

# Comprehensive School Mental Health Case Examples

Training Packet

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# Suggested Use and Considerations

These scenarios are developed to be utilized with multi-disciplinary school teams, including building, district, and/or community professionals, who are tasked with assessing the academic, mental, and behavioral health needs of students. All professional descriptions are used as examples. Please do not get caught up on whether the personnel implementing an intervention is a school counselor, psychologist, social worker, behavioral health provider, etc. In your discussions, feel free to replace this role with whoever would be doing it in your district/school.

Each step is designed to be completed without looking at the following steps or information. Teams are tasked with determining what their school or district has in place, and what they would be able to do at any given step. One scenario is designed to take approximately an hour to complete. However, the suggested times can be altered to fit the time you have available in your training. We suggest 10 minutes for each step. A time keeper will then tell the team when it is time to move forward to the next step, regardless of if they feel they have “finished” the current step.

The “Take-aways” section is provided to share the anticipated focus of the scenarios for each team. It is not exhaustive. Teams should utilize this time to strategically plan what they would like to keep doing, start doing, and/or stop doing based on the scenario. Action steps can then be determined to move teams toward their goals.

If multiple teams are completing different scenarios, the “Discussion” time can be used to share out the biggest take-aways for each scenario. Depending on your group, you may structure this time differently. Some options are detailed below:

- You may want to read through each scenario, and allow teams to provide take-aways and share their process at each step.
- You may provide a brief description of the whole scenario, and have teams only share their “big take-away”.
- You may have teams that completed the same scenario pair up to discuss their take-aways



## Comprehensive School Mental Health Case Examples

# Tier 1 Scenario #1 (Elementary)

### Initial Information

A second-year teacher is requesting evaluations by the school psychologist for five students in her third-grade classroom. She reported the students are displaying challenging behaviors in the classroom that leave her unable to effectively teach. These behaviors include talking out, wandering around the room, disruptive and defiant behaviors, joking and being the “class clown,” work refusal, and at times, aggressive behaviors toward her, peers, and property. She is visibly upset and said she “hates coming to work every day” and “this isn’t why she signed up to teach.” She is demanding behavior plans and supports.

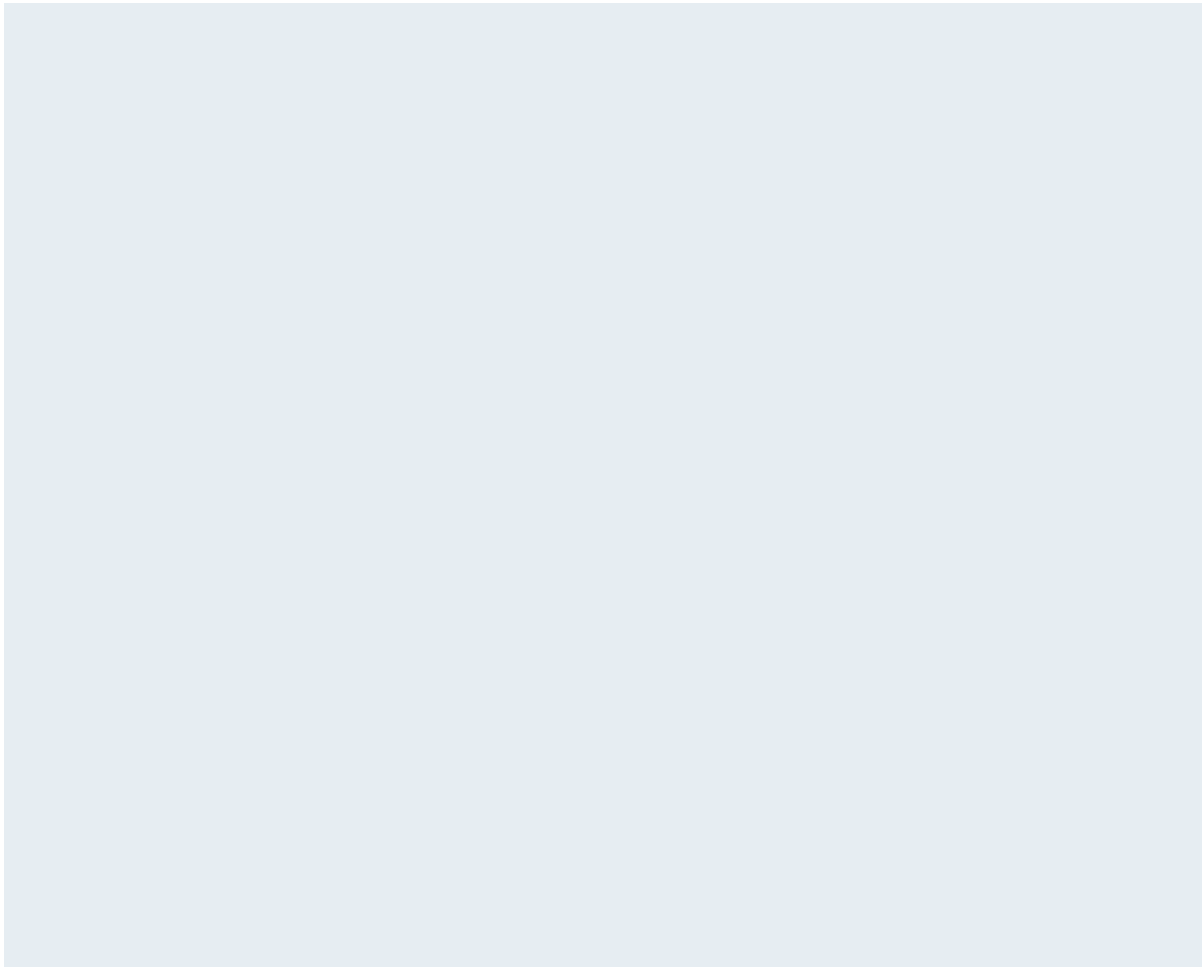
- *What additional data or information is needed to determine next steps?*
- *Who would need to be part of the team at this point?*
- *What would you do at this point?*

## Step 2

The school psychologist reviews the school-wide discipline data. They reveal this teacher has the highest number of office discipline referrals (ODRs) reported in the school. The five identified students make up the majority of the referrals from her classroom. The school psychologist completes three classroom observations, and the data is provided **on the following three pages**.

Observations were collected by momentary time-sampling (MTS). The observer set their timer for 1-minute intervals. At the start of every minute, they scanned the room slowly from left to right. While scanning, they counted the number of students who are off-task at that moment and record it. They repeated this process for each minute in the 20-minute observation period.

- *What are the appropriate next steps?*
- *What data will you need to collect or track for progress monitoring?*
- *Who would need to be part of the team at this point?*



Obs # 1

**Planned Activity Check (PLACHECK) for Classroom Observations**

Observer Name: School psychologist Date: 9.23  
 Start Time: 9:15am End Time: 9:35am (math small group)  
 Location of Observation: classroom Number of Students: 20

Definition of Behavior: "off-task" - talking out, out of seat, work refusal, disruptive bx. etc  
"on-task" - sitting at desk oriented to task, following teacher directions

**Directions:**

- At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
- Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
- Start the timer.
- Scan the room slowly from left to right.
  - While scanning, count number of students who are off-task and record on the chart below.
  - If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
- When the timer goes off at the designated interval, repeat steps 3 and 4 until all data points are obtained.

Interval Length for Observation: 20 minutes

	# of Students Off-Task	# of Students On-Task
1	III	12
2	IIII	14
3	IIII	11
4	IIII	10
5	IIII	12
6	IIIIIIII	7
7	IIII	12
8	IIII I	9
9	IIII II	8
10	IIII	12
11	IIII	12
12	IIII	15
13	IIII	14
14	IIII	15
15	IIII	13
16	IIII	11
17	IIII	11
18	IIII	14
19	IIII	12
20	III	17

Use the following to calculate on- and off-task percentages.

