Statewide Behavioral Health Strategic Plan, National Institutes for Health (NIH), National Association for Mental Illness (NAMI)

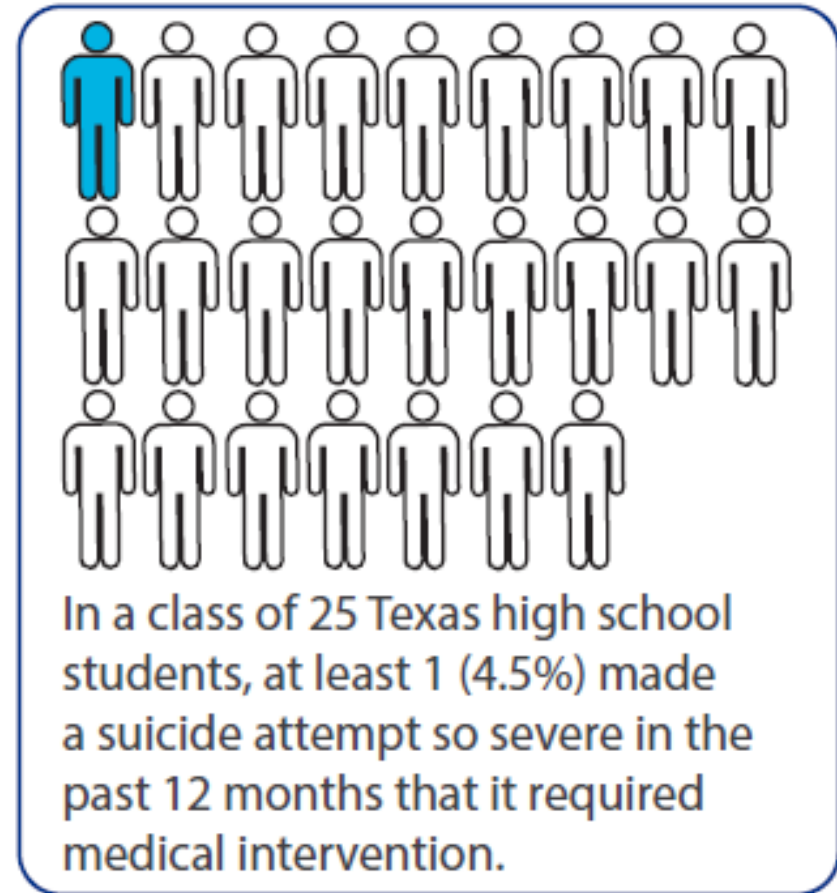
# Mental Health Statistics

Suicidal Behavior Among Texas High School Student in Thoughts, Plans, and Attempts, in the Past 12 Months, YRBS 2017

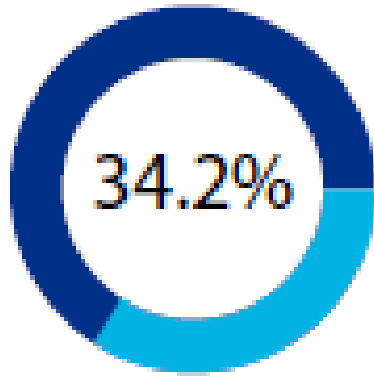
17.8% Seriously Thought about Suicide

14.5% Made a Plan

12.3% Attempted Suicide



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](http://www.dshs.texas.gov/chs/yrbs).



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](http://www.dshs.texas.gov/chs/yrbs).



