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# Get to know the Zoom Webinar Interface

The screenshot shows the Zoom Webinar interface with several key components and annotations:

- Top Bar:** Includes "Zoom Webinar", "You are viewing David Terry's screen", and "View Options".
- Session View:** A large purple slide on the left displays "WELCOME!" and "Please note:" followed by two bullet points: "All attendees are muted" and "Today's session will be recorded".
- Q&A Window:** A "Question and Answer" window is open, showing "All questions (1)" and "My questions (1)" tabs. A test question "This is a test question!" is visible. A text input field at the bottom says "Type your question here...".
- Chat Window:** A "Zoom Webinar Chat" window is open on the right, showing a "To: All panelists" field and a message: "Your text can only be seen by panelists".
- Bottom Bar:** Contains "Audio Settings", "Chat", "Raise Hand", "Q&A", and "Leave" buttons.
- Annotations:** Blue boxes provide instructions for the Q&A feature, such as "You can use the Q&A feature to ask questions of the host and presenters..." and "You can switch between questions you've asked and those asked by others using these buttons." Green boxes explain the chat feature, stating "The chat feature will allow you to talk with other people in today's webinar." and "The To field will tell you who will receive your message. Be mindful of who you are chatting to."



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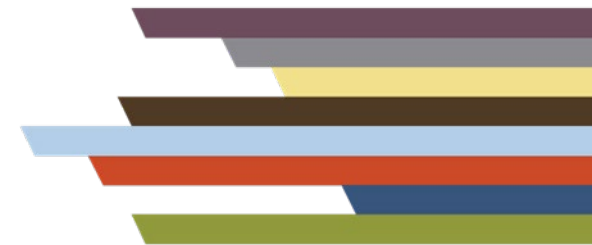
## MHTTC School Mental Health Curriculum *Always and Now* 8-Part Learning Series

FEBRUARY-MAY 2021



Presented by the MHTTC Network  
and National Center for School Mental Health

*Session 5 Mental Health Promotion for ALL – Tier 1*

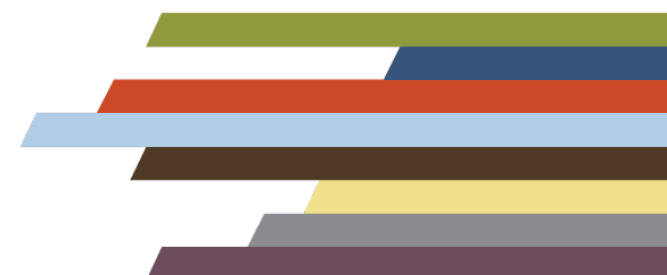
April 13, 2021



# Housekeeping Items

- We have made every attempt to make today's presentation secure. If we need to end the presentation unexpectedly, we will follow-up using your registration information.
- All attendees are muted and cannot share video.
- Have a question for the presenters? Use the Q&A Pod
- Have an audio or tech issue? Use the Chat Box
- You will receive an email following the presentation on how to access a certificate of attendance
- Closed captioning is available!
- Follow us on social media:   @MHTTCNetwork

**Please Note:**  
**The session recording will be posted on our website within a few days.**



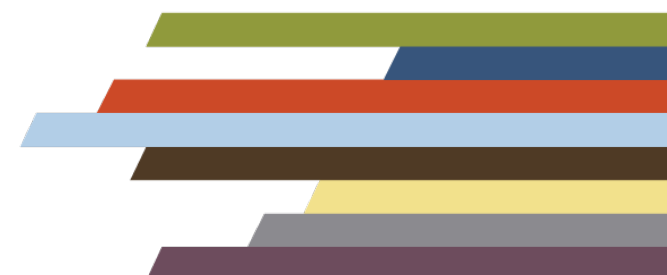


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- The MHTTC Network accelerates the adoption and implementation of mental health related evidence-based practices across the nation
  - Develops and disseminates resources
  - Provides free local and regional training and technical assistance
  - Heightens the awareness, knowledge, and skills of the mental health workforce
- 10 Regional Centers, a National American Indian & Alaska Native Center, a National Hispanic & Latino Center, and a Network Coordinating Office



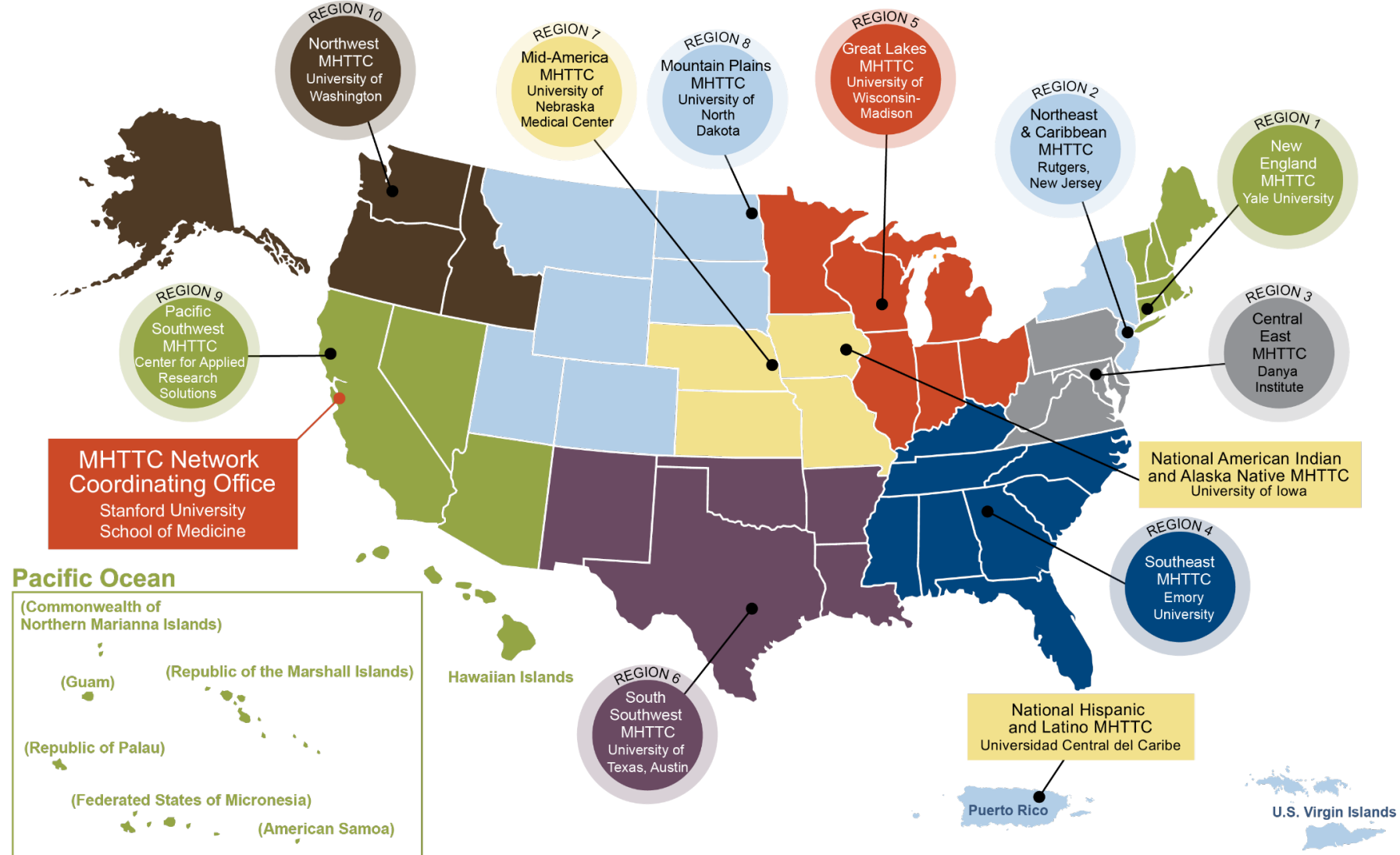
# Connect with Your MHTTC at [www.mhttcnetwork.org](http://www.mhttcnetwork.org)



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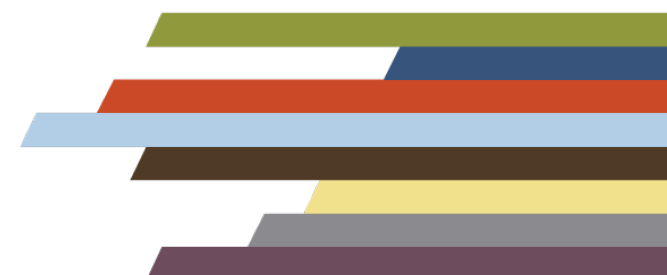
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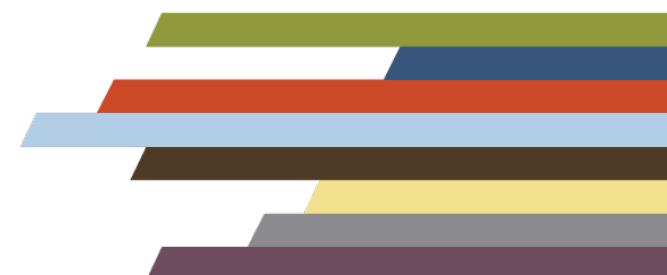




# Evaluation Information

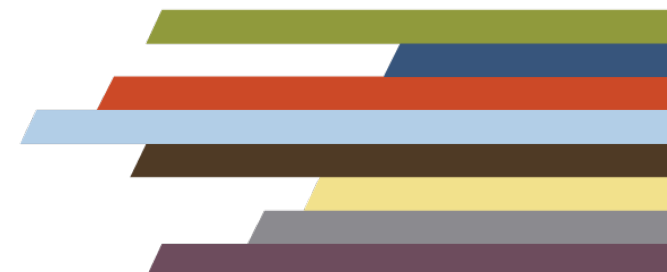
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At the end of today's training please take a moment to complete a **brief** survey about today's training.



# Don't forget about our Regional Breakout Sessions!

The post-session Regional Breakout sessions are intended to provide an opportunity for you, our participants, to ask questions about the content we'll cover today, and time to discuss and apply today's learning in an informal moderated discussion with our staff, contextualized for your specific region.







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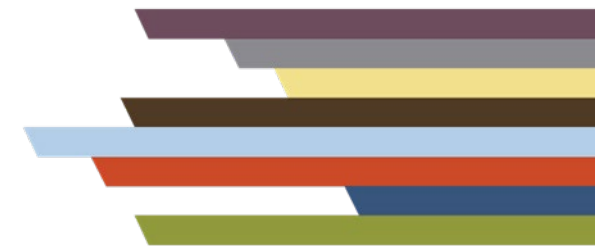
## MHTTC School Mental Health Curriculum *Always and Now* 8-Part Learning Series

FEBRUARY-MAY 2021

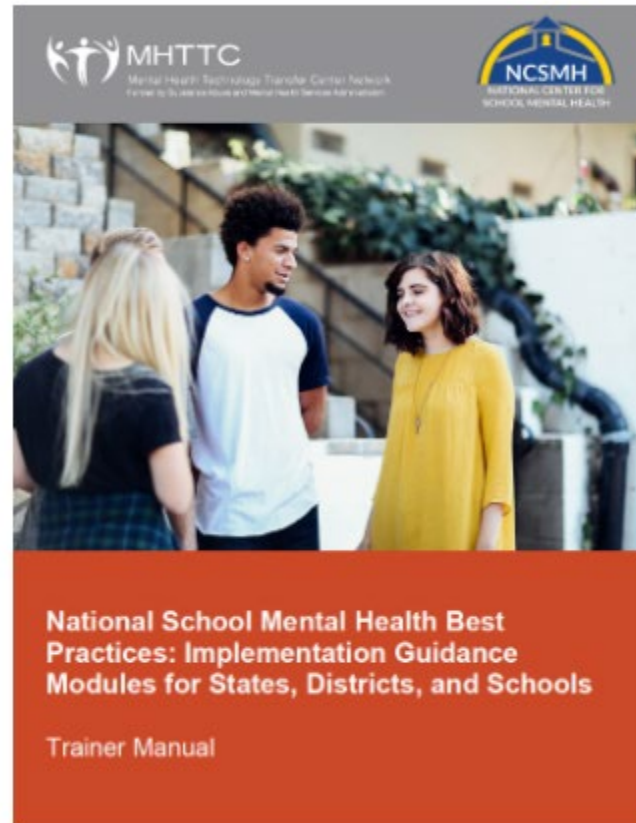
Presented by the MHTTC Network  
and National Center for School Mental Health

*Session 5 Mental Health Promotion for ALL – Tier 1*

April 13, 2021



# National School Mental Health Best Practices: Always & Now



Available on the MHTTC Website:  
<http://bit.ly/implementation-guidance-modules>

# Curriculum Overview

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Mod 1

- Foundations of Comprehensive School Mental Health

Mod 2

- Teaming

Mod 3

- Needs Assessment & Resource Mapping

Mod 4

- Screening

Mod 5

- Mental Health Promotion for All (Tier 1)

Mod 6

- Early Intervention and Treatment (Tiers 2/3)

Mod 7

- Funding and Sustainability

Mod 8

- Impact

# Panelist from the National Center for School Mental Health



**Kristin Scardamalia, Ph.D.** is an Assistant Professor at the University of Maryland School of Medicine National Center for School Mental Health. She has extensive experience working with high needs youth and their families as a school psychologist in both the public schools and juvenile services. Her research focuses on the intersection of the education, juvenile justice, and mental health systems such as investigating district-wide strategies to reduce exclusionary discipline practices. In addition, she provides training and technical assistance to states and school districts on developing and improving comprehensive school mental health programming. She leads the NCSMH's training and technical assistance efforts related to staff well-being and cultural responsiveness and equity.