# Of Students to Necessary Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{3/20}$

Percentage of intervals in which 80% or more of the class is on-task: 15%

(Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)

Obs # 2

**Planned Activity Check (PLACHECK) for Classroom Observations**

Observer Name: School psychologist Date: 9.23  
 Start Time: 2:20pm End Time: 2:40pm (reading groups)  
 Location of Observation: classroom Number of Students: 20

Definition of Behavior: "off-task" - talking out, out of seat, work refusal, disruptive bx. etc  
"on-task" - sitting at desk oriented to task, following teacher directions

**Directions:**

1. At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
2. Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
3. Start the timer.
4. Scan the room slowly from left to right.
  - a. While scanning, count number of students who are off-task and record on the chart below.
  - b. If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
5. When the timer goes off at the designated interval, repeat steps 3 and 4 until all data points are obtained.

Interval Length for Observation: 20 minutes

	# of Students Off-Task	# of Students On-Task
1		8
2		12
3		7
4		8
5		7
6		6
7		13
8		12
9		14
10		11
11		12
12		13
13		16
14		14
15		15
16		13
17		15
18		9
19		10
20		14

Use the following to calculate on- and off-task percentages.

# Of Students to Necessary Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{1/20}$

Percentage of intervals in which 80% or more of the class is on-task: 5%

(Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)

Obs #3

**Planned Activity Check (PLACHECK) for Classroom Observations**

Observer Name: School psychologist Date: 9.25  
 Start Time: 1:10pm End Time: 1:20pm (Science Instruction)  
 Location of Observation: classroom Number of Students: 20

Definition of Behavior: "off-task" - talking out, out of seat, work refusal, disruptive bx. etc  
"on-task" - sitting at desk oriented to task, following teacher directions

**Directions:**

1. At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
2. Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
3. Start the timer.
4. Scan the room slowly from left to right.
  - a. While scanning, count number of students who are off-task and record on the chart below.
  - b. If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
5. When the timer goes off at the designated interval, repeat steps 3 and 4 until all data points are obtained.

Interval Length for Observation: 20 minutes

	# of Students Off-Task	# of Students On-Task
1	III 3	17
2	IIII 5	15
3	IIII 4	14
4	III 3	17
5	IIII 4	16
6	IIII 5	15
7	IIII II 7	13
8	IIII II 7	13
9	IIII 5	15
10	IIII III 8	12
11	IIII IIII 9	11
12	III 3	17
13	III 3	17
14	IIII 8	12
15	IIII II 7	13
16	IIII IIII 10	10
17	IIII IIII I 11	9
18	IIII III 8	12
19	IIII II 7	13
20	IIII I 10	14

Use the following to calculate on- and off-task percentages.

# Of Students to Necessary Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{5/20}$

Percentage of intervals in which 80% or more of the class is on-task: 25%

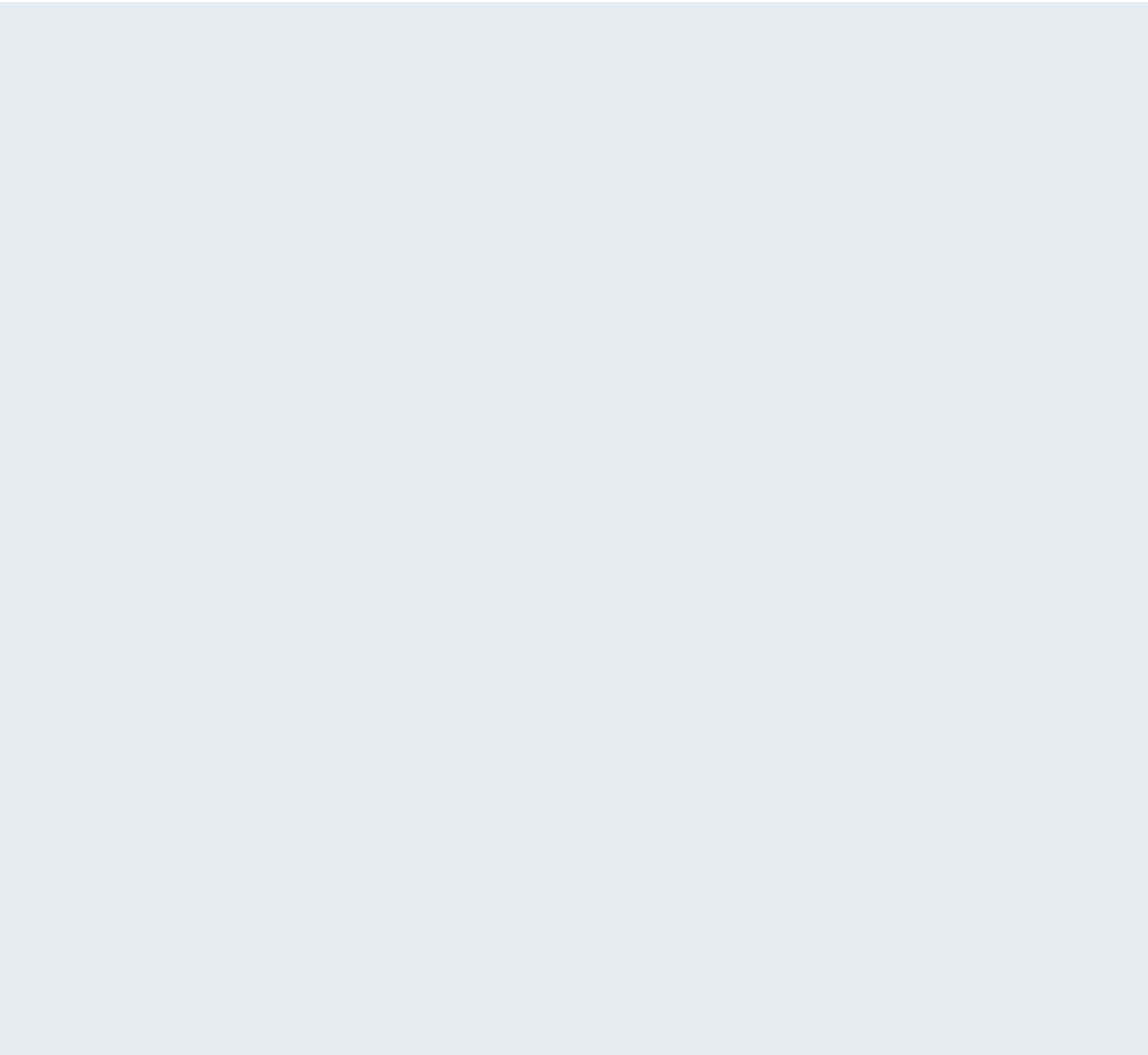
(Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)



### Step 3

The school psychologist trained the teacher to implement the Good Behavior Game (GBG) in her classroom. She also completed training on basic classroom management practices, and the school psychologist has been observing and providing feedback to the teacher twice a week. The teacher has also been meeting with a mentor teacher who is providing support for feelings of overwhelm. Four of the five identified students are now showing improved behavior, and the teacher reports increased feelings of confidence and efficacy. However, she reports (and the school psychologist observes) one student who is still engaging in frequent disruptive behavior.