# Wellness and Resilience – TEA Goal



“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



# 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.



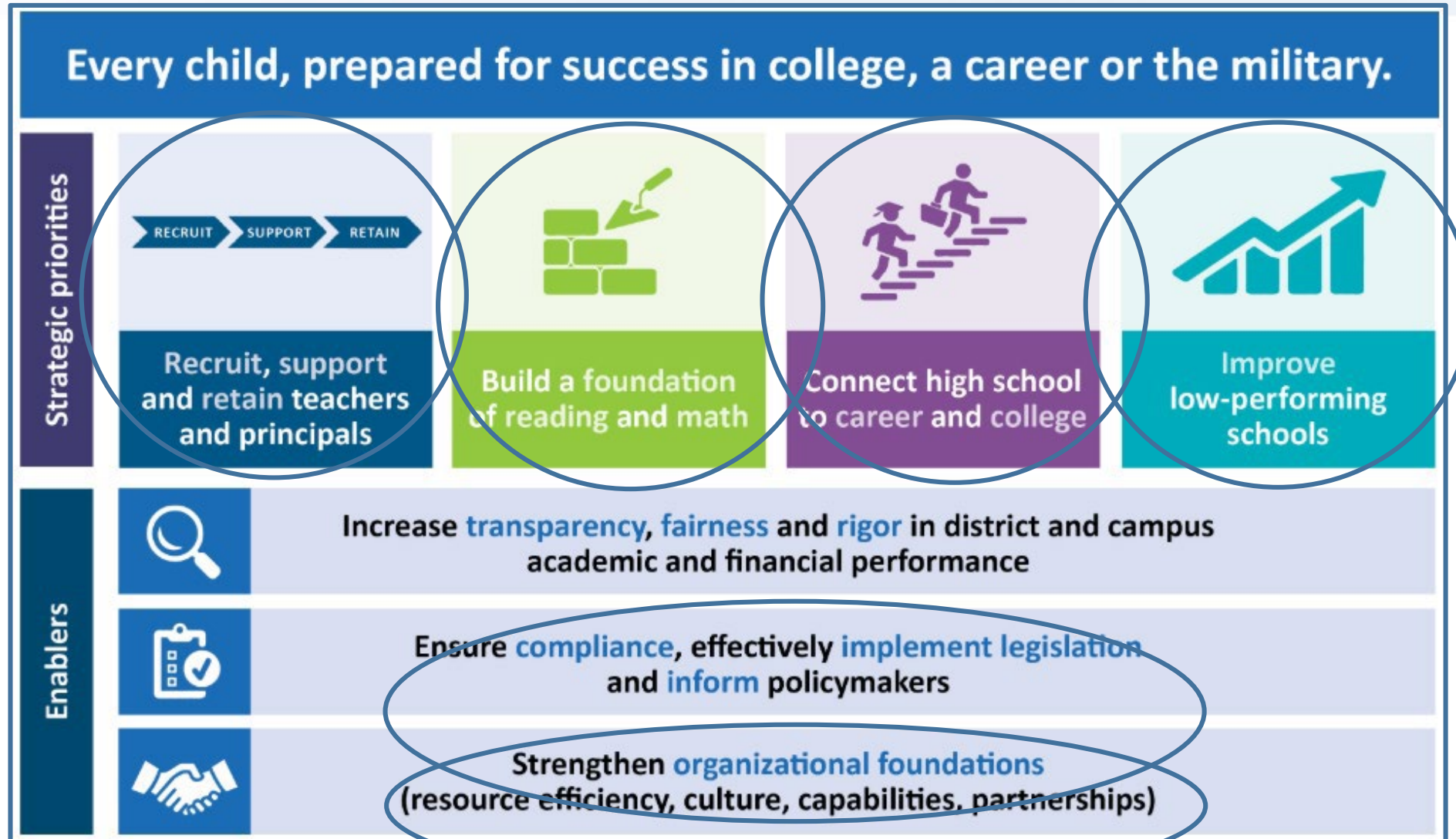
Students who participate in social emotional learning programs **improve academic performance by 11 percentile points.**

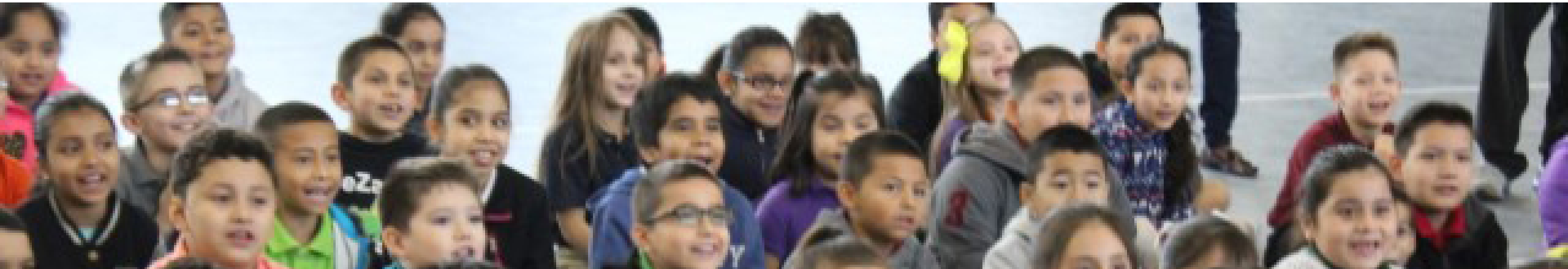


Youth are **8x more likely** to complete mental health treatments in schools than in other community settings.