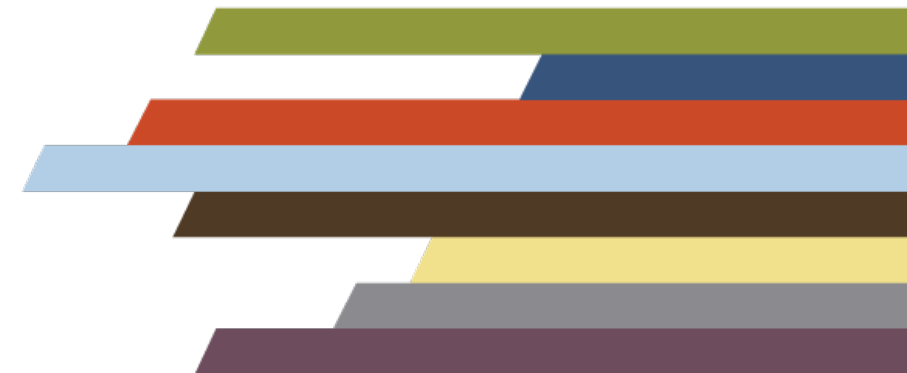
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# **Module 5: Mental Health Promotion for All (Tier 1)**

National School Mental Health Best Practices:  
Implementation Guidance Modules  
for States, Districts, and Schools





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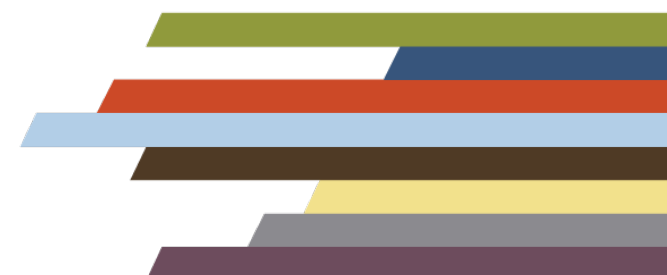
National Center for School Mental Health and MHTTC Network Coordinating Office. (2019). *Trainer manual, National School Mental Health Best Practices: Implementation Guidance Modules for States, Districts, and Schools*. Palo Alto, CA: MHTTC Network Coordinating Office.





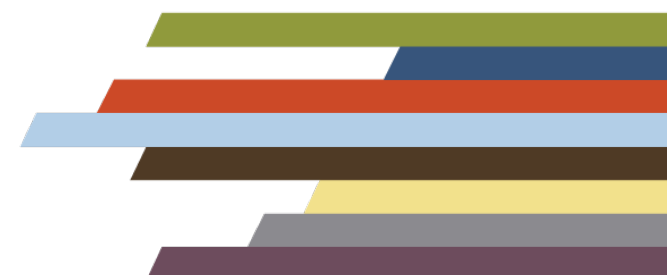
# Agenda

- Definition
- Value
- Quality Indicators and Best Practices
- Strategic Planning



# What Is Mental Health Promotion?

Activities to foster positive social, emotional, and behavioral skills and well-being of all students regardless of whether or not they are at risk for mental health problems



# The Value of Mental Health Promotion in Schools

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- Promotes well-being and educational success for *all* students
- Serves as foundation for Tiers 2 and 3 mental health services and supports
- Produces cost savings by investing in mental health promotion and early intervention (versus treatment)
- Decreases stigma about mental health and illness
- Promotes school staff well-being
- Mental health is part of overall health, and students must be healthy enough to learn, and teachers healthy enough to teach

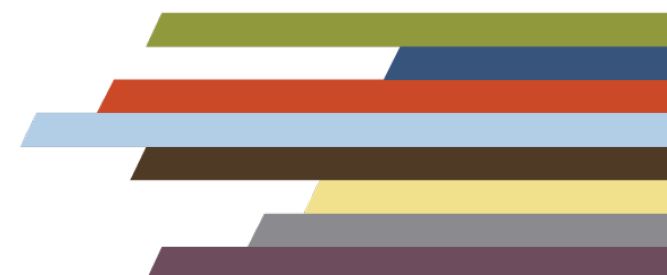


- Tier 1 Services and Supports:
  - School Climate
  - Teacher and School Staff Well-being
  - Positive Behaviors and Relationships
  - Positive Discipline Practices
  - Mental Health Literacy
  - Social Emotional Learning
- Determine whether services and supports are evidence-informed.
- Ensure *all* services and supports are evidence-informed.
- Ensure fit with strengths, needs, and cultural and linguistic considerations.
- Ensure adequate resources for implementation.
- Provide interactive training and ongoing supports.
- Monitor fidelity.

# Tier 1 Services and Supports

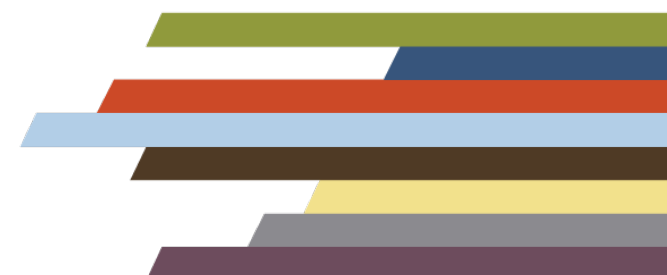
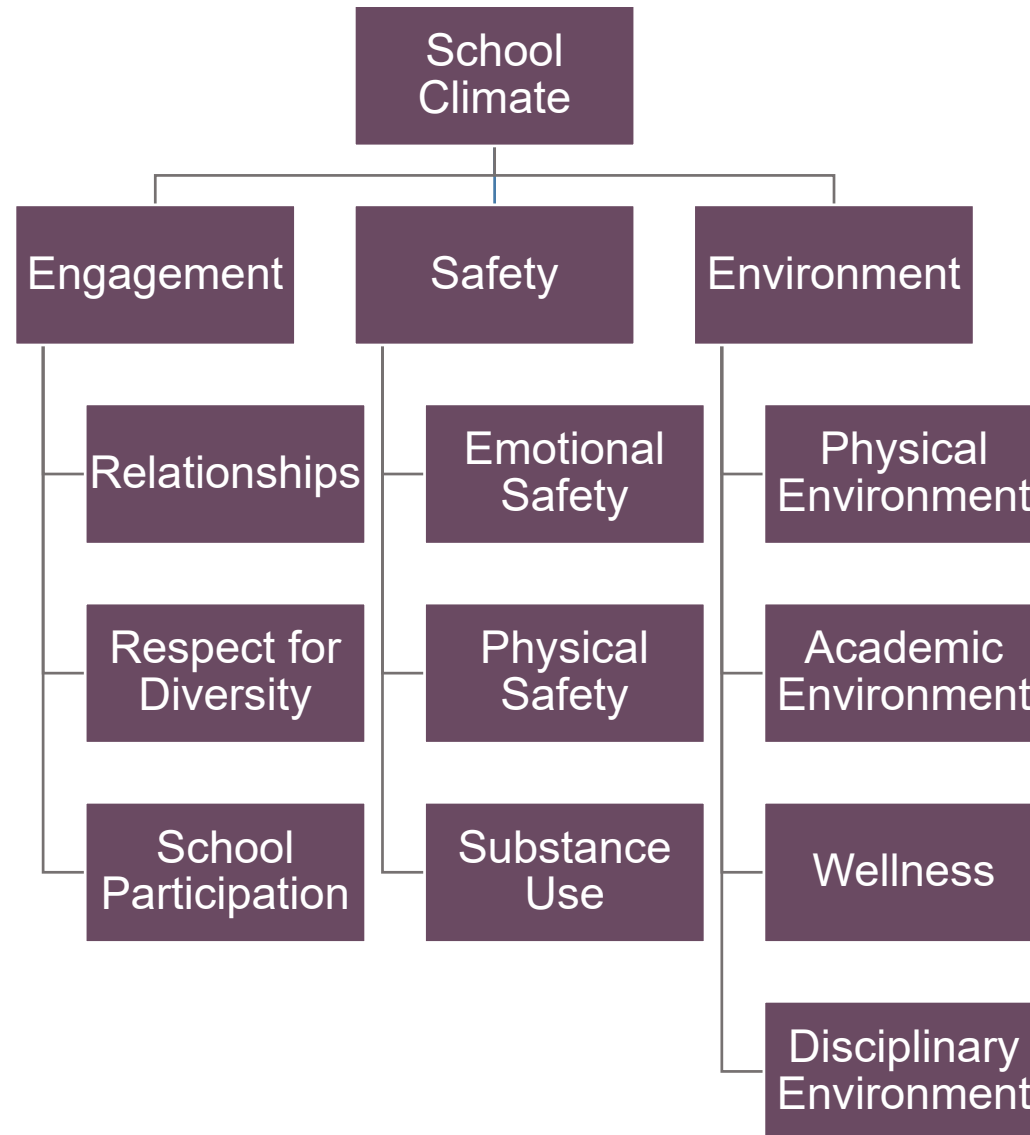
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- School Climate
- Teacher and School Staff Well-being
- Positive Behaviors and Relationships
- Positive Discipline Practices
- Mental Health Literacy
- Social Emotional Learning



# What Is School Climate?

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To what extent did your district/school use best practices to **assess school climate**?

## Best Practices

- Plan how data will be collected, stored, analyzed, and shared.
- Assess multiple dimensions of school climate.
- Obtain input from a variety of groups.
- Assess school climate in multiple ways.
- Allow anonymous input.
- Align with the school/district vision.
- Select evidence-based assessment tools.



# School Climate Assessment Tool

- School Climate Measurement Tool and Web-based Platform
  - U.S. Department of Education School Climate Surveys (EDSCLS)
  - Web-based administration
  - Student, parent, and instructional and non-instructional staff versions
  - Free, custom reports
  - Data stored locally

The screenshot shows the website for the National Center on Safe Supportive Learning Environments. The header includes a navigation bar with a search function and social media links. Below the header, the main content area features a large banner for "ED School Climate Surveys (EDSCLS)" with an illustration of a pencil and a checklist. To the right of the banner is a "School Climate IMPROVEMENT Resource Package" section. Below the banner, there is a paragraph explaining the importance of measuring school climate and a section titled "The U.S. Department of Education (ED) is dedicated to helping keep students safe and improving their learning environments." A sidebar on the right lists various resources under the heading "ED SCHOOL CLIMATE SURVEYS", including Home Page, Measures, Administration, Data Reports, Data Interpretation, Benchmark Performance Levels, and Frequently Asked Questions.

<https://safesupportivelearning.ed.gov/edscls/>



# District Example

A large, urban school district implemented a district-wide **school climate survey**, collected annually in the spring from teachers, students, and parents. A summary of results was provided to principals within 2 months. To interpret the information and generate data-informed school climate improvement plans, the district hosted **listening sessions** over the summer at each school. Students, teachers, and parents provided feedback and suggested school climate improvements for the upcoming school year. An **informational flyer** was posted in schools, sent home to parents, and placed in staff mailboxes to thank respondents for participating, share survey findings, and announce the listening session date/time.

