Please note that I am the author of some of the materials discussed today. While I believe my comments and opinions to be factual and evidence-based, you should judge the evidence for yourself and make an independent decision regarding diagnostic and intervention materials selection and use.
The Push-Play Series

• Each agenda will look similar
  • 15 minutes of content in a micro-training
  • 15 minutes of discussion
  • 10 minutes “NEXT STEPS”; homework if you are working on implementation; Q&A
  • 5 minute Review and forecast, previewing next week.

• THE SERIES
  • Intro to Screening, Prevention, Progress Monitoring Assessment, and Intervention (today Aug. 24)
  • Universal Screening Models and Implementation How to (Aug. 31)
  • School Risk, Data and Prevention Programs (Sept. 7)
  • Progress Monitoring how-to (Sept. 14)
  • Supporting Teachers (Sept. 21)
  • Assessment and Interventions (Sept. 29)
What is the state of the art for prevention and treatment of social, emotional, and behavioral risk and disorders?

How do we promote health and wellbeing of students, faculty, and staff?
What is the state of the art for prevention and treatment of social, emotional, and behavioral risk and disorders?

The Need

- K-12 classrooms, where children’s problems are often first identified, there is only 1 school psychologist for every 1,211 students, when the ratio should be 1 to 500, (Katherine Cowan, spokeswoman for the National Association of School Psychologists).

- Suspected suicide attempts dramatically increased among adolescents ages 12 to 17 last February and March. Girls’ visits to emergency departments after suicide attempts soared by nearly 51 percent over 2019, and rose to a high of more than 1,000 weekly visits by spring 2021 (Kalb, Stapp, Ballard, Honingue, Keefer, & Riley, 2019)

- 80 percent of youth with severe depression receive no treatment or insufficient treatment.

The evidence-supported solutions

- *Partnerships with communities and across schools within a district*

- *Build coalitions to support Universal screening.*

- *Identify existing resources.*

- *Triage and communicate resources and programming.*

- *Educate the educators.*

- *Comprehensive support for the academic, social, emotional, and behavioral needs is critical.*
Comprehensive Social Emotional and Behavioral Approach

**PROGRAMMING**
- Behavioral and Emotional Skill-Building Guide
- School wide and Classroom level support plans and lessons

**SCREENING**
- Behavior & Emotional Screening System (BESS)

**REMEDIAION**
- Behavior Intervention Guide
- Hundreds of interventions step by step
- Behavioral and Emotional Skill-Building Guide
  - Conversation starters
  - Small group guides
  - Lesson plans

**ASSESS**
- Teacher Rating Scales (TRS), Parent Rating Scales (PRS), Self-Report of Personality (SRP)
- Parenting Relationship Questionnaire (PRQ)
- Structured Developmental History (SDH)
- Student Observation System (SOS)

**INTERVENTION**
- Behavior Intervention Guide
- Specific evidence based interventions by problem type
- Behavioral and Emotional Skill-Building Guide
- Small group guides and individual lessons

**MONITOR**
- FLEX Monitor
Why engage in Social, Emotional, Behavioral Screening? Resources are scarce the *needs are not.*

- Approximately 20% of our school age population has or would qualify for mental health services and many of these students develop disabling conditions.
- Since prevention is the most effective and efficient method for providing services – how do we find our students in need and what are we looking for?
How do we find them? Universal Screening.

• The use of screening data is well established as a valid and reliable method for determining students with elevated levels of risk (Kamphaus & Distephano, 2007; Romer & McIntosh, 2005; Elliott & Gresham, 2008).

• Several nationally standardized screeners exist with strong scientific and social validity (Lane, 2010; Vannest, Harrison, & Reynolds, 2011).
  • BASC-3 BESS
  • SRSS-EC
  • SRSS
  • SAEBRS
  • SDQ
  • SSBD
  • SSiS
Example BESS screener

Instructions:
Listed below are phrases that describe how students may act. Please read each phrase, and mark the response that describes how this student has behaved recently (in the last several months).

Mark ① if the behavior never occurs.
Mark ② if the behavior sometimes occurs.
Mark ③ if the behavior often occurs.
Mark ④ if the behavior almost always occurs.