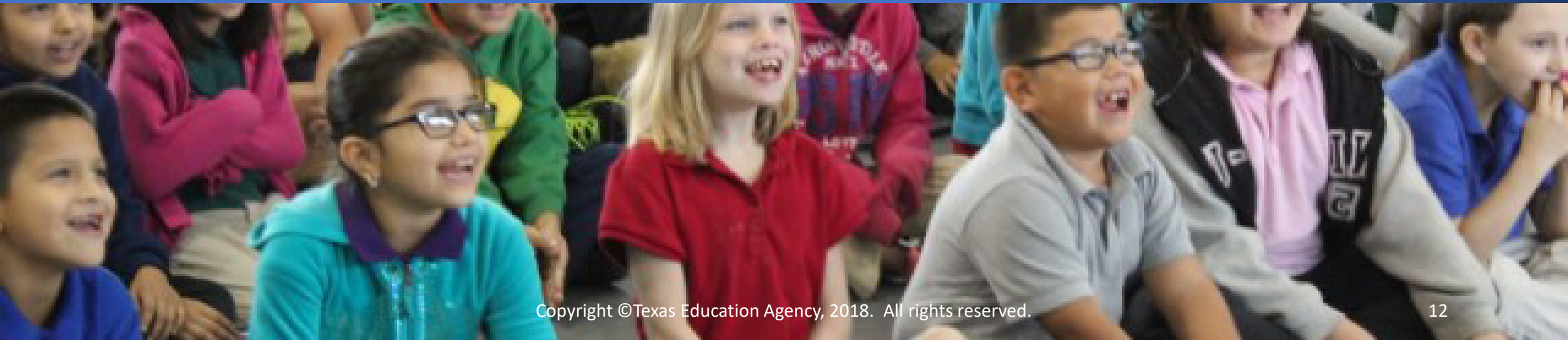
**8x**







# 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)



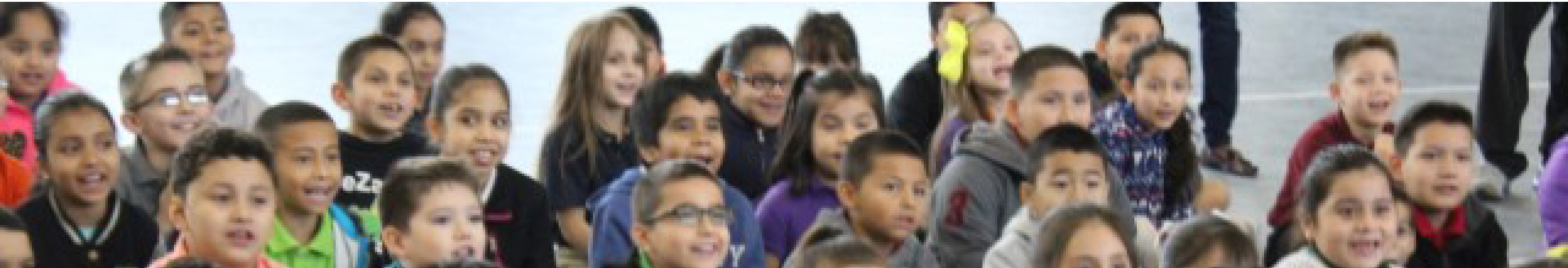
**H.B. 18** – TEA to develop resources and tools, Educator training and certification required to address students with mental health conditions, who engage in substance abuse, trauma-informed education, etc. Rules to be developed for policy and training schedule (8/20) (\*update only - not conclusive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



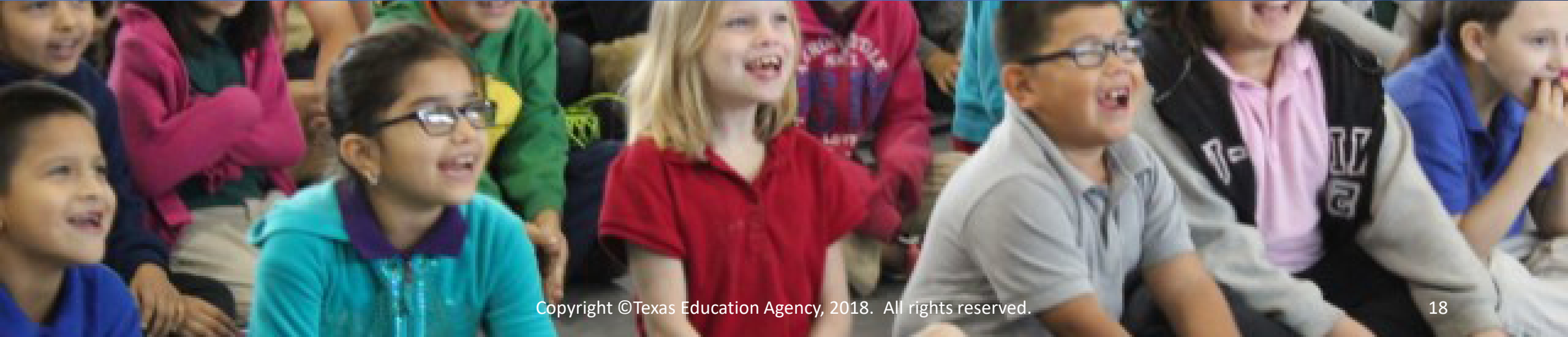
**H.B. 19** – Preliminary planning w/HHSC to occur in September (Mental Health Professional from the Local Mental Health Authority (LMHA) located in each Education Service Center (ESC). (\*additional engagement and input needed)