- *What are the appropriate next steps?*
- *What additional information would the team need?*
- *Who would need to be part of the team at this point?*

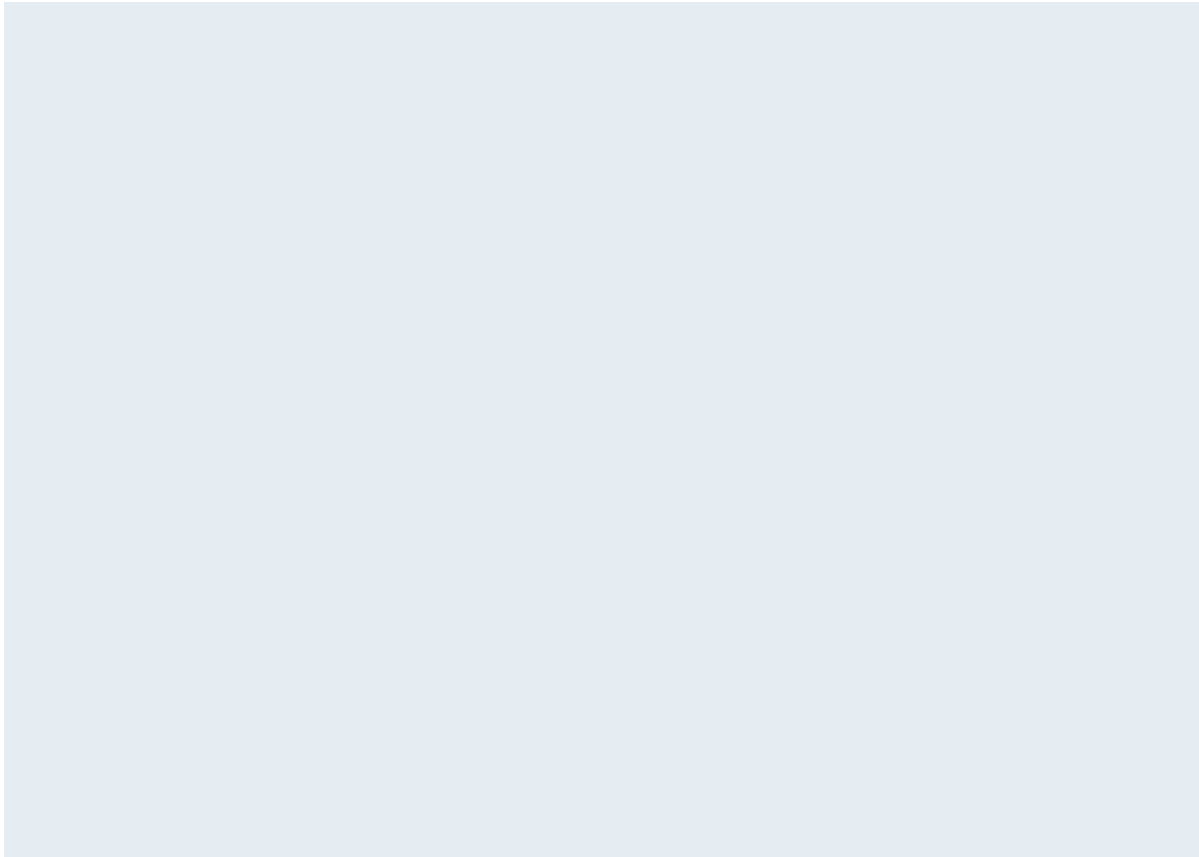


## Step 4

After receiving consent from parents, the school psychologist completes three observations of the identified student, one during individual work time, a second during instructional time, and the third during specials. The GBG was being utilized during the first two observations. The data is reported below. She also calls the student's parent to discuss behavior at home. During the phone call, she learns that this student was recently diagnosed with ADHD and has just started outpatient therapy services to work on developing executive functioning skills and emotional regulation. Parents reported they want to try non-pharmacological treatments alone before considering the addition of medication management.

Observations were collected by momentary time-sampling (MTS). The observer set their timer for 1-minute intervals. At the start of every minute, they scanned the room slowly from left to right. While scanning, they counted the number of students who are off-task and record it. The observer made specific note of the target student when scanning. **The observation data is on the following three pages.**

- *How would you discuss the observation data with the teacher?*
- *What would your next steps be?*
- *Who would need to be part of the team at this point?*



# individual work time

## Planned Activity Check (PLACHECK) for Classroom Observations

Observer Name: School Psych Date: 10.25  
 Target Student Initials: NB Start Time: 9:15 End Time: 9:25  
 Location of Observation: Classroom Number of Students: 20

**Definition of Off-Task Behavior:** Away from assigned area, looking away from speaker or assigned task, engaging with materials not pertinent to task or activity, speaking out of turn

**Directions:**

1. At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
2. Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
3. Start the timer.
4. Scan the room slowly from left to right.
  - a. While scanning, count number of students who are off-task and record on the chart below.
  - b. If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
5. When the timer goes off at the designated interval, repeat steps 3 and 4 until ten data points are obtained.

Interval Length for Observation: \_\_\_\_\_

	# of Students Off-Task	Target Student		# of Students On-Task
1	2	On-Task	<del>Off-Task</del>	18
2	1	On-Task	<del>Off-Task</del>	19
3	1	On-Task	<del>Off-Task</del>	19
4	0	<del>On-Task</del>	Off-Task	20
5	2	On-Task	<del>Off-Task</del>	18
6	1	On-Task	<del>Off-Task</del>	19
7	0	<del>On-Task</del>	Off-Task	20
8	1	On-Task	<del>Off-Task</del>	19
9	2	On-Task	<del>Off-Task</del>	18
10	1	On-Task	<del>Off-Task</del>	19
<b>Total number of times the target student was off-task</b>				<b>8</b>

Use the following to calculate on- and off-task percentages.

# Of Students to Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{8/10}$

Percentage of intervals in which 80% or more of the class is on-task: 100%  
(Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)

Percentage of intervals in which target student is on task: 20%  
(Find percentage of intervals by dividing the total number of intervals in which the target student was on-task by 10 and then multiplying by 100)

# Instructional Time

## Planned Activity Check (PLACHECK) for Classroom Observations

Observer Name: School Psych Date: 10.25  
 Target Student Initials: NB Start Time: 11:15 End Time: 11:25  
 Location of Observation: Classroom Number of Students: 20

**Definition of Off-Task Behavior:** Away from assigned area, looking away from speaker or assigned task, engaging with materials not pertinent to task or activity, speaking out of turn

**Directions:**

- At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
- Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
- Start the timer.
- Scan the room slowly from left to right.
  - While scanning, count number of students who are off-task and record on the chart below.
  - If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
- When the timer goes off at the designated interval, repeat steps 3 and 4 until ten data points are obtained.

Interval Length for Observation: 10 min

	# of Students Off-Task	Target Student		# of Students On-Task
1	0	On-Task	Off-Task	20
2	1	On-Task	Off-Task	19
3	1	On-Task	Off-Task	19
4	0	On-Task	Off-Task	20
5	0	On-Task	Off-Task	20
6	2	On-Task	Off-Task	18
7	1	On-Task	Off-Task	19
8	1	On-Task	Off-Task	19
9	0	On-Task	Off-Task	20
10	5	On-Task	Off-Task	15
<b>Total number of times the target student was off-task</b>				<b>6</b>

Use the following to calculate on- and off-task percentages.

# Of Students to Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{8/10}$

Percentage of intervals in which 80% or more of the class is on-task: 90%  
 (Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)

Percentage of intervals in which target student is on task: 40%  
 (Find percentage of intervals by dividing the total number of intervals in which the target student was on-task by 10 and then multiplying by 100)

**Planned Activity Check (PLACHECK) for Classroom Observations**

Observer Name: School Psych Date: 10.25  
 Target Student Initials: NB Start Time: 9:15 End Time: 9:25  
 Location of Observation: gym Number of Students: 20

**Definition of Off-Task Behavior:** Away from assigned area, looking away from speaker or assigned task, engaging with materials not pertinent to task or activity, speaking out of turn

**Directions:**

- At the beginning of the observation, note the total number of students present within the location where the observation is being conducted, including the target student if one is selected.
- Set the timer to your designated interval (e.g., 30 sec, 1 min, 2 min, etc.)
- Start the timer.
- Scan the room slowly from left to right.
  - While scanning, count number of students who are off-task and record on the chart below.
  - If targeting a specific student during this observation, observe if the target student is on- or off-task and record on the chart below.
- When the timer goes off at the designated interval, repeat steps 3 and 4 until ten data points are obtained.