## Reflection:

How is the school climate assessment going in your district?

Has your district engaged in **school climate assessment**?

If yes:

- What has worked well?
- What are areas for improvement?

If no:

- What are the barriers?
- What ideas do you have to move school climate assessment forward?

To what extent did your district/school use best practices to **improve the school climate?**

## Best Practices

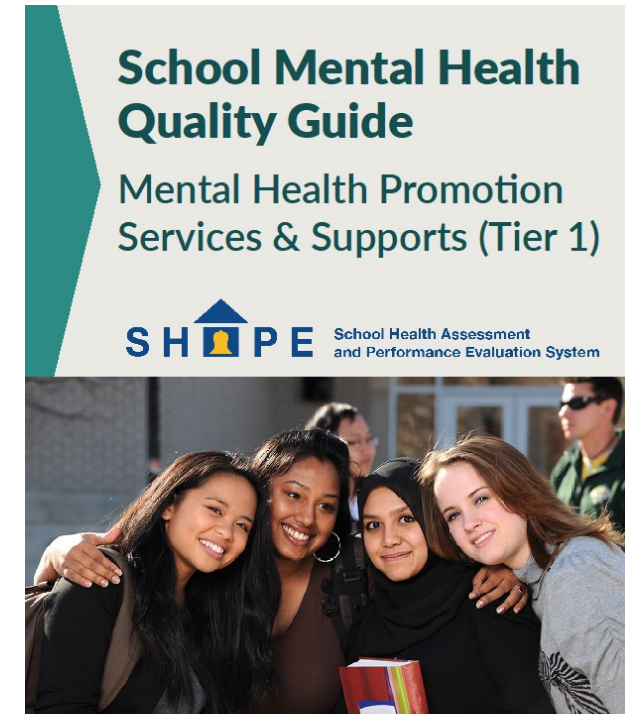
- Designate or form a core school climate planning team.
- Align with other school improvement efforts.
- Ensure data are used to select priority areas.
- Assess the impact of school climate improvement activities.
- Embed school climate improvement into policy, practice, and systems in the school.

# School Mental Health Quality Guide: Mental Health Promotion Services and Supports (Tier 1)

Provides guidance to advance school mental health quality and sustainability

Includes:

- Background
- Best practices
- Action steps
- Examples from the field
- Resources



# School Climate Improvement Resources

- National Center on Safe Supportive Learning Environments (NCSSLE)  
<https://safesupportivelearning.ed.gov/safe-and-healthy-students/school-climate>
- School Climate Improvement Resource Package
  - Quick Guide
  - Reference Manual
  - Action Guides
  - Data Interpretation Resources
  - Online Modules
  - Self-Assessments



Menu

- ▶ 1. Module 6 Introduction
- ▼ 2. Introduction to School Climate
  - 2.1. What is School Climate?
  - 2.2. What We Know to Be True
  - 2.3. How Do Schools Build a P...
  - 2.4. Goals for Strengthening S...
  - 2.5. Reflection 1
  - 2.6. Reflection 2
  - 2.7. Measuring School Climate
  - 2.8. Surveys Specific to Schoo...
  - 2.9. Surveys and School Clima...
  - 2.10. Data from the ED School ...
  - 2.11. School-Based Administr...
  - 2.12. What Other Data Can Tell...
  - 2.13. What Can School Climat...
  - 2.14. Reflection 3
  - 2.15. What is Your School Doi...
  - 2.16. Reflection 4
- ▶ 3. Selecting Evidence-Based Pro...
- ▶ 4. Steps 4-6: Selecting a New EBP

## SELECTING EVIDENCE-BASED INTERVENTIONS

### What Is Your School Doing to Promote a Positive School Climate?

Schools often implement one or more approaches that are universal for all, targeted for some and/or intensive for few. Here are some of the most commonly implemented interventions that support a positive school climate. Select each to learn more.

- Character Education
- Positive Behavioral Interventions and Support (PBIS)
- Positive Youth Development (PYD)
- Restorative Practices
- School-Based Mental Health Services
- School Development Program (SDP)
- Social and Emotional Learning (SEL)
- Trauma-Informed Approach

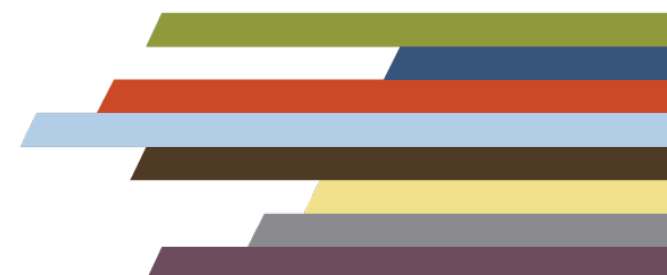
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# School Climate Interventions

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- Character Education
- Positive Behavioral Interventions and Supports
- Positive Youth Development
- Restorative Practices
- School Mental Health Services
- School Development Program
- Social and Emotional Learning
- Trauma-Informed Approach



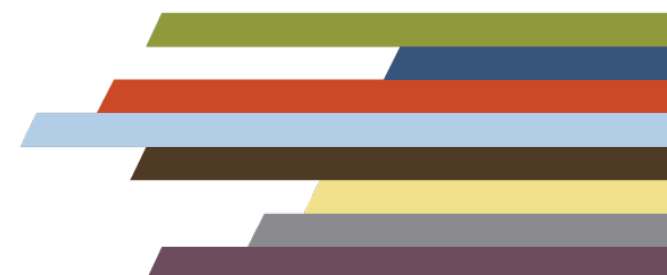


# Why Focus on School Staff Well-Being?

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- Teachers are stressed.
- Teachers are leaving the profession in alarming numbers.
  - 10% leave after 1 year.
    - In urban districts, up to 70% leave within 1 year.
  - 17% leave within 5 years.
- Teacher stress impacts students.



To what extent did your district/school use best practices to **assess teacher and staff well-being?**

## Best Practices

- Establish a process for handling data.
- Conduct well-being assessments.
- Assess staff well-being regularly.
- Ensure privacy and anonymity.
- Assess a range of well-being components.
- Select evidence-based assessment tools.

# Staff Well-Being Assessment Tools

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- Resilience at Work (Winwood, Colon, & McEwen, 2013)
- Professional Quality of Life (PROQOL) <https://proqol.org/> (Hudnall Stamm, 2009)
- Health-Related Quality of Life (HRQOL) <https://www.cdc.gov/hrqol/index.htm>
- School Organizational Health Questionnaire (Hart et al., 2000)
- Teacher Subjective Wellbeing Questionnaire <https://osf.io/z8rg5/> (Renshaw et al., 2015)

To what extent did your district/school use best practices to **improve teacher and staff well-being?**

## Best Practices

- Align improvement efforts with needs identified by well-being assessment.
- Address organizational and individual factors.
- Make well-being activities readily available.
- Integrate well-being activities into the school culture.
- Make well-being activities available at no-cost or low-cost.

# Example School Staff Well-Being Programs

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- Mindfulness-Based Stress Reduction (MBSR)
- Community Approach to Learning Mindfully (CALM)
- Cultivating Awareness and Resilience in Education (CARE)

To what extent did your district/school use best practices to **set schoolwide expectations about positive behaviors?**

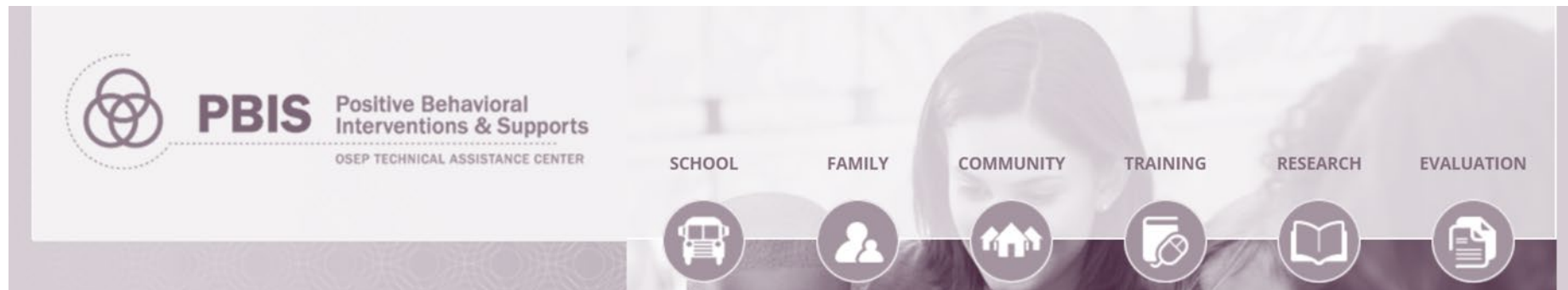
## Best Practices

- Settings
- Routines
- Expectations
- Train staff to teach students expectations and how rewards are developed, scheduled, and delivered.
- Involve families and community members.

# Positive Behavioral Interventions & Supports (PBIS)

Resources to help schools, districts, and states:

- Set school-wide expectations.
- Define rules, positive supports, and discipline procedures.
- Track office referrals and other data.



See sample behavioral expectation documents at:

<https://www.pbis.org/topics/mental-healthsocial-emotional-well-being>

To what extent did your district/school use best practices to **implement schoolwide positive reinforcement systems that promote positive behaviors?**

## Best Practices

- Rewards
- Supervision
- Opportunity
- Acknowledgment
- Prompts and pre-corrections
- Error corrections
- Other strategies
- Discipline



# Positive Behavioral Interventions & Supports (PBIS)

## What's New & Upcoming Events

List of new postings and current information about PBIS events.

[Find new postings and events >](#)

## Blueprints / Briefs / Tools

Documents and tools to support implementation, professional development, and evaluation of PBIS.

[Find guidance for implementation >](#)

## Snapshots of PBIS in Action

Current news and other information about ongoing PBIS implementation.

[Read about PBIS in actions >](#)

## Behavior Related Policy

Information for PBIS related policies. Government announcements and documents are listed.

[Find policy information for PBIS >](#)

## State / District Resources

Current information about state and district implementation of PBIS.

[Find more information >](#)

## Presentations

Slides, handouts, and other materials from local, state, and national conferences and training events.

[Find a presentation >](#)

## School Climate Transformation

Current information about PBIS for School Climate Transformation Grant awardees.

[Find more information >](#)

## Videos for Training

Videos from conference presentations, celebrations, and other training/dissemination events.

[Find a video >](#)

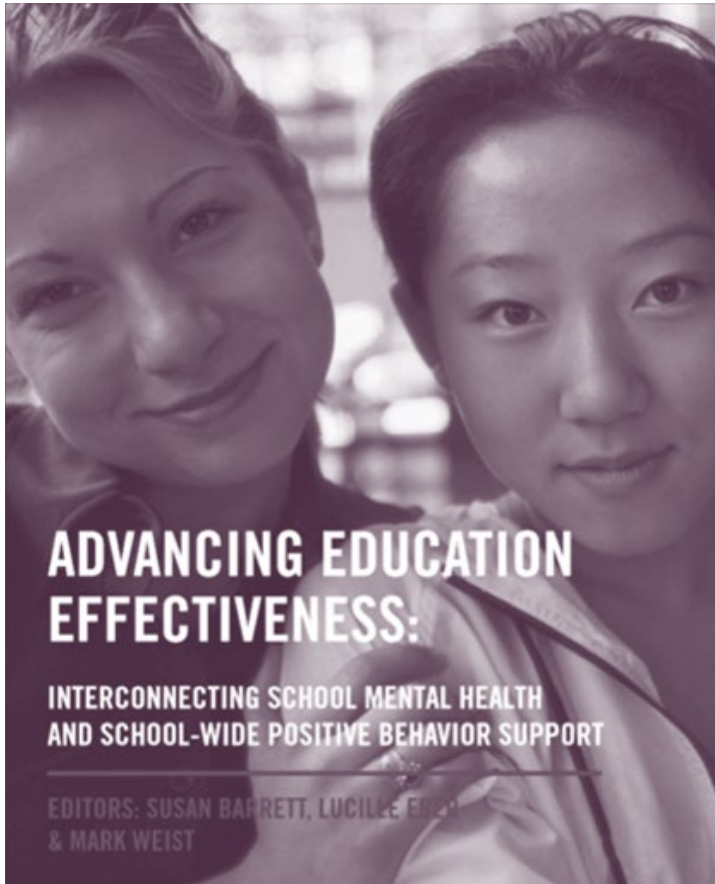
## Getting PBIS in my School

Contact information for assistance implementing PBIS in your state, district, or school.