**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





Guidance and Tools  
Aligned with Statutes

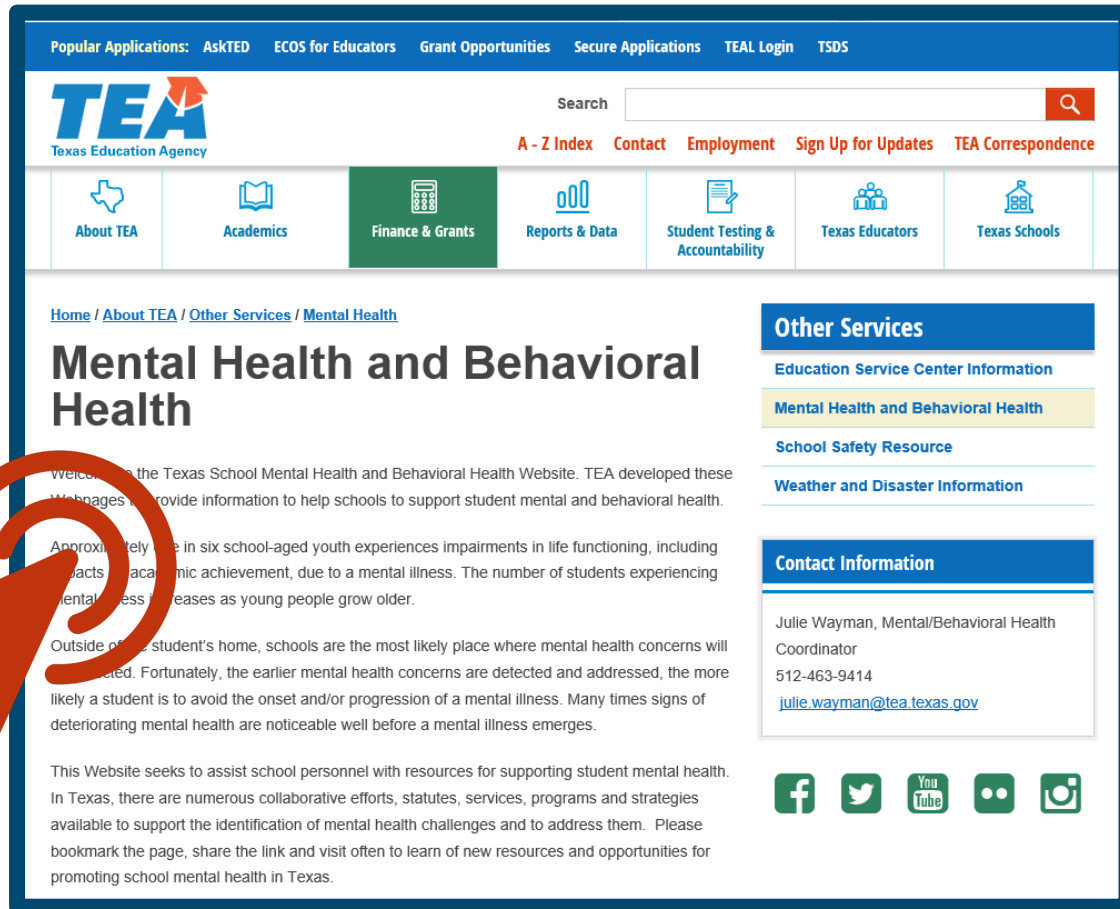
System Fidelity and  
Quality Measurement

School Mental Health  
Website

Interagency  
Collaboration and  
Implementing MOUs

Training and Technical  
Assistance

Grants and Pilots  
(AWARE, PAX GBG, etc.)



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## Mental Health and Behavioral Health

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

Approximately one in six school-aged youth experiences impairments in life functioning, including impacts on academic achievement, due to a mental illness. The number of students experiencing mental illness increases as young people grow older.

Outside of a student's home, schools are the most likely place where mental health concerns will be detected. 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.

**Other Services**

- [Education Service Center Information](#)
- [Mental Health and Behavioral Health](#)
- [School Safety Resource](#)
- [Weather and Disaster Information](#)

**Contact Information**

Julie Wayman, Mental/Behavioral Health Coordinator  
512-463-9414  
[julie.wayman@tea.texas.gov](mailto:julie.wayman@tea.texas.gov)

[Facebook](#) [Twitter](#) [YouTube](#) [LinkedIn](#) [Instagram](#)