Interval Length for Observation: 10min

	# of Students Off-Task	Target Student		# of Students On-Task
1	2	<del>On-Task</del>	Off-Task	18
2	1	<del>On-Task</del>	Off-Task	19
3	0	<del>On-Task</del>	Off-Task	20
4	3	On-Task	<del>Off-Task</del>	17
5	4	On-Task	<del>Off-Task</del>	16
6	0	<del>On-Task</del>	Off-Task	20
7	0	<del>On-Task</del>	Off-Task	20
8	1	On-Task	<del>Off-Task</del>	19
9	2	On-Task	<del>Off-Task</del>	18
10	3	On-Task	<del>Off-Task</del>	17
<b>Total number of times the target student was off-task</b>				<b>5</b>

Use the following to calculate on- and off-task percentages.

# Of Students to Meet 80% Criteria:  $.80 \times (\# \text{ of students in class}) = \underline{16/20}$

# of Intervals to Meet 80% Criteria:  $.80 \times (\# \text{ of intervals}) = \underline{8/10}$

Percentage of intervals in which 80% or more of the class is on-task: 100%  
 (Find percentage of intervals by dividing the total number of intervals in which 80% or more of the class was on-task by 10 and then multiplying by 100)

Percentage of intervals in which target student is on task: 50%  
 (Find percentage of intervals by dividing the total number of intervals in which the target student was on-task by 10 and then multiplying by 100)

## Take-aways

This scenario highlights the importance of class-wide behavior supports and providing individualized professional development and training supports to educators as needed.

- *Does this scenario help you identify any gaps or needs at your current school/district?*
- *For improved school-based mental health implementation, what would you like to:*
  - » *Keep doing?*
  - » *Stop doing?*
  - » *Do differently?*
  - » *Start doing?*
- *What is your biggest take-away from this scenario?*

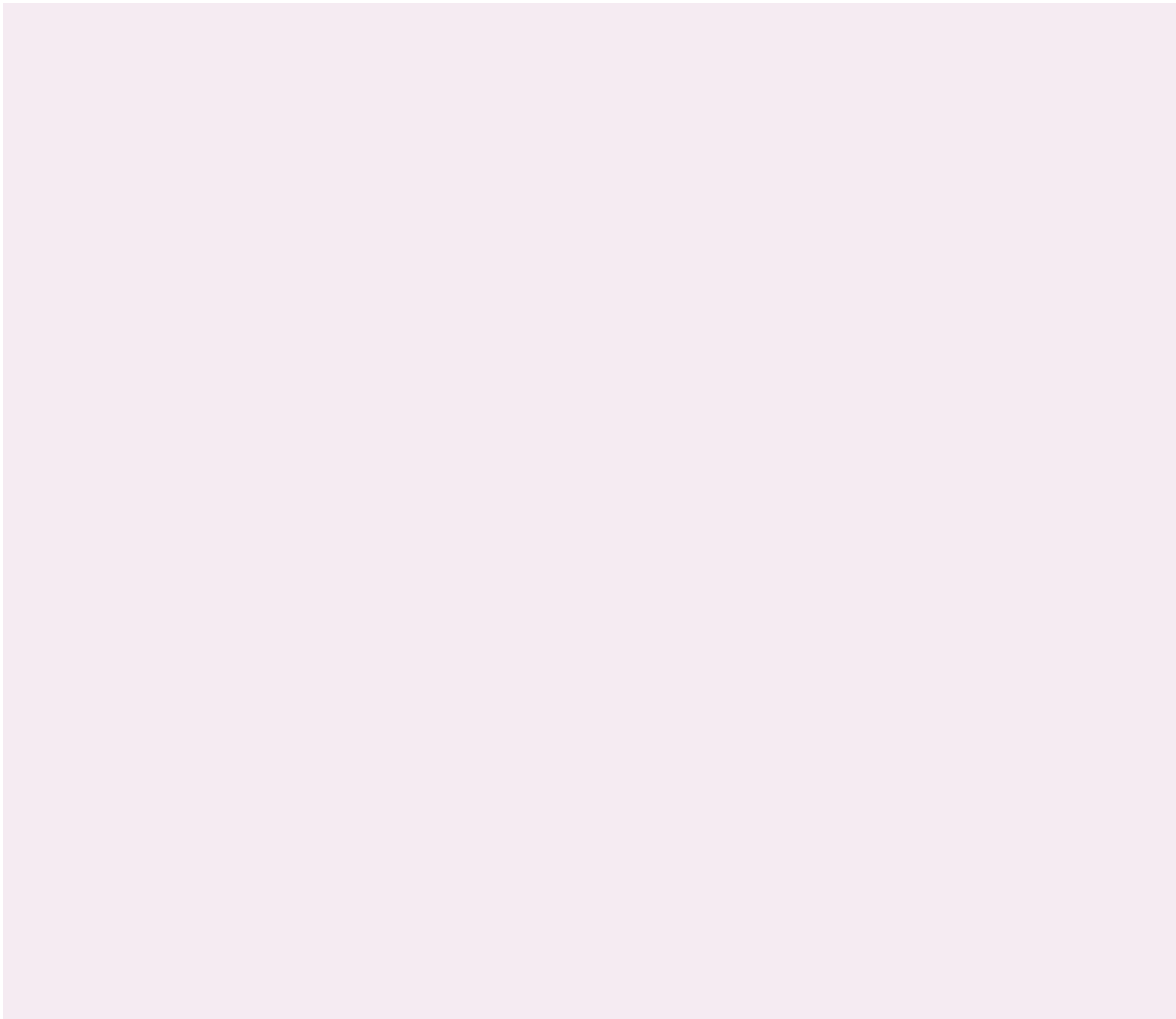
## Comprehensive School Mental Health Case Examples

# Tier 1 Scenario #2 (Middle/High)

### Initial Information

Your school implements a school-wide screening for mental health concerns for the first time. Results yield large indications of need with 63% of students reported feelings hopelessness, 26% reported suicidal ideation and/or plans, and 44% engaging in alcohol or drug use on a weekly or more basis. The school board is pushing for immediate services for all students identified in this robust tier 2, but capacity in the school and community is low.