[Find a state coordinator >](#)

<https://www.pbis.org/>

# Interconnected Systems Framework (ISF)



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

<https://www.pbis.org/topics/mental-healthsocial-emotional-well-being>

# Interconnected Systems Framework (ISF)

## 4-Part Series:

1. The "Why" and the "What" of ISF
2. The "How" of ISF
3. Integrating School Mental Health and PBIS (1)
4. Integrating School Mental Health and PBIS (2)



<https://cars-ta.groupsite.com/page/project-aware>

To what extent did your district/school use best practices to promote or use classroom and school-based strategies to **proactively build healthy relationships and a sense of community to prevent and address conflict and wrongdoing?**

## Best Practices

- Use processes to proactively build relationships and a sense of community.
- Use circles and groups for students to share their feelings, build relationships, and solve problems.
- Use a discipline process involving primary stakeholders to repair harm.

# Restorative Practices

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## Strategies

- Community conferencing
- Community service
- Peer juries
- Circle process
- Conflict resolution
- Peer mediation
- Informal practices

## Outcomes

### Increases in:

- School climate
- Student connectedness
- Parent and community engagement
- Academic achievement

### Decreases in:

- Discipline disparities
- Fighting
- Bullying
- Suspensions

<https://www.iirp.edu/>

To what extent did your district/school use best practices to **promote or use discipline policies and practices aimed at reducing exclusionary responses?**

## Best Practices

- Establish consistent expectations, rules, and positive reinforcement systems.
- Train and support school staff.
- Develop a multitiered system of support.
- Use graduated sanctions that limit out-of-school suspensions.
- Examine suspensions/expulsions by demographic group.
- Use restorative justice practices.



# Restorative Practice: Approaches at the Intersection of School Discipline and School Mental Health

- Review of restorative practice approaches and specific practices
- Benefits of restorative practices
  - Snapshots from the field
- Guidance for launching and implementing restorative practices

Issue

BRIEF



**NITT-TA**  
NOW IS THE TIME  
TECHNICAL ASSISTANCE CENTER

**Restorative Practices: Approaches at the Intersection of School Discipline and School Mental Health**

By Leora Wolf-Prusan, EdD, Meagan O'Malley, PhD, and Nancy Hurley, WestEd

Federal initiatives like Project AWARE offer State and Local Education Agencies the unique opportunity to reconsider and revise their schools' approaches to supporting the social, emotional, behavioral, and mental health needs of their students. Restorative practices, a diverse and multi-tiered set of classroom and school-based strategies that emphasize the importance of the relational needs of the community in fostering student accountability for behavior, have piqued the interest of educators and school-based mental health providers alike. Interest across child-serving personnel has been stoked by emerging evidence that restorative practices reduce exclusionary discipline practices while also improving students' social and emotional wellbeing and school connectedness. This Now Is The Time Issue Brief describes the context surrounding this growing popularity of restorative practices, provides an introduction to different types of restorative practices, and provides a universal start-up guide for implementing restorative practices in schools.

Serving the Social, Emotional, and Mental Health Needs of Young People in Schools: Current Challenges

**Social, Emotional, and Mental Health Needs of School-Aged Young People.** All young people need support to build skills for understanding complex internal emotional experiences and for regulating emotions effectively to navigate their social worlds. Among the most in need of social and emotional supports are young people coping with traumatic life experiences and those living with mental illness. Approximately one in six school-aged children experiences impairments in their life functioning due to a diagnosable mental health disorder and an estimated 70% of children have experienced some type of trauma (Copeland, Keeler, Angold, & Costello, 2007; Perou, et al., 2013). Coping with the



impact of trauma and mental illness places cognitive and emotional demands on young people that can reduce access to education by increasing school absences and by interfering with the cognitive and behavioral processes (e.g., controlling attention, short term memory, persisting on challenging tasks) required for classroom learning (Bücker et al., 2012; Purvis, Milton, Harlow, Paris, & Cross, 2014).

Less than half of young people who suffer from mental illness receive treatment (Kessler, Amminger, Aguilar-Gaxiola, Alonso, Lee, & Ustun, 2007) and, as a consequence, they experience greater impairments in life functioning over time as they struggle to meet social, emotional, and behavioral demands in their family, school, and neighborhood environments (McGorry, Purcell, Goldstone, & Amminger, 2011). What is more, young people with mental illnesses are more likely to become involved with the juvenile justice system; 60% of young people in juvenile detention have a diagnosable mental illness (Teplin, Abram, McClelland, Dulcan, & Mericle, 2002). Because they

Now is the Time Technical Assistance Center - Issue Brief

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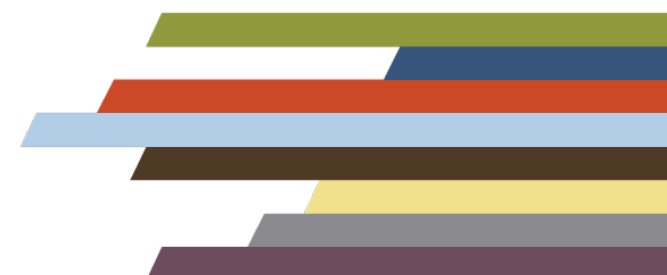
# What Is Mental Health Literacy?

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- Knowledge and beliefs about mental disorders, which aid in their recognition, management, or prevention
- 4 integrated components
  - Obtaining and maintaining positive mental health
  - Understanding mental disorders and their treatments
  - Decreasing stigma related to mental disorders
  - Enhancing help-seeking efficacy
    - Know where to go; know when to go; know what to expect when you get there; know how to increase likelihood of “best available care” (skills and tools)



(Jorm, 2000; Kutcher et al., 2016)



To what extent did your district/school use best practices to **increase mental health literacy for all students and staff?**

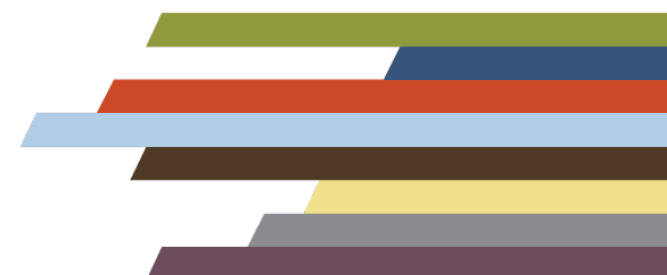
## Best Practices

- Develop a clear plan for assessing current mental health literacy.
- Collaborate with key stakeholders to meaningfully and feasibly promote mental health literacy.
- Deliver and evaluate professional learning opportunities.
- Develop activities with key stakeholders.
- Deliver activities throughout the year.
- Reassess on a routine basis.



## Strategies to Increase Mental Health Literacy

- Invite your local NAMI to give a presentation to students and teachers.
- Participate in a mental health awareness campaign.
- Use teacher-delivered mental health curriculums.
- Collaborate with organizations to get Youth Mental Health First Aid.



# Mental Health Literacy Resources

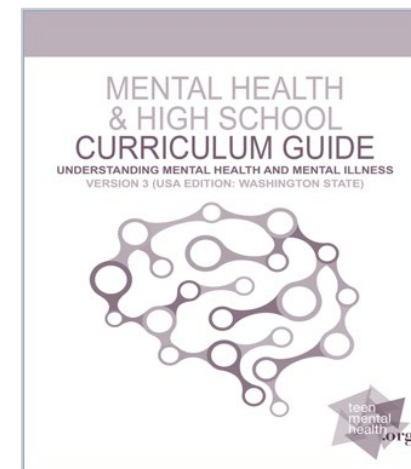
## Mental Health and High School Curriculum Guide

Teachers deliver content in classrooms.

- Obtaining and maintaining positive mental health
- Understanding mental disorders and their treatments
- Decreasing stigma related to mental disorders
- Enhancing help-seeking efficacy

## Youth Mental Health First Aid

Training in how to identify, understand, and respond to signs of mental illnesses and substance use disorders.

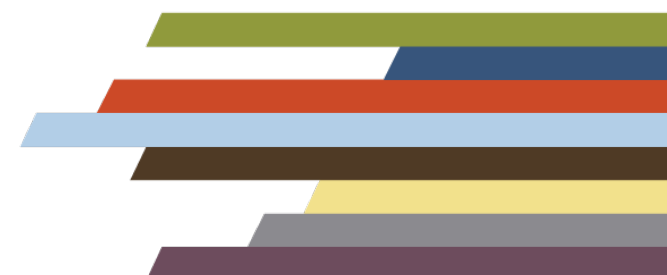


# What Is Social and Emotional Learning (SEL)?

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“The process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.” ([www.casel.org](http://www.casel.org))



To what extent did your district/school use best practices to **support SEL skill development for all students?**

## Best Practices

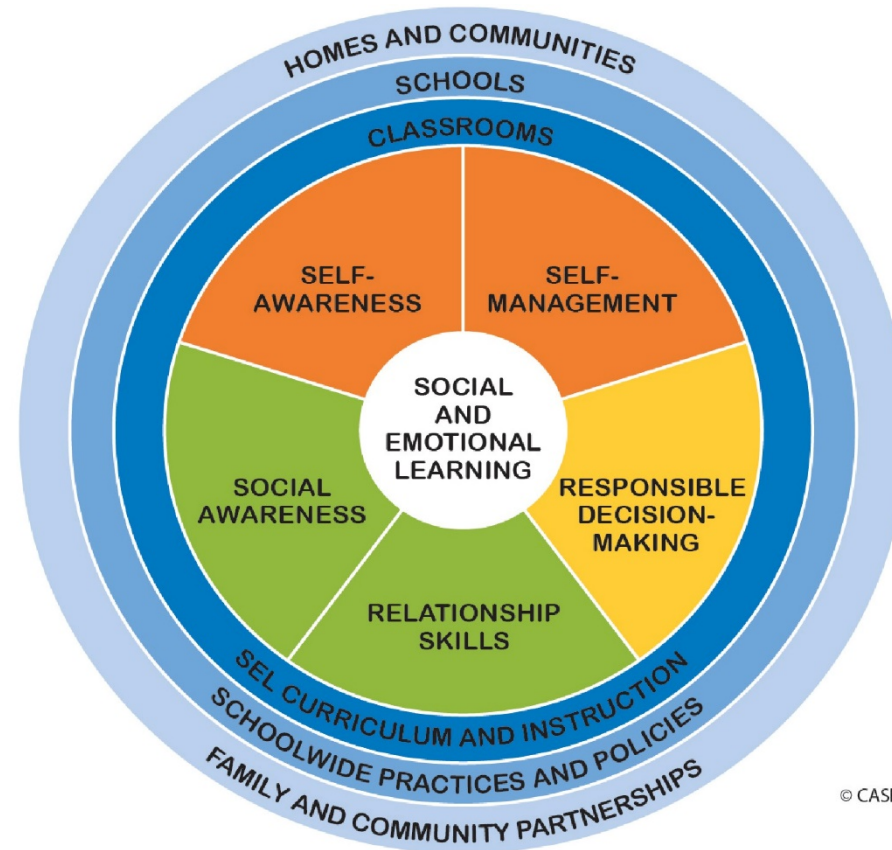
- Develop a plan for assessing SEL skills.
- Identify existing activities/programs that support SEL.
- Select or adapt SEL practices for your students.
- Monitor implementation of practices.
- Develop practices with students, parents, and community members.
- Reassess on a routine basis.