## State Laws:

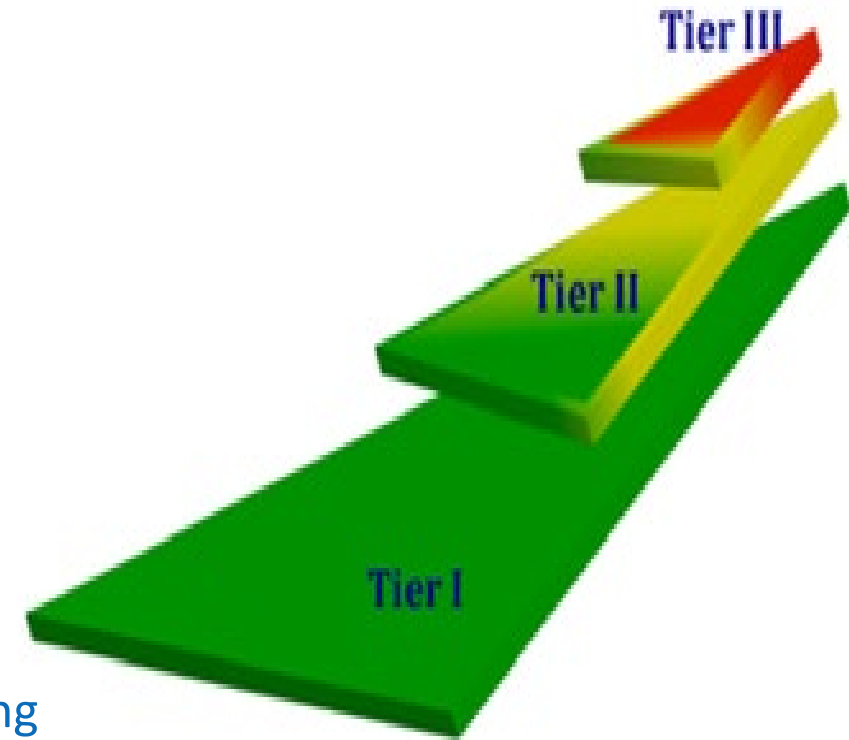
- TEC §38.351 – Annual Update of Best Practices
- TEC §21.062 – Website Required
- TEC §21.044 - Educator Preparation
- TEC §21.054 - Continuing Education
- TEC §11.252 – District Needs Assessment and Plan for Suicide Prevention

[https://tea.texas.gov/About TE/Other Services/Mental Health/Mental Health and Behavioral Health/](https://tea.texas.gov/About_TE/Other_Services/Mental_Health/Mental_Health_and_Behavioral_Health/)



## 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)



## 35 Screeners Identified by Experts

- Trauma
- Strengths and Resilience
- Suicide Risk
- Internalizing and Externalizing Behaviors
- Depression and Anxiety



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

Instrument	Author/Year	Description	Target Population	Length	Other
Iowa Conners Rating Scale	Loney and Milich 1982 Pelham et al. 1989	The IOWA Conners Rating Scale is a widely used brief measure of inattentive-impulsive-overactive (IO) and oppositional-defiant (OD) behavior in children.	Parents (Mothers) and teachers	10 item measure – 5 for IO and 5 for OD	<a href="https://www.researchgate.net/publication/226517594_Parent_and_teacher_ratings_on_the_IOWA_Conners_Rating_Scale">https://www.researchgate.net/publication/226517594_Parent_and_teacher_ratings_on_the_IOWA_Conners_Rating_Scale</a>
NICHQ Vanderbilt Assessment	2002- NICHQ, American Academy of Pediatrics, McNeil	The NICHQ Vanderbilt Assessment Scales are used by healthcare professionals to help diagnose ADHD in children between the ages of 6 and 12.	Children between 6 and 12. Parents and teachers	4 pages (55 questions for parents; 31 for teacher)	Just the 1 <sup>st</sup> edition from 2002 is free.  You may use/distribute the 1st Edition Vanderbilt Assessment Scales as long as NICHQ is credited as the original source.  English only
Snap-IV	Swanson et al., 2001	In addition to the DSM-IV items for ADHD and ODD, the SNAP-IV contains items from the Conners Index Questionnaire (Conners, 1968) and the IOWA Conners Questionnaire (Loney and Milich, 1985).	6-18 year olds	90 item	<a href="https://www.addrc.org/wp-content/uploads/2009/10/snap-iv-instructions.pdf">https://www.addrc.org/wp-content/uploads/2009/10/snap-iv-instructions.pdf</a>
The Children's Scale of Hostility and Aggression-Reactive/Proactive (C-SHARP) V2.0	Farmer, C. & Aman, M. (2009). Development of the Children's Scale of Hostility and Aggression: Reactive/Proactive (C-SHARP). Research in Developmental	The Children's Scale of Hostility and Aggression: Reactive/Proactive (C-SHARP) is an instrument for measuring aggressive and hostile behavior in children and adolescents with developmental disabilities.	Children and Adolescents with intellectual or Developmental Disabilities	Verbal Aggression (12 items), II. Bullying (12 items), III. Covert Aggression (11 items), IV. Hostility (9 items), and V. Physical Aggression (8 items).	<a href="http://disabilitymeasures.org/c-sharp/">http://disabilitymeasures.org/c-sharp/</a>