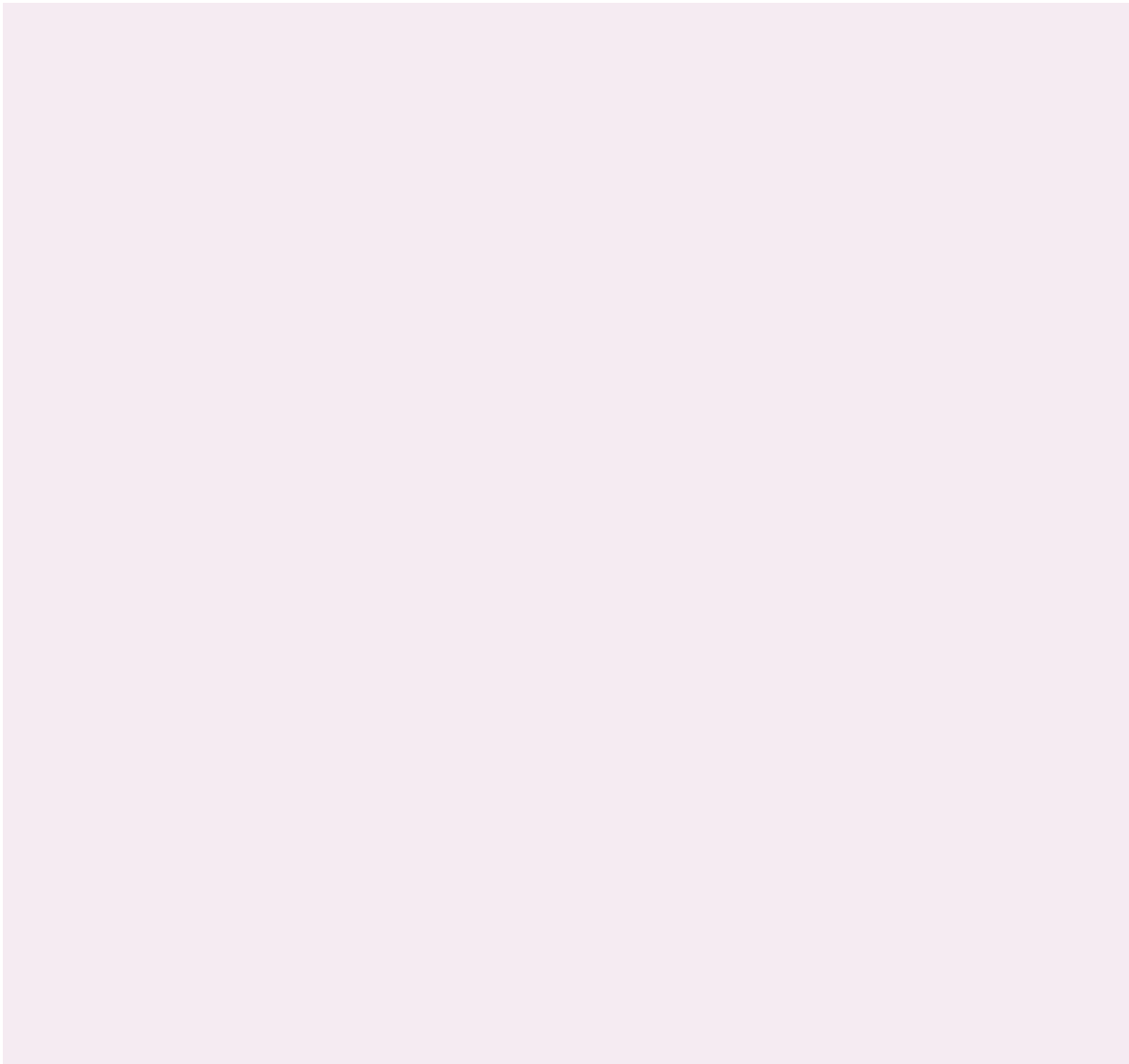
- *Who would need to be part of the team at this point?*
- *What would you do at this point?*
- *What additional data is needed at this time?*



## Step 2

The school starts implementing socio-emotional learning (SEL) programming targeted to these concerns to address the need identified through the screening. A Mental Health (MH) team was also established to review data, interview student leaders to better understand the student perspective, and implement a referral system for teachers to indicate which students exhibit symptoms requiring more substantial supports. The MH team trained teachers and staff on the referral system in a school-wide training. However, it has been three months and they have noticed that teachers are not using the referral system. One teacher told a member of the MH team that there is a lot of confusion and many teachers “don’t get” what they are supposed to do or look for to refer.

- *What are the appropriate next steps?*
- *Who would need to be part of the team at this point?*

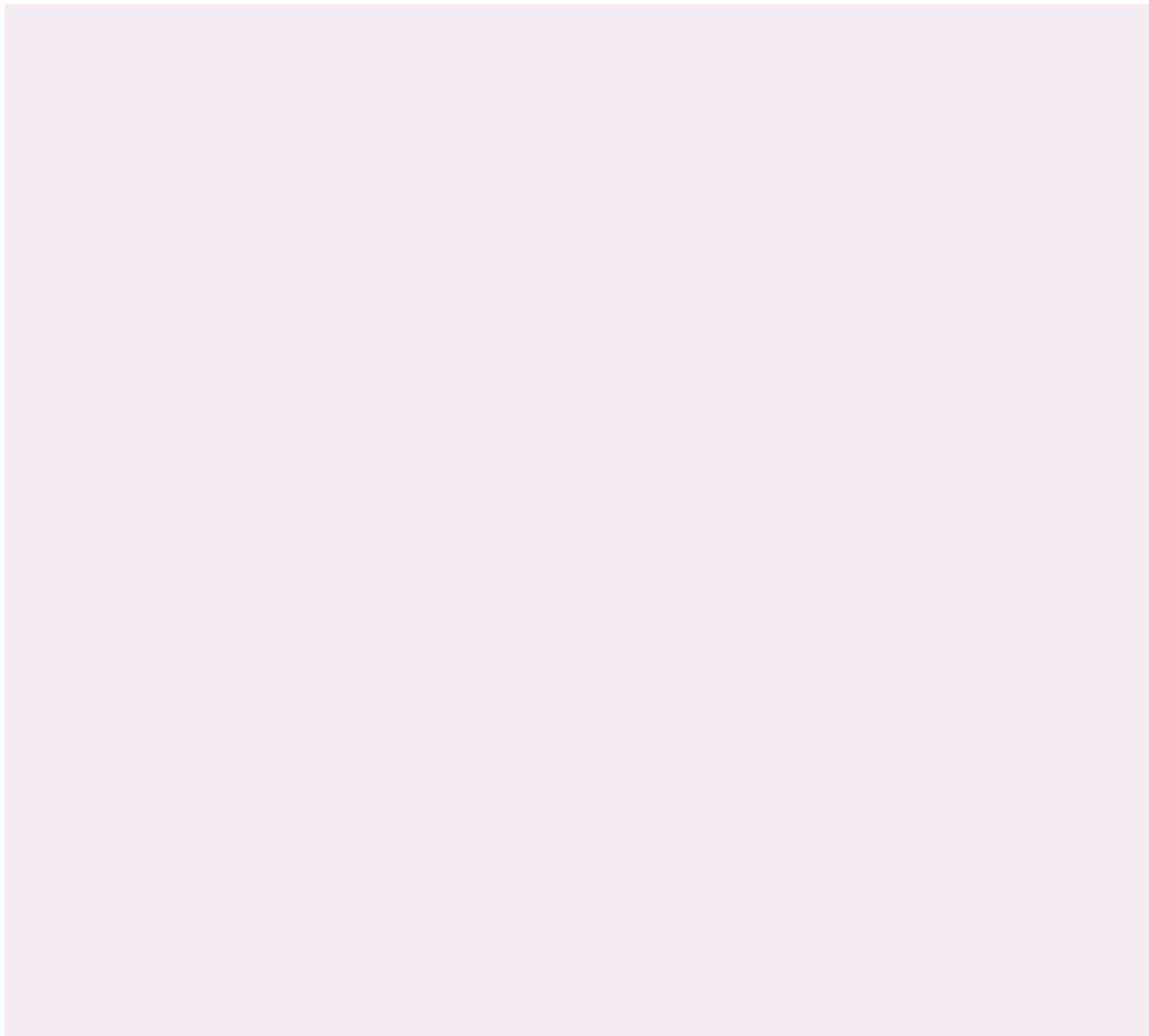




### Step 3

The MH team, with administrative support, provide ongoing training in mental health literacy for teachers using Classroom WISE to build teacher capacity in the identification of mental health concerns. Teachers report feeling much more competent and confident and there is improvement in referrals and identification. However, the MH team is now struggling with where to send referrals and determining the level of need of identified students.