# Core SEL Competencies

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- Self-awareness
- Self-management
- Social awareness
- Relationship skills
- Responsible decision-making



## Increases in:

- Academic achievement
- Prosocial behavior
- Social emotional skills
- Positive self-image

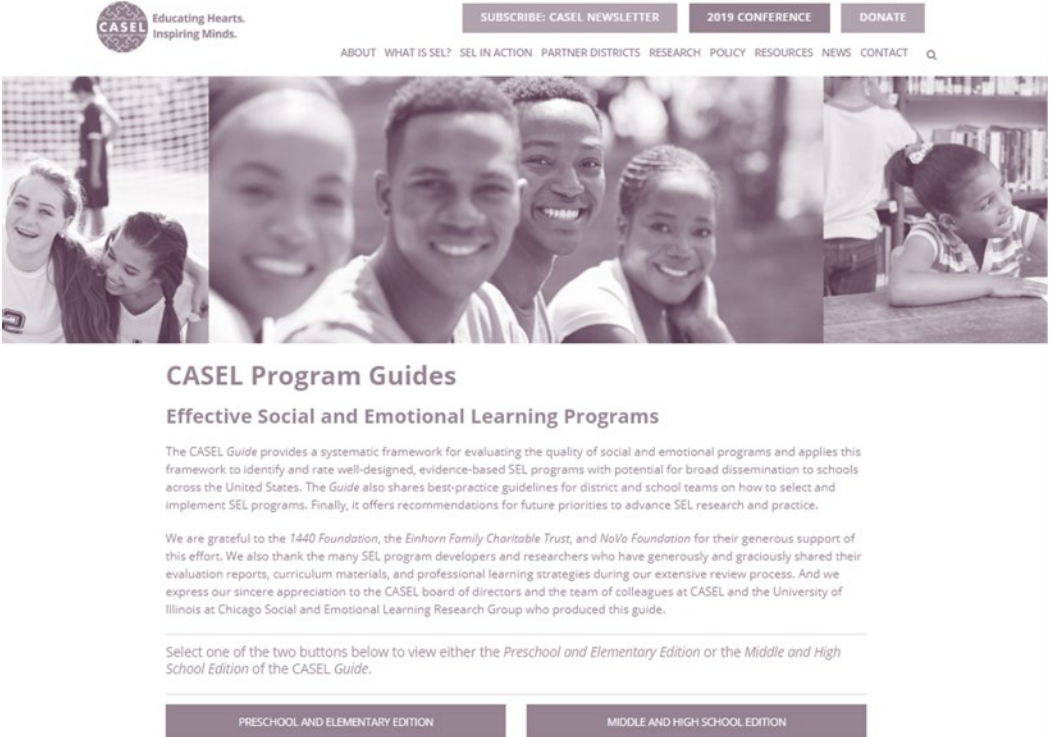
## Decreases in:

- Conduct problems
- Emotional distress
- Substance use



# CASEL Program Guides

- Provides guidance for educators about how to select and implement SEL programs
- CASEL SElect programs are based on a rigorous, evidence-based review process
- Use this and the CASEL District Resource Center (<https://drc.casel.org>) to self-assess your readiness and capacity for SEL, plan your SEL implementation



**CASEL Program Guides**  
Effective Social and Emotional Learning Programs

The CASEL *Guide* provides a systematic framework for evaluating the quality of social and emotional programs and applies this framework to identify and rate well-designed, evidence-based SEL programs with potential for broad dissemination to schools across the United States. The *Guide* also shares best-practice guidelines for district and school teams on how to select and implement SEL programs. Finally, it offers recommendations for future priorities to advance SEL research and practice.

We are grateful to the 1440 Foundation, the Einhorn Family Charitable Trust, and NoVo Foundation for their generous support of this effort. We also thank the many SEL program developers and researchers who have generously and graciously shared their evaluation reports, curriculum materials, and professional learning strategies during our extensive review process. And we express our sincere appreciation to the CASEL board of directors and the team of colleagues at CASEL and the University of Illinois at Chicago Social and Emotional Learning Research Group who produced this guide.

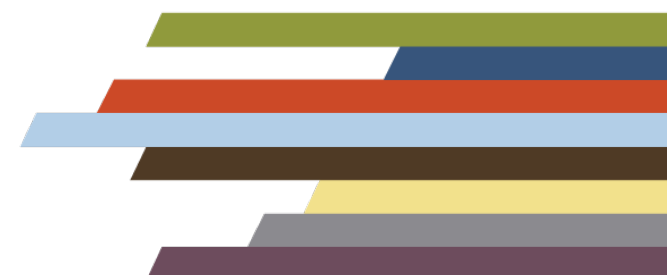
Select one of the two buttons below to view either the *Preschool and Elementary Edition* or the *Middle and High School Edition* of the CASEL *Guide*.

PRESCHOOL AND ELEMENTARY EDITION      MIDDLE AND HIGH SCHOOL EDITION

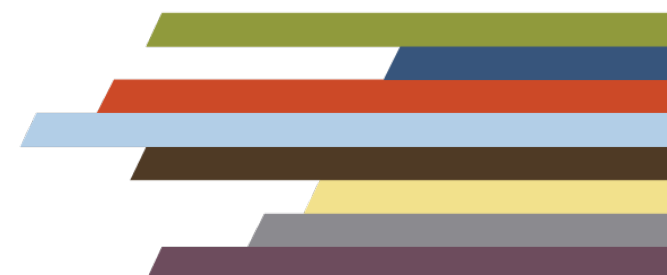


# District Example

Austin Independent School District implemented SEL in all 129 schools. Each campus has a assigned SEL specialist who provides professional development, observes SEL lessons, and provides feedback on instruction and integration of SEL skills and concepts in the classroom. Administrators and teams work with these specialists to develop SEL goals and action plans. This process started with a steering committee that worked for 12 months to clarify the SEL vision and develop 5 priorities related to district-wide SEL integration. Visit <https://www.austinisd.org/sel> to learn more.



# Mental Health Promotion Implementation and Fidelity Indicators



To what extent were  
mental health  
promotion (Tier 1)  
services and  
supports **evidence-  
informed?**

- Evidence-informed  
Based on research evidence, as recognized in national registries, and/or supported by practice-based evidence of success in local or similar schools

To what extent did your district/school use best practices to **determine whether mental health promotion (Tier 1) services and supports are evidence-informed?**

## Best Practices

- Create an intervention selection committee.
- Develop a selection process and policy.
- Use national evidence-based practice registries.
- Consider fit with valued outcomes, settings, and populations.
- Review evidence of success.

# Sources of Evidence

- Research literature
- Intervention developers
- Schools implementing the intervention or practice
- Evidence-based practice (EBP) registries

IES What Works Clearinghouse  
<https://ies.ed.gov/ncee/wwc/>

Blueprints for Healthy Youth Development  
<https://www.blueprintsprograms.org/about>

Model Programs Guide  
<https://www.ojjdp.gov/mpg>

Society of Clinical Child & Adolescent Psychology  
<https://effectivechildtherapy.org/therapies/>

The screenshot shows the homepage of the National Center for Healthy Safe Children. The header includes the organization's name and a search bar. A navigation menu contains links for Grantee Programs, Resources, Learning Portal, Grantee/Field Spotlights, Trending Topics, About Us, and Safe Schools FIT Toolkit. The main content area features a section titled "Evidence-Based Module Series" with a descriptive paragraph and three module cards: "Selecting Evidence-Based Programs for School Settings", "Preparing to Implement Evidence-Based Programs in School Settings", and "Implementing Evidence-Based Programs in School Settings". At the bottom, there is a newsletter subscription form and a footer with the AIR logo and contact information.

<https://healthysafechildren.org/learning-module-series/evidence-based-module-series>

To what extent did your district/school use best practices to ensure Tier 1 services and supports **fit the unique strengths, needs, and cultural/linguistic considerations of your students and families?**

## Best Practices

- Create an EBP selection committee with diverse representation.
- Review your school's student body.
- Review your school's mental health needs and strengths.
- Review costs associated with implementation.
- Evaluate training requirements.
- Pilot test the new practice.
- Adapt the practice.



# Selecting Evidence-Based Programs

Includes worksheets and tools to assess:

- Intended population of intervention
- Intervention target
- Tier of support (based on severity level)
- Intervention delivery
- Readiness to implement an EBP
- Menu of options to measure impact

Worksheet 1a

### 1a. Intended Population

Instructions: Within each category, circle all of the options that characterize your intended intervention population.

| Developmental Level: Age | Developmental Level: Grade | Gender       | Race/Ethnicity                      | Population Subgroups  |
|--------------------------|----------------------------|--------------|-------------------------------------|---|
| 0-3                      | Daycare                    | Female       | African American or Black           | Students with disabilities  |
| 3-4                      | Preschool                  | Male         | American Indian/Alaska Native       | English language learners   |
| 4-5                      | Pre-K/K                    | Transgender  | Asian                               | Students with risk factors (e.g., exposure to violence, poverty, in utero substances) |
| 6-8                      | 1-2                        | Other: _____ | Caucasian or White                  | Other: _____  |
| 8-12                     | 3-5                        |              | Hispanic or Latino                  |   |
| 12-15                    | 6-8                        |              | Native Hawaiian or Pacific Islander |   |
| 15-18                    | 9-12                       |              |                                     |   |
| 18+                      | Post High School           |              |                                     |   |
| Other: _____             | Other: _____               |              |                                     |   |

Language

• Primary: \_\_\_\_\_  
• Secondary: \_\_\_\_\_

Selecting Evidence-Based Programs Page

Worksheet 1b

### 1b. Intervention Target

Instructions: Circle all of the options that reflect what you want the intervention to address or target.

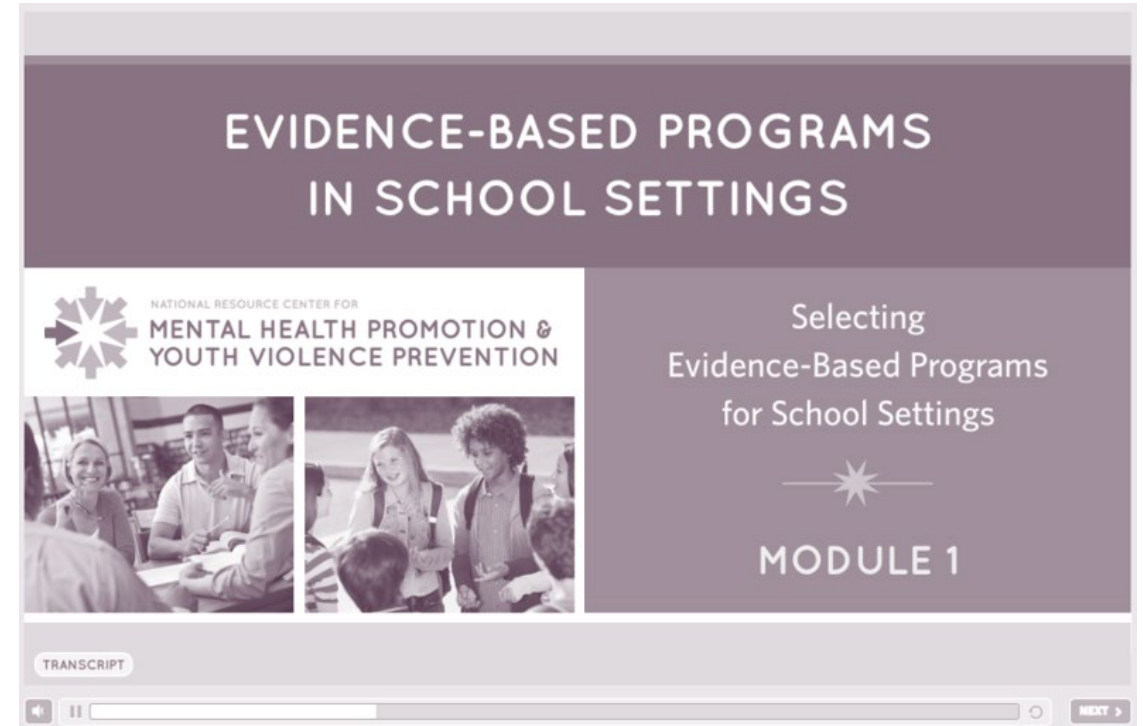
| Behavioral, Emotional, and Physical Health | Academic and Related Skills | Student-Family-School Connections                |
|--|-----------------------------|--|
| Aggression                                 | Career Exploration/Training | School Safety                                    |
| Alcohol and Other Drug Use                 | Early Childhood Education   | Support for Academic, Social, and Civic Learning |
| Anxiety/Depression/Trauma Exposure         | Language                    | Social Relationships                             |
| Autism                                     | Math                        | School Connectedness                             |
| Emotion Regulation                         | Motor Skills                | Physical Environment                             |
| Fitness & Nutrition                        | Reading                     | Leadership                                       |
| Inattention/Hyperactivity                  | Study Skills                | Professional Relationships                       |
| Social Skills                              | Time Management             | Other: _____                                     |
| Other: _____                               | Other: _____                |  |

Selecting Evidence-Based Programs Page 22

# Evidence-Based Programs in School Settings

3-part webinar series on evidence-based programs in schools

1. Selecting
2. Implementing
3. Preparing



[http://airhsdlearning.airws.org/EBPModule1/story\\_html5.html](http://airhsdlearning.airws.org/EBPModule1/story_html5.html)

To what extent did your district/school use best practices to **ensure adequate resource capacity to implement** mental health promotion (Tier 1) services and supports?