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



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

Instrument	Public Domain	Description	Target Population	Time	Language	
Adverse Childhood Experiences	<a href="https://nationalcrittendon.org/wp-content/uploads/2015/10/ACES_Toolkit.pdf">https://nationalcrittendon.org/wp-content/uploads/2015/10/ACES_Toolkit.pdf</a> <a href="https://www.ncfjc.org/sites/default/files/Finding%20Your%20ACE%20Score.pdf">https://www.ncfjc.org/sites/default/files/Finding%20Your%20ACE%20Score.pdf</a>	Inventory of exposure to traumatic events	13 and up	5min	English	<a href="http://www.massgeneral.org/psy/services/treatmentprogram?px?id=2088&amp;display=over">http://www.massgeneral.org/psy/services/treatmentprogram?px?id=2088&amp;display=over</a>  <a href="http://bit.missouri.edu/?p=1116">http://bit.missouri.edu/?p=1116</a>
Child PTSD Symptom Scale (CPSS; Foa, Johnson, Feeny, Treadwell 2001)	<a href="http://www.midss.org/content/child-ptsd-symptom-scale-cpps">http://www.midss.org/content/child-ptsd-symptom-scale-cpps</a>	Clinical training recommended Based on DSM IV	8-18	20min	English, Spanish	<a href="http://pbiscompendium.ssd.k12.wy.system-tools">http://pbiscompendium.ssd.k12.wy.system-tools</a>
Los Angeles Symptom Checklist - Adolescent Version (LASC - Adolescent Version Foy, Wood, King, King, & Resnick 1995)	<a href="https://www.oregon.gov/oha/HSD/AMH/Trauma%20Policy/lasc-adolescent.pdf">https://www.oregon.gov/oha/HSD/AMH/Trauma%20Policy/lasc-adolescent.pdf</a>	Simple language, short phrases. No event or functioning items; based on DSM IV 17 PTSD symptom items as well as items related to abusive drinking, boy/girlfriend problems, excessive eating/drinking	13-18	15min	English, Spanish	<a href="http://pbiscompendium.ssd.k12.wy.system-tools">http://pbiscompendium.ssd.k12.wy.system-tools</a>  <a href="http://mbisi.org/evaluation/stuassessments/student-risking-scale">http://mbisi.org/evaluation/stuassessments/student-risking-scale</a>
Traumatic Events Screening Inventory - Revised (TESI-CRF-R/ TESI-PRF-R Ippen, et al. 2002)	<a href="https://www.ptsd.va.gov/professional/assessment/child/tesia.asp">https://www.ptsd.va.gov/professional/assessment/child/tesia.asp</a>	24 items (parallel caregiver report form available) List of trauma exposures Prior Experience in Psych Testing/Interpretation suggested	TESI-C, Clinician, 19-146 items (for ages 4-18) TESI-P, Clinician, 19 items (for ages 4-8)	20-30min	English	





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

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

TEACHER NAME

NUMBER OF STUDENTS SCREENED

SCREENING

**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 in both the SRSS-E7 and SRSS-I6 total scores.*

NUMBER OF STUDENTS SCREENED	STUDENT ID#	STUDENT NAME	and/or TEACHER NAME	EXTERNALIZING BEHAVIORS						INTERNALIZING BEHAVIORS				
				STEAL	LIE, CHEAT, SNEAK	BEHAVIOR PROBLEM	PEER REJECTION	ACADEMIC ACHIEVEMENT	NEGATIVE ATTITUDE	AGGRESSIVE BEHAVIOR	EMOTIONALLY FLAT	SHY; WITHDRAWN	SAD; DEPRESSED	ANXIOUS
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## Campus Service Plan

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 Social and Emotional Learning (SEL) interventions within a school. This includes planning around a framework of Multi-Tiered System of Supports (MTSS) to link the academic and behavioral interventions. 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 and interventions. 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, how each intervention will facilitate each intervention and the location each intervention will take place. Document the specific timeframe each intervention will occur 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 describe how data will be collected, how many students are identified to participate in the intervention. Identify the number of students to be served or the percent of students to be served. 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 information about provider qualifications, roles, and responsibilities. Ensure all necessary agreements and data sharing considerations are in place. Identify any orientation or training needs for providers.

### Student Roster

Use this document to capture information about the specific students receiving services during the year and specific information about their needs (as appropriate).

### Calendar Template

Use this template to map when each intervention is scheduled throughout each month.