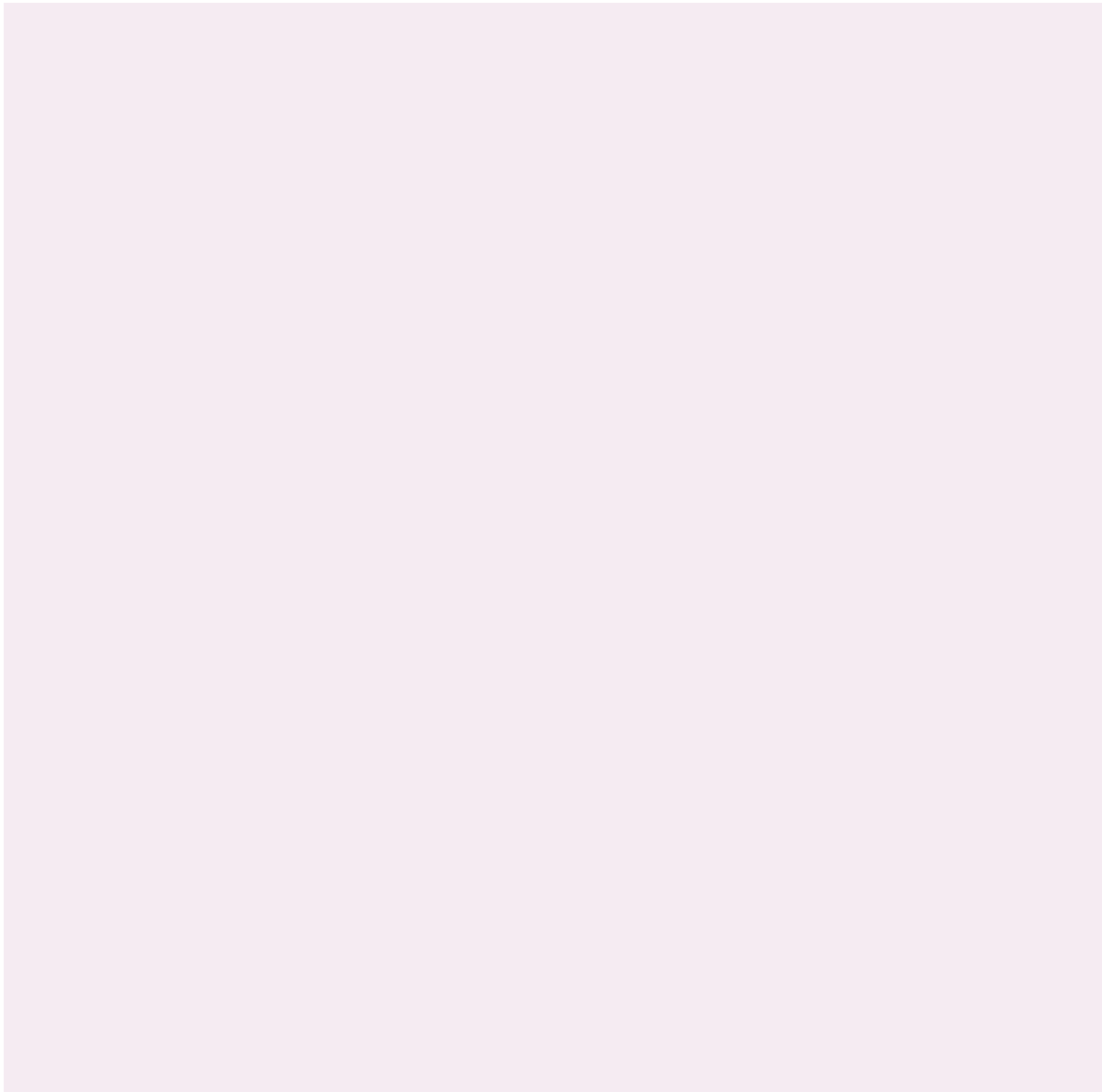
- *What are the appropriate next steps?*
- *What additional information would the team need?*
- *Who would need to be part of the team at this point?*



## Step 4

The MH team develops a decision-making tree with rules/steps for routing referrals into the tiered levels of services and supports. They also put together a resource bank with school and community-based referrals and resources. At the end of the year screening, students reported decreases in suicidality and substance use. However, school morale is reportedly low and the vast majority of students report the discipline policies are unfair. School-wide data reveal the number of suspensions and ODRs has increased over the last three years.

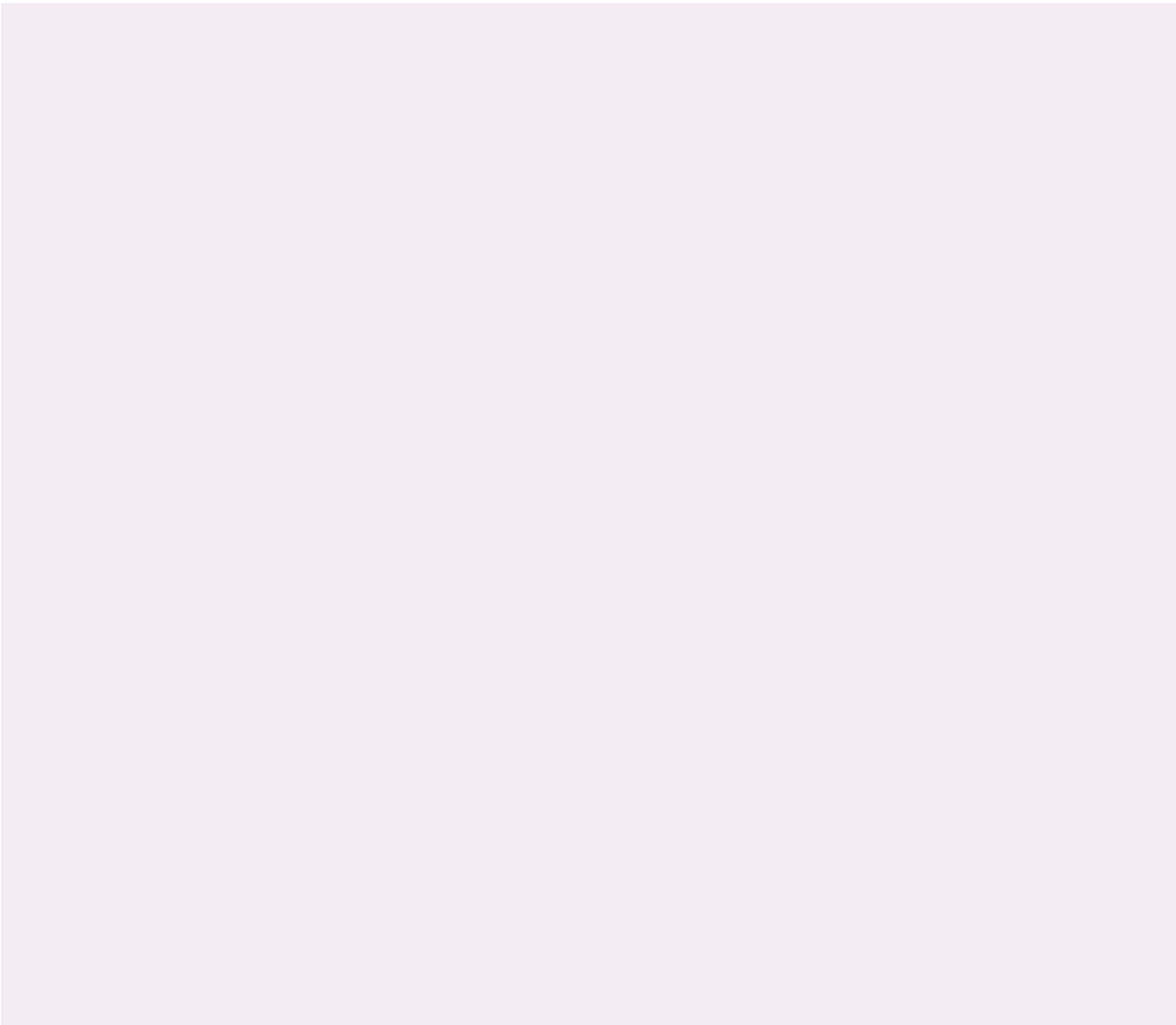
- *What would your next steps be?*
- *Who would need to be part of the team at this point?*



## Take-aways

This scenario highlights the need for a robust tier 1 as the first intervention for mental health concerns. It also demonstrates the cyclical nature of tier 1 supports. Tier 1 is not a checklist that you do one time and then say you have a robust system. This scenario also highlights the importance of clearly defining procedures and resources available in the school, all with the mindset that it needs to be flexible and fit to the current concerns of the school.