## Best Practices

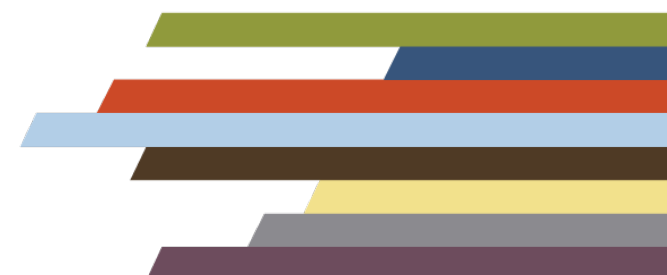
- Evaluate staffing capacity.
- Evaluate implementation supports.
- Evaluate associated costs.
- Determine whether staffing, supports, and costs are achievable.

# Intervention Planning Form

## INTERVENTION PLANNING FORM


School or district mental health teams are encouraged to complete this form when planning to adopt an intervention. The primary goal of this form is to help teams predict appropriate intervention staffing and time burden.

| Intervention Name                          | Tier |   |   | Planning/Preparation<br><i>before or during implementation</i> |                         |  | Supervision<br><i>providing or receiving</i> |          |                | Delivery               |          |                | Evaluation and Feedback<br><i>schoolwide and student-specific</i> |                 |                             |
|--|------|---|---|--|-------------------------|--|--|----------|----------------|------------------------|----------|----------------|---|-----------------|-----------------------------|
|  | 1    | 2 | 3 | Who  | Hours/Wk                | Duration                               | Who  | Hours/Wk | Duration       | Who                    | Hours/Wk | Duration       | Who   | Hours/Wk        | Duration                    |
| <i>Example:<br/>Check In<br/>Check Out</i> |      | x | x | <i>T.Cooper<br/>S.Barrey<br/>Teachers</i>                      | <i>1-2<br/>1<br/>.5</i> | <i>Aug-May<br/>Aug-Dec<br/>Aug-Oct</i> | <i>S. Barrey</i>                             | <i>1</i> | <i>Aug-May</i> | <i>10<br/>teachers</i> | <i>1</i> | <i>Oct-May</i> | <i>T.Cooper<br/>L. Sands</i>                                      | <i>.5<br/>5</i> | <i>Aug-May<br/>Dec, May</i> |
|  |      |   |   |  |                         |  |  |          |                |                        |          |                |   |                 |                             |
|  |      |   |   |  |                         |  |  |          |                |                        |          |                |   |                 |                             |
|  |      |   |   |  |                         |  |  |          |                |                        |          |                |   |                 |                             |
|  |      |   |   |  |                         |  |  |          |                |                        |          |                |   |                 |                             |
|  |      |   |   |  |                         |  |  |          |                |                        |          |                |   |                 |                             |



# Implementing EBPs in School Settings Checklist

1. Develop a plan to track implementation of core components of the EBP.
2. Monitor adaptations to the EBP to check fidelity.
3. Ensure that quantitative and qualitative data are obtained to monitor fidelity.
4. Develop a plan to address low-fidelity adherence.



Part of the SS/HS Framework Implementation Toolkit

|         |              |                     |
|---------|--------------|---------------------|
| 1. Plan | 2. Implement | 3. Sustain & Expand |
|---------|--------------|---------------------|

Evidence-Based Module Series

Module #3 Implementing Evidence-Based Programs in School Settings

The following checklist can be used as a guide as you prepare to implement, evaluate, support, and sustain your evidence-based programs (EBPs).

- I. *Implement the EBP*

**Initial Implementation:**

  - \_\_\_\_\_ Develop a plan for initial implementation that will occur on a smaller scale than full implementation.
  - \_\_\_\_\_ Discuss and identify any challenges with implementation.
  - \_\_\_\_\_ Develop a plan to build momentum among staff during initial implementation.
  - \_\_\_\_\_ Assess systemic factors that may impact the implementation process.
  - \_\_\_\_\_ Develop strategies to address barriers and communicate with key stakeholders about your progress.

**Full Implementation:**

  - \_\_\_\_\_ Begin the process evaluation and fidelity assessment.
  - \_\_\_\_\_ Begin to collect data to evaluate outcomes of the EBP.
  - \_\_\_\_\_ Determine if adaptations to the EBP are needed to improve implementation.
  - \_\_\_\_\_ Determine if any additional support is needed (e.g. funding, training, etc.).
- II. *Monitor EBP Fidelity*
  - \_\_\_\_\_ Develop a plan to track implementation of the core components of the EBP.
  - \_\_\_\_\_ Monitor adaptations to the EBP to ensure that fidelity is not compromised.
  - \_\_\_\_\_ Ensure that quantitative and qualitative data are obtained to monitor fidelity.
  - \_\_\_\_\_ Develop a plan to address low-fidelity adherence.

SS/HS Framework Implementation Toolkit

<https://healthysafechildren.org/sites/default/files/EBP-ModulesChkItsMod-3-508.pdf>

To what extent did your district/school use best practices to **support training and professional development, including ongoing implementation supports**, for Tier 1 services and supports?

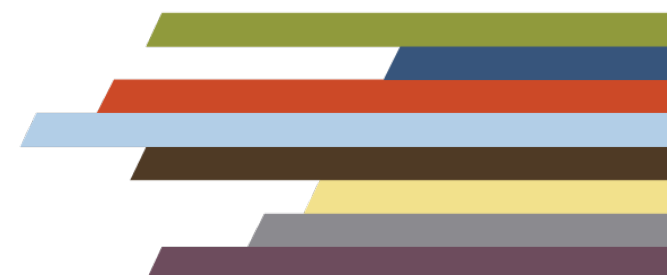
## Best Practices

- Provide interactive training.
  - Skills practice, role plays, and action planning
- Provide ongoing support for implementation.
  - Regular coaching, consultation, or supervision that includes skills practice, role plays, and corrective feedback
  - Fidelity monitoring and feedback processes



## What Does the Research Say About Training?

- One-time training may improve knowledge or attitudes, but not practice.
- Ongoing coaching and consultation predicts skill learning and application.
- Train-the-trainer models require substantial oversight.
- 80% success after 3 years of implementation with appropriate planning and ongoing support.





To what extent did your district/school use best practices to **monitor fidelity of mental health promotion (Tier 1) services and supports?**

## Best Practices

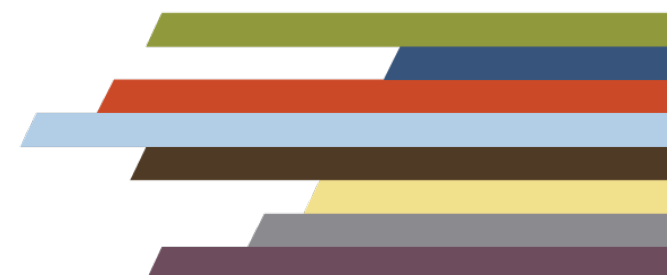
- Identify fidelity monitoring tools.
- Ensure your tool or system measures adherence to content, quality of delivery, and logistics.
- Determine frequency of fidelity measurement.
- Establish a benchmark.
- Monitor and track adaptations.
- Provide feedback to keep improving.

# What Is Fidelity Monitoring?

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Indicators of doing what is intended, which require you to:

- Know what is intended.
- Have some way of knowing the extent to which a person did what was intended.
- Understand why what you're doing or how you're doing it is leading to the outcomes you observe.



# Fidelity Monitoring Checklist

1. Identify fidelity monitoring tools.
2. Determine the frequency of fidelity measurement.
3. Establish a benchmark for acceptable levels of fidelity.
4. Monitor adaptations.

## Planning Checklist for Monitoring Fidelity of Evidence-Based Practices (EBPs)

### 1. Identify fidelity monitoring tools

- Use existing tool specific to the EBP you're implementing (if applicable, based on your search of SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP, <https://www.samhsa.gov/nrepp>), What Works Clearinghouse (<https://ies.ed.gov/ncee/wwc/>), or correspondence with intervention developer), or
- Develop a tool specific to the intervention and your service delivery context (based on fidelity monitoring tools for similar EBPs)
- Complement the tool you choose with any other methods it doesn't include (e.g., records review, direct observation, talking with implementers and/or consumers)

### 2. Determine frequency of fidelity measurement

- What frequency is feasible for the tool selected?
- What frequency will yield actionable and relevant information?
- What frequency will be sustainable if the EBP implementation continues in future years, with consideration of implementer, consumer, and/or evaluator turnover?
- What are the best/worst times of year to monitor fidelity?
- What stages of implementation are important to monitor fidelity (e.g., immediately following training and intervals thereafter)
- Determine strategies to *develop* the fidelity measurement plan with implementers (including all details above) and *communicate* the final plan to implementers once determined.

### 3. Establish benchmark for acceptable level of fidelity

- What levels of fidelity are not acceptable, adequate, and excellent?
- How can you build in ongoing coaching and feedback about fidelity benchmarks to improve fidelity over time?

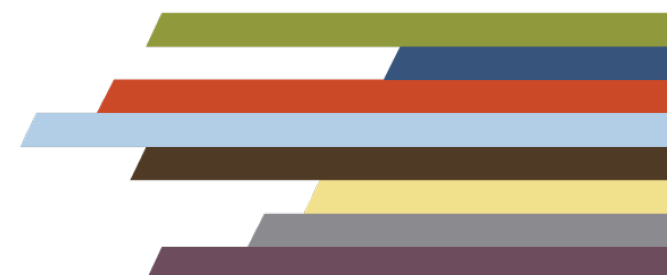
### 4. Monitor adaptations to the EBP

- Ask implementers about changes they made to the EBP as intended, and/or
- Collect observational data about adaptations made during implementation



## Fidelity Monitoring

- Plan ahead for fidelity monitoring methods and tools before implementation.
- Decide how to strike a balance between fidelity and adaptation.
  - **Fidelity** – degree to which a program or practice is implemented as intended.
  - **Adaptation** – how much, and in what ways, a program or practice is changed to meet local circumstances.
- Share fidelity data back with implementers and other key members of the team to make continuous improvements.





# District Example

One large urban school district decided to implement Restorative Practices district-wide, but started with select schools to closely monitor fidelity and implementation to inform sustainable scale-up. Every adult in the school attended a 1-day interactive training, including instructional and non-instructional staff and community partners. A fidelity monitoring tool was developed and a team of 2 Restorative Practices trainers employed by the district conducted 2-day trainings for each school, followed by ongoing consultation and coaching and fidelity monitoring every fall and spring. The fidelity metric included a principal interview, staff interview, student interview, restorative circle observation, and overall school observation. Scores fall in the ranges of “not implemented,” “developing,” or “effective.” Fidelity data were used in feedback and planning meetings with principals to plan targeted coaching.

## Reflection:

What mental health promotion services and supports does your district/school provide?

## Questions to Consider

- Are the services and supports evidence-based?
- Do you have the right mix of mental health promotion services and supports for your students' strengths, needs, and cultural and linguistic characteristics?
- Are there programs being implemented that would benefit from fidelity monitoring?