## Campus Service Plan Template

Program, Training or Intervention	Tier I, II or III	Need Addressed / Desired Impact	Who Facilitates	Location	Schedule / Duration	Resources Needed

## Supplemental Planning Tools: Calendar

### MONTH:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

## Evidence-Based Practices with Fidelity

### 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)

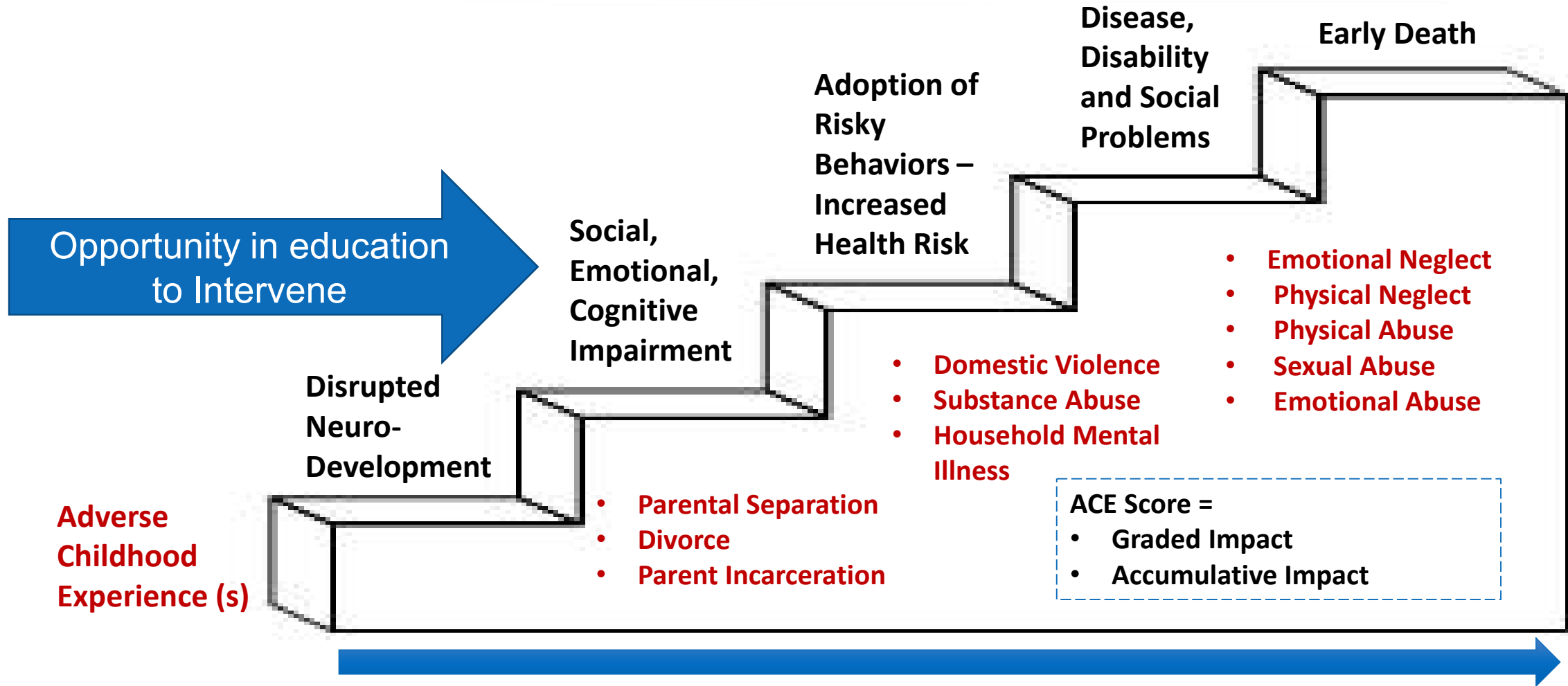
### Systems of Early Intervention

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)

# Trauma Informed Practices Resources Adverse Childhood Experiences (ACEs) Conceptual Framework of Trauma



Adapted From:  
<https://www.cdc.gov/violenceprevention/childabuseandneglect/cestudy/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