- *Does this scenario help you identify any gaps or needs at your current school/district?*
- *For improved school-based mental health implementation, what would you like to:*
  - » *Keep doing?*
  - » *Stop doing?*
  - » *Do differently?*
  - » *Start doing?*
- *What is your biggest take-away from this scenario?*

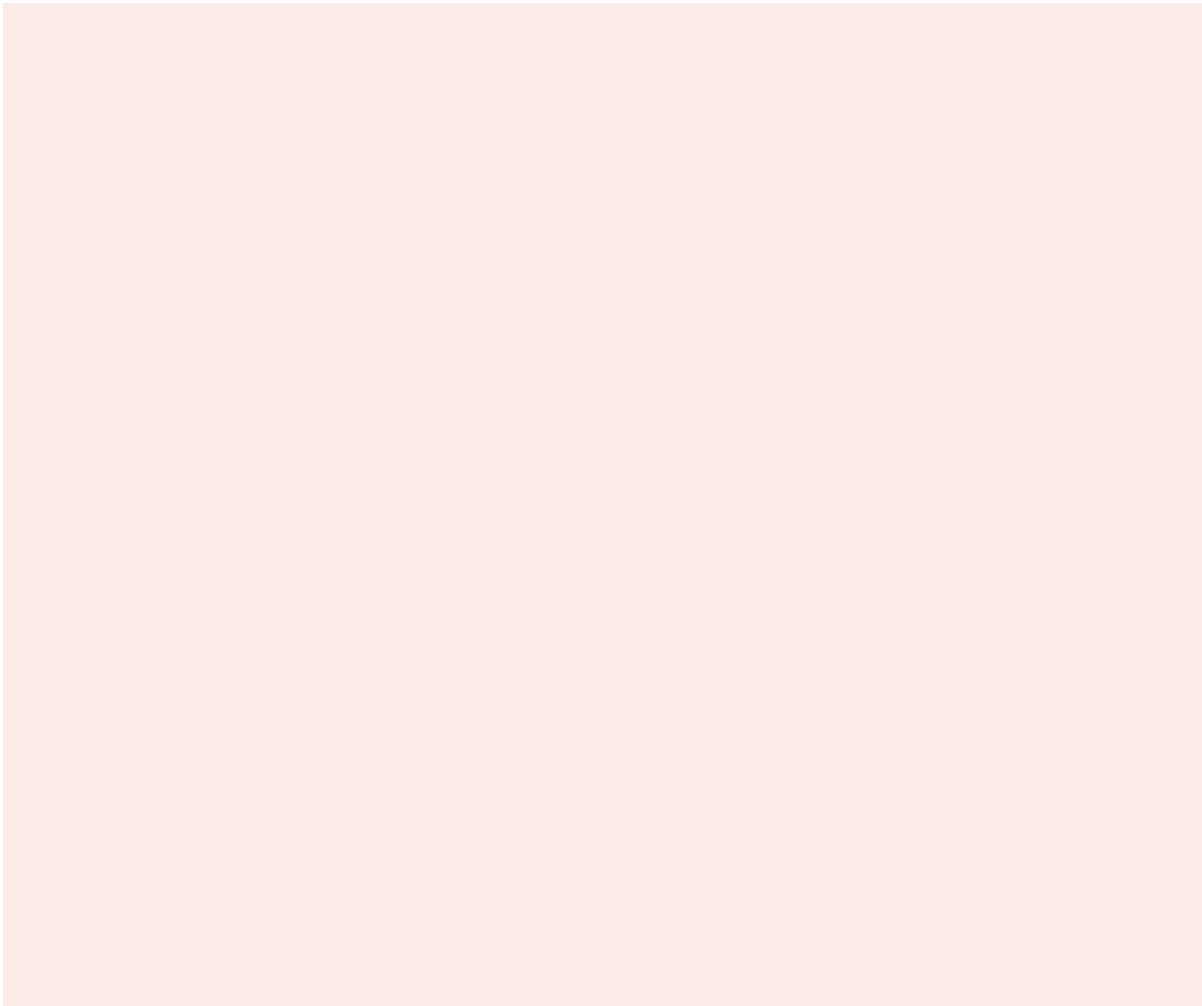


## Tier 2/3 Scenario #1 (Elementary)

### Initial Information

A second-grade teacher is concerned about her student, Taylor. Taylor has historically been a well-behaved student who does well in school. However, over the past several weeks, Taylor's behavior has changed. The teacher reported they are "angry, defiant, and increasingly aggressive" toward her and peers. She has also seen Taylor crying several times, and they have fallen asleep at their desk three times in the past two weeks. Taylor's academic functioning has also decreased. They are not engaging in class, often appears "spaced out," and are not completing work. The teacher is very concerned about the sudden changes in behavior.