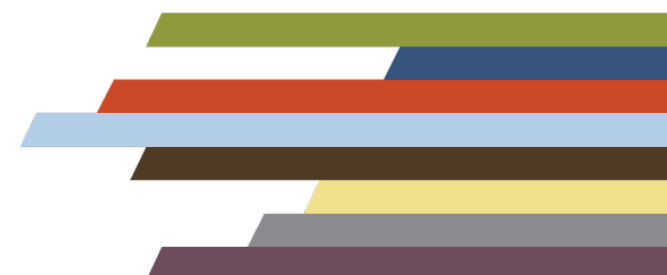


## Discussion

How does this content fit with your district understanding and policy/practice related to mental health promotion?

## Strategic Planning

- State a specific goal for your district within this domain.
- List 3 potential action steps to move this goal forward.





# Resources

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American Institutes for Research and the National Center for School Mental Health. (2018). *Planning checklist for monitoring fidelity of evidence-based practices (EBPs)*. Retrieved from <http://bit.ly/2HgRBWk>

Barrett, S., Eber, L., & Weist, M. (2013). Advancing education effectiveness: Interconnecting school mental health and school-wide positive behavior support. *Center for School Mental Health*.

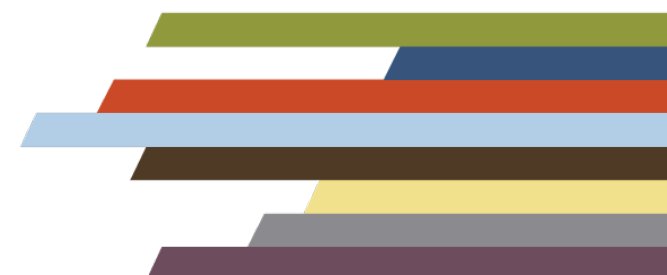
Blueprints for healthy youth development. (n.d.) *Blueprints for healthy youth development*. Retrieved from <https://www.blueprintsprograms.org/about>

Center for Disease Control and Prevention. (2018). *Health-related quality of life (HRQOL)*. Retrieved from <https://www.cdc.gov/hrqol/index.htm>

The Collaborative for Academic, Social, and Emotional Learning (CASEL). (n.d.). *CASEL*. Retrieved from [www.casel.org](http://www.casel.org)

The Collaborative for Academic, Social, and Emotional Learning (CASEL). (n.d.). *CASEL Program Guides*. Retrieved from <https://casel.org/guide/>

The Collaborative for Academic, Social, and Emotional Learning (CASEL). (n.d.) *District resource center*. Retrieved from <https://drc.casel.org>



# Resources

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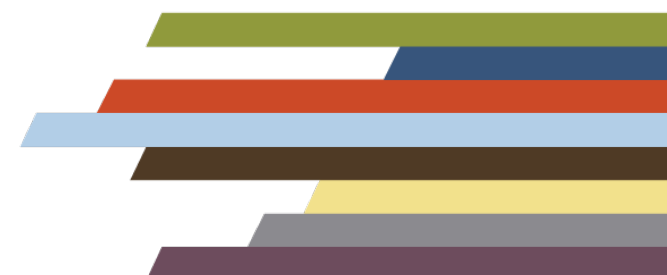
Dymnicki, A., Becker, K.D., Cunningham, D.L., & Anderson, K.L. (2014, October). *Evidence-Based Module Series*. Online Learning Module product of the National Resource Center for Mental Health Promotion and Youth Violence Prevention, SAMHSA, Washington, DC.

Flook, L., Goldberg, S. B., Pinger, L., Bonus, K., & Davidson, R. J. (2013). Mindfulness for teachers: A pilot study to assess effects on stress, burnout, and teaching efficacy (MBSR). *Mind, Brain, and Education*, 7(3), 182–195. <https://doi.org/10.1111/mbe.12026>

Frank, J.L., Reibel, D., Broderick, P., Cantrell, T. & Metz, S. (2015). The effectiveness of mindfulness-based stress reduction (MBSR) on educator stress and well-being: results from a pilot study. *Mindfulness*, 6, 208–216. <https://doi.org/10.1007/s12671-013-0246-2>

Harris, A. R., Jennings, P. A., Katz, D. A., Abenavoli, R. M., & Greenberg, M. T. (2016). Promoting stress management and wellbeing in educators: Feasibility and efficacy of a school-based yoga and mindfulness intervention (CALM). *Mindfulness*, 7(1), 143–154.

Hart, P. M., Wearing, A. J., Conn, M., Carter, N. L., & Dingle, A. R. K. (2000). Development of the School Organisational Health Questionnaire: A measure for assessing teacher morale and school organizational climate. *British Journal of Educational Psychology*, 70(2), 211–228.



# Resources

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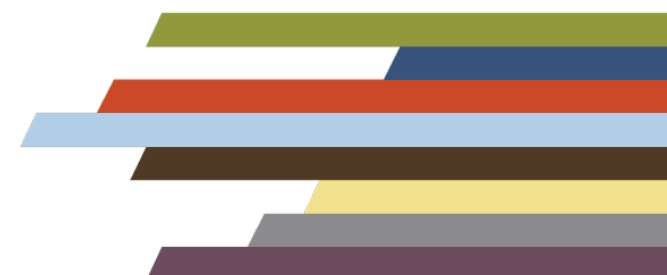
Hudnall Stamm, B. (2009). Professional Quality of Life: Compassion Satisfaction Fatigue Version 5 (ProQOL). Retrieved from [https://proqol.org/uploads/ProQOL\\_5\\_English.pdf](https://proqol.org/uploads/ProQOL_5_English.pdf)

Institute of Education Services. (n.d.). *What Works Clearinghouse*. Retrieved from <https://ies.ed.gov/ncee/wwc/>

Jennings, P. A., Frank, J. L., Snowberg, K. E., Coccia, M. A., & Greenberg, M. T. (2013). Improving classroom learning environments by Cultivating Awareness and Resilience in Education (CARE): Results of a randomized controlled trial. *School Psychology Quarterly, 28*(4), 374.

National Center for Healthy Safe Children. (n.d.). *Evidence-based module series*. Retrieved from <https://healthysafechildren.org/learning-module-series/evidence-based-module-series>

National Center for Mental Health Promotion and Youth Violence Prevention. (n.d.). Selecting evidence-based programs. Retrieved from <https://healthysafechildren.org/resource/selecting-evidence-based-programs>



# Resources

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National Center for Mental Health Promotion and Youth Violence Prevention. (n.d.). Selecting evidence-based programs in school settings. Retrieved from <https://healthysafechildren.org/resource/selecting-evidence-based-programs-school-settings>

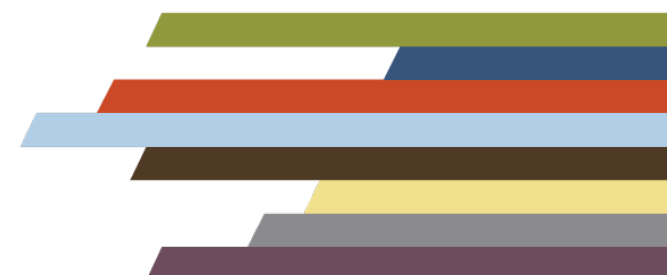
National Center for School Mental Health (NCSMH, 2020). *School Mental Health Quality Guide: Mental Health Promotion Services & Supports (Tier 1)*. NCSMH, University of Maryland School of Medicine. Retrieved from <http://www.schoolmentalhealth.org/media/SOM/Microsites/NCSMH/Documents/QualityGuides/Tier-1-Quality-Guide-1.29.20.pdf>

National Center on Safe Supportive Learning Environments. (n.d.). *School climate*. Retrieved from <https://safesupportivelearning.ed.gov/safe-and-healthy-students/school-climate>

National Center on Safe Supportive Learning Environments. (n.d.). *ED School Climate Surveys (EDSCLS)*. Retrieved from <https://safesupportivelearning.ed.gov/edscls>

Now Is the Time Technical Assistance. (n.d.). *Using the Interconnected Systems Framework in Now Is the Time, Project AWARE*. Retrieved from <https://cars-ta.groupsite.com/page/project-aware>

Office of Juvenile Justice and Delinquency Prevention. (n.d.). *Model programs guide*. Retrieved from <https://www.ojjdp.gov/mpg>



# Resources

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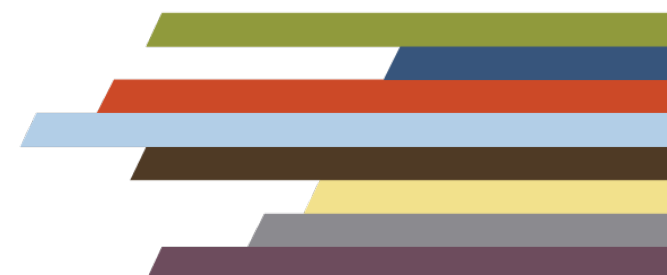
Positive Behavioral Interventions & Supports. (n.d.). Advancing education effectiveness: Interconnecting school mental health and school-wide positive behavior support. Retrieved from <https://www.pbis.org/topics/mental-healthsocial-emotional-well-being>

Positive Behavioral Interventions & Supports. (n.d.). *Positive behavioral interventions and supports*. Retrieved from <https://www.pbis.org/>

Positive Behavioral Interventions & Supports. (n.d.). *Student training resources*. Retrieved from <https://www.pbis.org/topics/mental-healthsocial-emotional-well-being>

Renshaw, T. L., Long, A. C., & Cook, C. R. (2015). Assessing teachers' positive psychological functioning at work: Development and validation of the Teacher Subjective Wellbeing Questionnaire. *School Psychology Quarterly*, 30(2), 289.

Safe Schools Healthy Students. (n.d.) *Evidence-based module series: Module #3 Implementing evidence based programs in school settings*. Retrieved from <https://healthysafekids.org/resource/selecting-evidence-based-programs-school-settings>



# Resources

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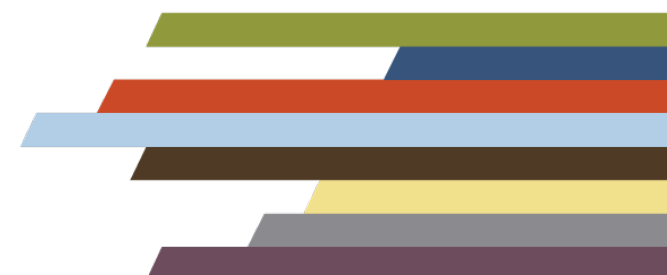
Society of Clinical Child & Adolescent Psychology. (2018, April 24). *Evidence-based therapies*. Retrieved from <https://effectivechildtherapy.org/therapies>

TeenMentalHealth.org. (2017, December). *Mental Health & High School Curriculum Guide*. Retrieved from <http://teenmentalhealth.org/schoolmhl/school-mental-health-literacy/mental-health-high-school-curriculum-guide/download-the-guide/>

Winwood, C., & McEwan, B. (2013). A practical measure of workplace resilience: Developing the Resilience at Work Scale. Retrieved from <http://d4462130.u92.platformpublishing.com.au/wp-content/uploads/2013/10/RAWScaleArticleJOEM.pdf>

Wolf-Prusan, L., O'Malley, M., & Hurley, N. (n.d.) *Restorative practices: Approaches at the intersection of school discipline and school mental health*. Retrieved from <http://mobile.roanokeva.gov/Teams/JuvJusticeServ.nsf/xsp/.ibmmodres/domino/OpenAttachment/teams/juvjusticeserv.nsf/1873CAD24086F16B852582A3006B08D6/Body/Restorative%20Practices.pdf>

Youth Mental Health First Aid: Take a Course. Retrieved from <https://www.mentalhealthfirstaid.org/take-a-course/>



# References

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- Anderson, C., Barnes, M. S., Beane, C., Bishop, J., Davis, E., Fishkind, P., & Truman, S. (2014). Restorative practices: Fostering healthy relationships & promoting positive discipline in schools: A guide for educators. *Advancement Project*.
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*, 405–432.
- Jorm, A. F. (2000). Mental health literacy: Public knowledge and beliefs about mental disorders. *The British Journal of Psychiatry, 177*(5), 396–401.
- Kutcher, S., Wei, Y., & Coniglio, C. (2016). Mental health literacy: past, present, and future. *The Canadian Journal of Psychiatry, 61*(3), 154–158.
- National Center on Safe Supportive Learning Environments. (n.d.) *School climate*. Retrieved from <https://safesupportivelearning.ed.gov/safe-and-healthy-students/school-climate>
- Sklad, M., Diekstra, R., Ritter, M. D., Ben, J., & Gravesteyn, C. (2012). Effectiveness of school-based universal social, emotional, and behavioral programs: Do they enhance students' development in the area of skill, behavior, and adjustment? *Psychology in the Schools, 49*(9), 892–909.