# AWARE TEXAS

Advancing Wellness and Resilience in Education



SAMHSA Grants

Collaboration & PLC



Advancing Wellness and Resiliency in Education

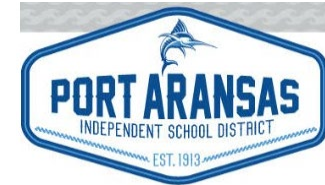


Few Intensive Services

Targeted Mental Health Supports for Some



Universal Prevention Best Practices and Mental Health Training



Evidence-Based Practices

Direct MH Services

# AWARE Texas Overview



## 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

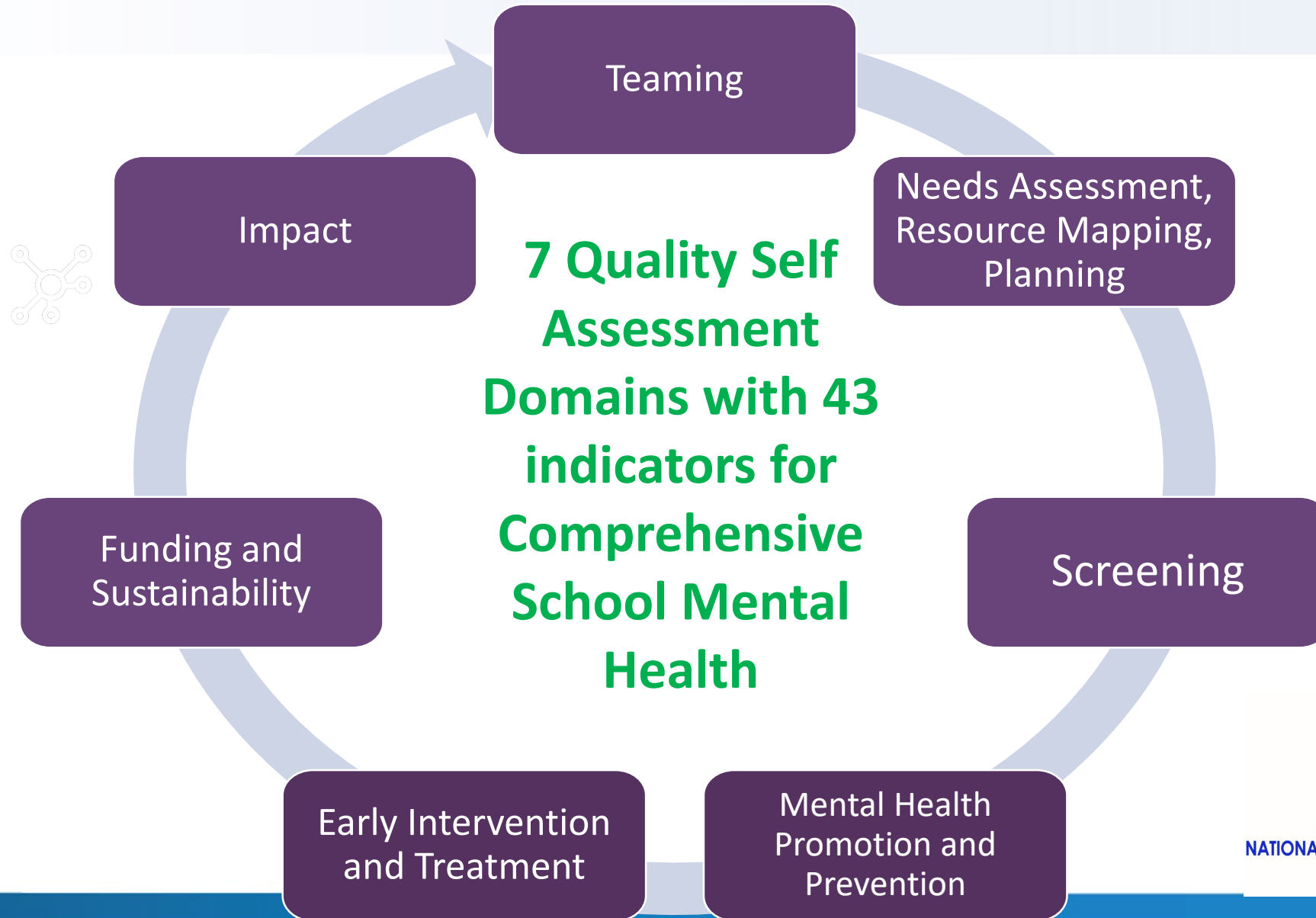


FIDELITY: 7 Quality Domains and 43 Performance Measures for Comprehensive School Mental Health

## SHAPE helps schools and districts improve their school mental health systems! HOW?







# Campus Leadership Corner

## Keys Actions for Success



School leaders can organize multi-disciplinary teams 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](http://gallery.txsystemofcare.org)

# Announcements

**SAVE THE DATE!**  
4<sup>th</sup> 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.umaryland.edu/Conferences/Annual-Conference-on-Advancing-School-Mental-Health/>



# Discussion

1. What are our Goals for School Mental Health and Wellness? for:
  - I. Students
  - II. Staff
  - III. Parents
2. What are Strengths of Schools for Supporting Mental Health
3. What are our Gaps in Schools for Supporting Mental Health?
4. What are our Barriers?
5. What Strategies would help schools to meet our goals for school mental health?

# Questions







# Mental and Behavioral Program Contact

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TEA Mental and Behavioral Health:

[https://tea.texas.gov/About TEA/Other Services/Mental Health/Mental Health and Behavioral Health/](https://tea.texas.gov/About%20TEA/Other%20Services/Mental%20Health/Mental%20Health%20and%20Behavioral%20Health/)

Phone: 512-936-6403