Please mark every item. If you don’t know or are unsure of your response to an item, give your best estimate.

A “Never” response does not mean that the student “never” engages in a behavior, only that you have not observed the student to behave that way.

Before starting, please fill in the information in the boxes on the first two pages of this form.

<table>
<thead>
<tr>
<th>Mark:</th>
<th>N—Never</th>
<th>S—Sometimes</th>
<th>O—Often</th>
<th>A—Almost always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Pay attention.</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
<tr>
<td>2. Does it</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
<tr>
<td>3. Is it</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
<tr>
<td>4. Break the rules.</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
<tr>
<td>5. Is it organized.</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
<tr>
<td>6. Has a good self-control.</td>
<td>③</td>
<td>③</td>
<td>③</td>
<td>③</td>
</tr>
</tbody>
</table>
In a Roster report, students are listed according to whatever level is chosen; in this case, the district level was chosen, and results are sorted within each school in the district.
Useable Timeline

• Ready to start:
  ✓ Prep teachers and parents, send notices, review school rules for consensus
  ✓ Teach school rules to students, use school rules to guide universal programs
  ✓ Establish leadership team

✓ Initial implementation
  ✓ Screen school population after 6 weeks (BASC-3 BESS: Behavior Emotional Screening System)
  ✓ Review risk list
  ✓ Determine number of students to serve

✓ October-November
  ✓ Notify & consent parents
  ✓ Conduct assessments to identify problem type (BASC-3)
  ✓ Consider coordinating reading or academic screening and behavioral risk notification

✓ November-December
  ✓ Use targeted interventions (Intervention Guide & Classroom Guides)
  ✓ Use resource mapped interventions

✓ January-February, March-May as appropriate
  ✓ Use targeted interventions (Intervention Guide & Classroom Guides)
  ✓ Use resource mapped interventions
  ✓ Consider specialized services based on diagnostic assessment, structured background interview, direct observation and FBA
Live-Survey Question

Question 1.
How would you evaluate your current universal programming and screening?

A. We have top-notch programming, curriculum, well trained faculty, and have been doing universal screening
B. A work in progress
C. We have not yet considered how to do this systematically
D. We have tried in the past and things don’t stick
The stressors and chronic stress facing faculty, staff, and students remains unprecedented.
We can focus on treatment or we can focus on prevention...

- ¼ of pediatric visits are related to behavior problems
- Teachers leave the field at an alarming rate and cite discipline as a number one reason.
- Students with EBD
  - Are 2 to 4 grade levels behind in academics
  - Have a 46% drop out rate
  - Have 3.2 times the expulsion rate
  - Experience MORE - fatal accidents, substance abuse, divorce, unemployment, psychiatric illness, and early death
  - Experience MORE - punitive contacts with teachers, peer rejection, problem family interactions
Have a system? *Describe and communicate.*
Need a system? *Build your team.*
A systems approach is needed.

• Form partnerships with communities and across schools within a district.
• Build coalitions to support Universal screening.
• Identify existing resources.
• Triage and communicate resources and programming.
• Educate the educators.

Support for academic, social, emotional, and behavioral needs is critical.
Survey Question for the Chat

Question 2. What are your greatest barriers to engaging in universal screening?
Discussion Question for National Breakouts

(I call this a 7 on 7 – 7 minutes in a breakout, 7 minutes back to share-out discuss/listen)

Question 3: What is your most pressing need and what is your goal?
Next Steps / Homework for implementation
What next?

• Interested in making a big-impact?
• Consider a reflective self-assessment about your district or school.
  • Is there a working leadership team and is it functional?
  • Who needs to be at the table to make change happen?
  • What resources or supports exist to enable a sustainable program of comprehensive supports for social, emotional, behavioral well being?
  • Who might lead that conversation and initiative?
  • Is there interest and support in developing a plan that works for your area, your resources, your needs?
  • It is ok to go slow to go fast.
Review and Forecast

A second session on *Universal Screening Models and Implementation How To* is offered next week – same time and “location”.

You are welcome to come back with a team – let’s make this year the one of unprecedented POSITIVE change.
Professor Herman stopped when he heard that unmistakable thud – another brain had imploded.