**MHTTC**

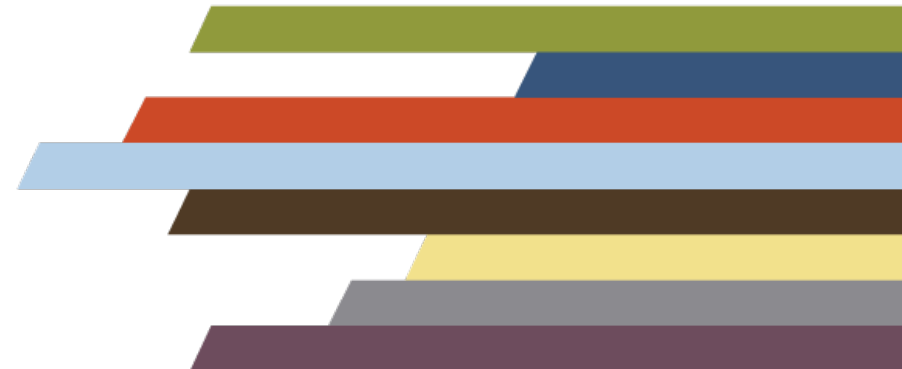
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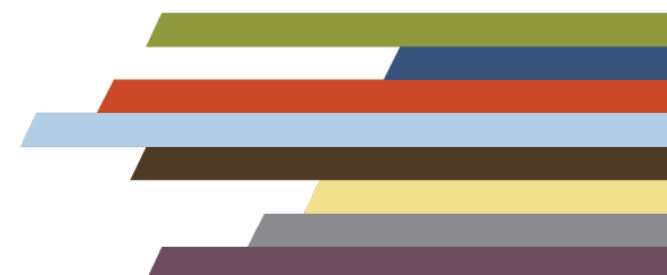
# Acknowledgments

This work is supported by grant SM081726 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

Module content was developed by the National Center for School Mental Health in partnership with the MHTTC Network Coordinating Office.



# Panel Discussion



# Panelists



**Susan Barrett, MA**, serves as a Director for the Center for Social Behavior Supports Center (CSBS) at Old Dominion University and an Implementer Partner with the U.S. National Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS). She assists with large-scale implementation of PBIS; partners with researchers to evaluate the impact of PBIS on students, school staff, and school communities; and serves on the Association of Positive Behavior Supports Board of Directors. She also co-leads the development of the Interconnected Systems Framework, a mental health and PBIS expansion effort. Susan has been published in the areas of large-scale adoption of PBIS, mental health, cost-benefit analysis, advanced tier system development, and adoption of evidence-based practices in schools.



**Sarah K Howell** is the school social worker at Las Americas Newcomer School in Houston ISD, manages the social work department at Houston reVision and is the founder of STAR (Survivors of torture, asylees and refugees) Counseling and Consultation. She has built her career working with immigrants and refugees and specialized in trauma and torture survivors within those populations. She is currently pursuing her Doctorate in Clinical Social Work at the University of Pennsylvania.



# Panelists



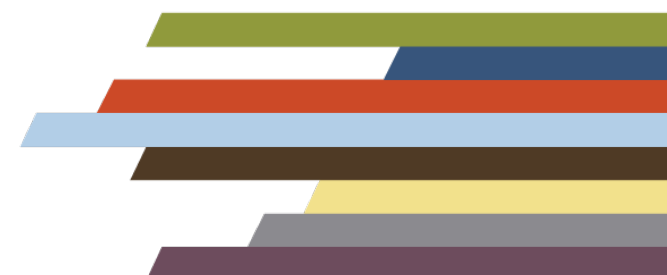
**Dr. Jennifer Kubista's** educational mission, vision, and philosophy is focused on the development of the whole child, where students are academically, behaviorally, physically, socially and emotionally healthy, safe, engaged, supported and challenged in their learning and achievement. This philosophy also includes the development of whole educators, where learning, growing, living (being happy and healthy), working, and leading are at the forefront as we engage in teaching and learning to support the whole child. This engagement also includes opportunities to partner with families and community for the best interest of every student, every day. Jennifer is an Executive Council member for the System of Care in Marion & Polk County within the Coordinated Care Organization networks through the Oregon Health Authority. The mission of the Marion & Polk County System of Care is to create a collaborative network of effective, community-based services and supports that improve outcomes for Youth and Families in their home, schools, and community. As she continues to share, Whole School, Whole Child, Whole Family, leads to a Whole Community. Dr. Kubista is the current Superintendent at Central School District 13J, a diverse, yet rural community located in Independence and Monmouth, OR.



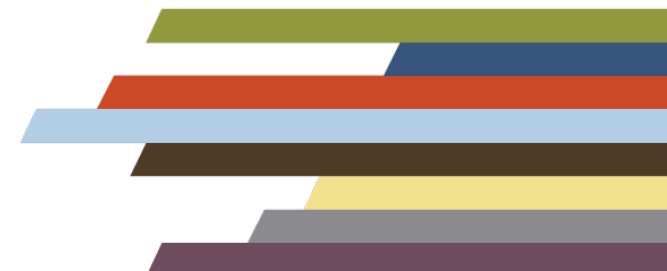
Tell us a little about yourself, your role and how Tier 1 mental health promotion plays out in your work?

Describe some successful results of implementing mental health promotion. How has it served as a foundation for Tiers 2 & 3. Share examples of what it looks like.

(School climate, teacher and school staff well being, positive behaviors and relationships, positive discipline practices, mental health literacy, social emotional learning)

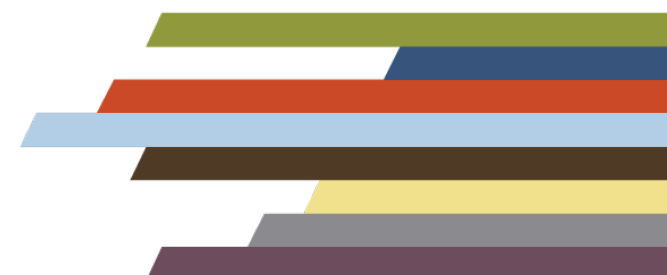


What have been some challenges of Tier 1 and what are some recommendations?



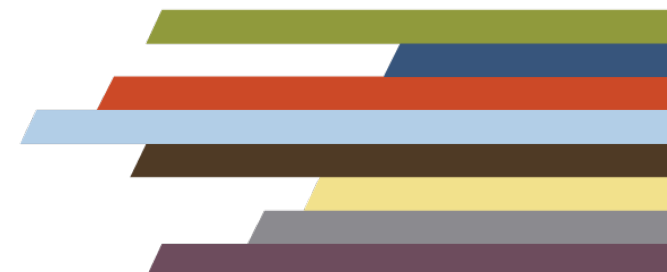


How do we ensure equitable and anti-racist practices in Tier 1?

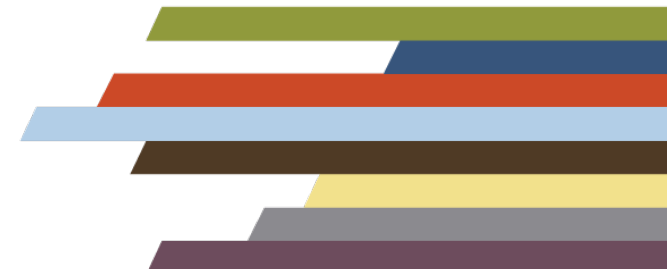


How has the pandemic impacted Tier 1 and how have you had to adapt or change?

With the infusion of new COVID-19 relief funds how do we invest in an implementation framework and ensure equitable distribution?

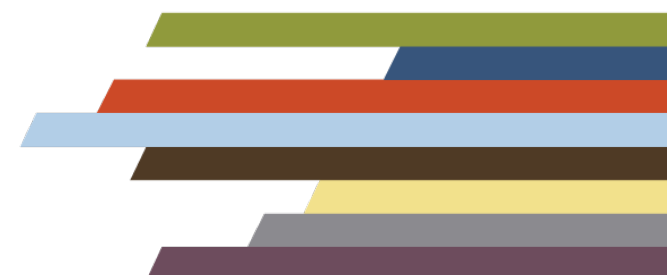


# Q&A with Presenters

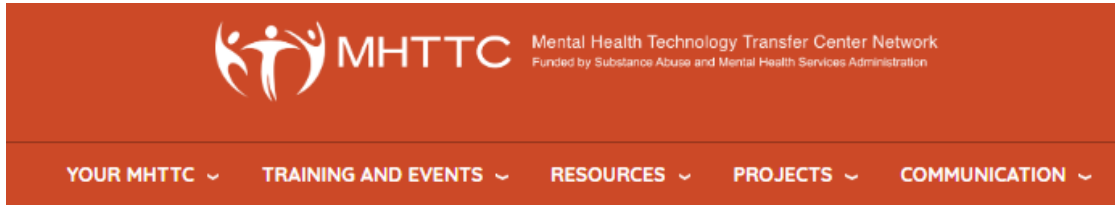


# Coming up next: Regional Breakout Sessions

The post-session Regional Breakout sessions are intended to provide an opportunity for you, our participants, to ask questions about the content covered today, and time to discuss and apply today's learning in an informal moderated discussion with our staff, contextualized for your specific region.



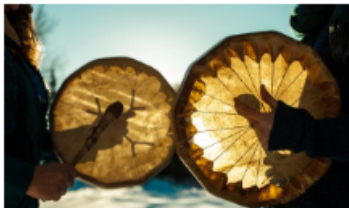
# Connecting with the MHTTC in your region



## Find Your Center

To jump to a specific center, click the center's name. To save a center as your default center, select the center by clicking the photo, then click the Save button at the bottom of the page

### Centers Across The Network



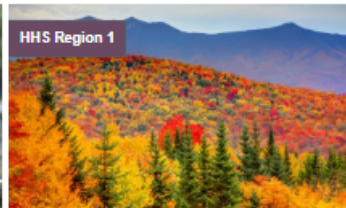
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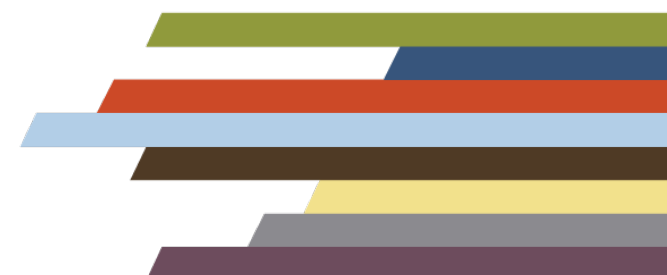
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newengland@mhttcnetwork.org  
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CT, ME, MA, NH, RI, VT

For information about local, state, and regional school mental health training and technical assistance activities, *National School Mental Best Practices: Implementation Guidance Modules*, access your MHTTC Regional Center at <https://mhttcnetwork.org/centers/selection>



## Upcoming Learning Sessions:

- April 27: *Early Intervention and Treatment (Tiers 2 and 3)*
- May 11: *Funding and Sustainability*
- May 25: *Impact*



**Register now:**

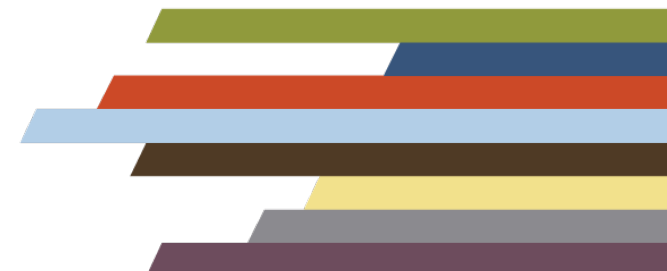
<https://bit.ly/smh-always-and-now>

# ***Access the National School Mental Health Best Practices: Implementation Guidance Modules on the MHTTC Website***

Includes trainer and participant manuals, slide decks for each module, and additional resources!



<http://bit.ly/implementation-guidance-modules>





# Evaluation Information

The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.

Please take a moment to complete a brief survey about today's training.