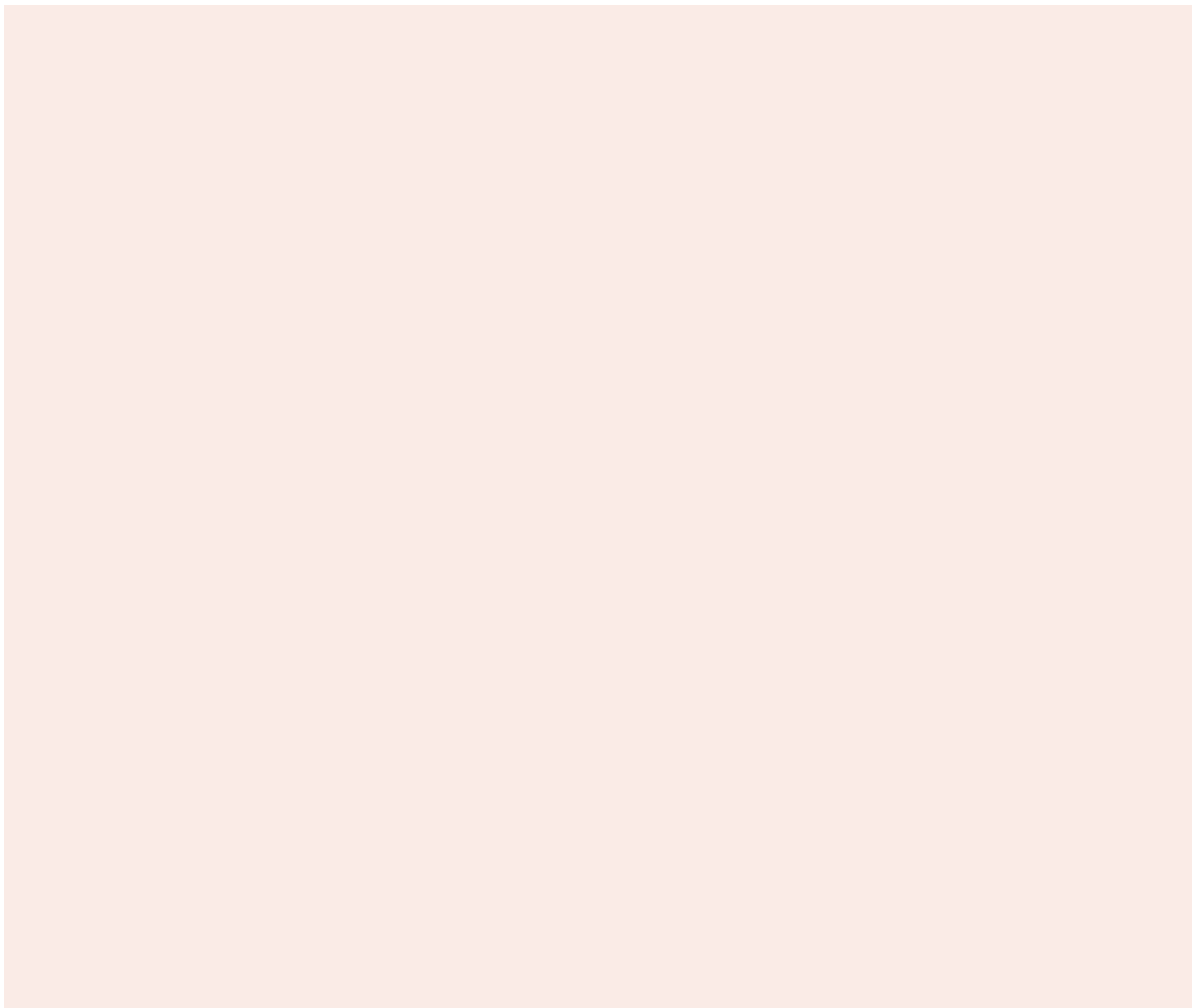
- *What additional data or information is needed to determine next steps?*
- *Who would need to be part of the team at this point?*
- *What immediate steps can be taken to support Taylor in the classroom?*



## Step 2

The school social worker spoke with Taylor's mother and discovered that things are not going well at home. Taylor has witnessed their father getting drunk and being verbally and physically aggressive with their mother several times, starting about a month ago. It reportedly came to a head two weeks ago, and Taylor and their mother left. They are currently living in a shelter. Taylor's mother was tearful as she explained that she is trying to do everything she can to keep Taylor safe and provide what they need, but she is struggling to access all they need as her husband has complete control of the family finances. She has noticed Taylor becoming more withdrawn.

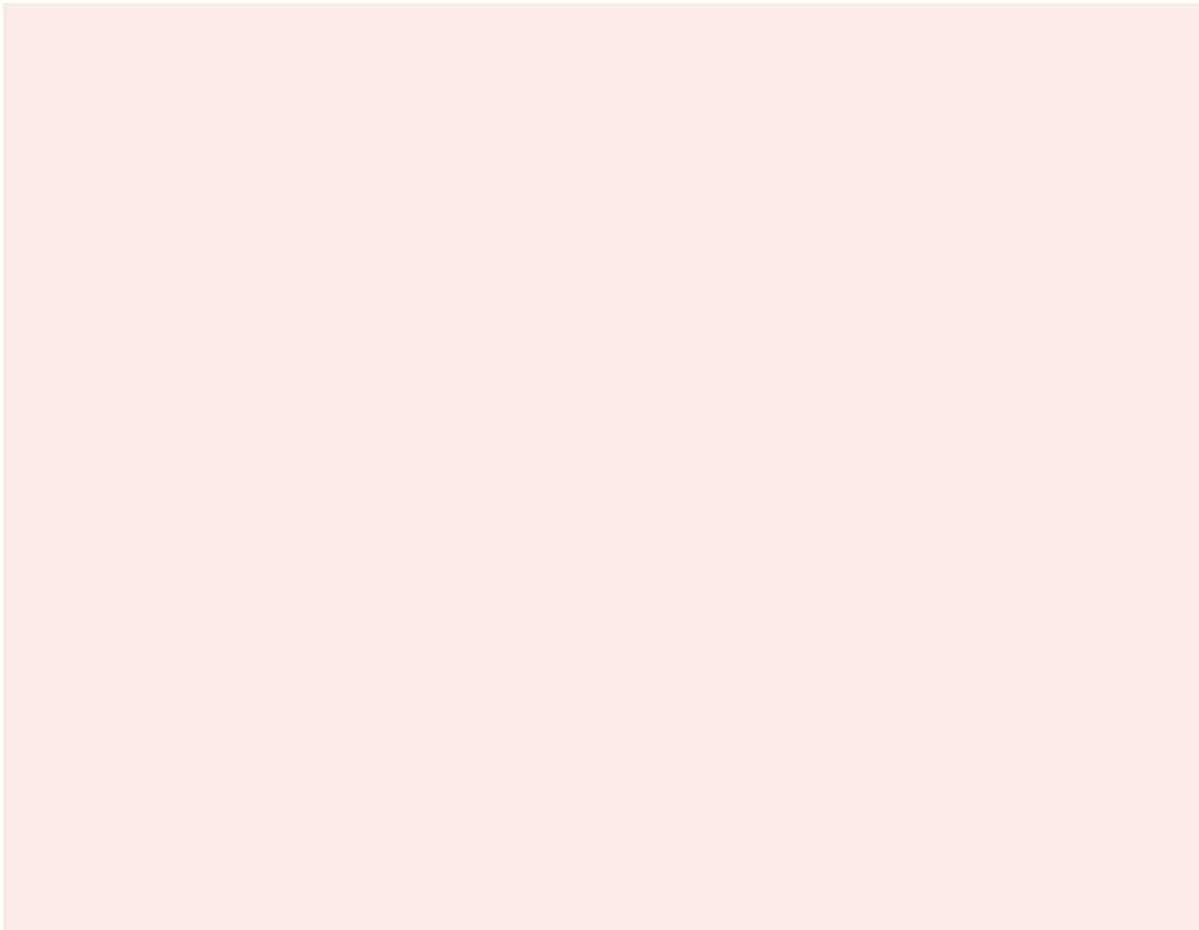
- *What mental health programming or intervention would you put in place to address Taylor's needs?*
- *Will this be enough or are outside resources needed?*
- *Who would need to be part of the team at this point?*



### Step 3

The school social worker provided a list of resources for Taylor's mother, linking them with a local organization for victims of domestic violence. They are now living in an apartment and have access to needed resources. Taylor has also started seeing a community-based psychologist on a bi-weekly basis. At school, you have implemented CI/CO with the school counselor with the goal of building relationships and providing support for Taylor. Taylor also has the ability to request breaks when needed during the day. The teacher is also putting effort into providing choices, behavior specific praise, and maintaining the classroom routines. Taylor has stopped falling asleep in class and behaviors have been slowly returning to "normal."

- *What would you change in the current intervention (i.e., CI/CO), if anything, to meet Taylor's needs? What are your next steps?*
- *Would you want to speak with Taylor's psychologist? What protocols do you have in place to do so?*
- *What additional information would the team need?*
- *Who would need to be part of the team at this point?*



## Step 4

After several months of implementing CI/CO, Taylor's behavior has returned to normal. Taylor is happy and engaged in class and with peers. Taylor is also completing work and paying attention in class. However, their academic scores are lower than expected. The teacher is concerned that Taylor missed important skills that the current lessons are building from. Curriculum based assessment place Taylor at a skill deficit for specific areas that were taught several months ago.

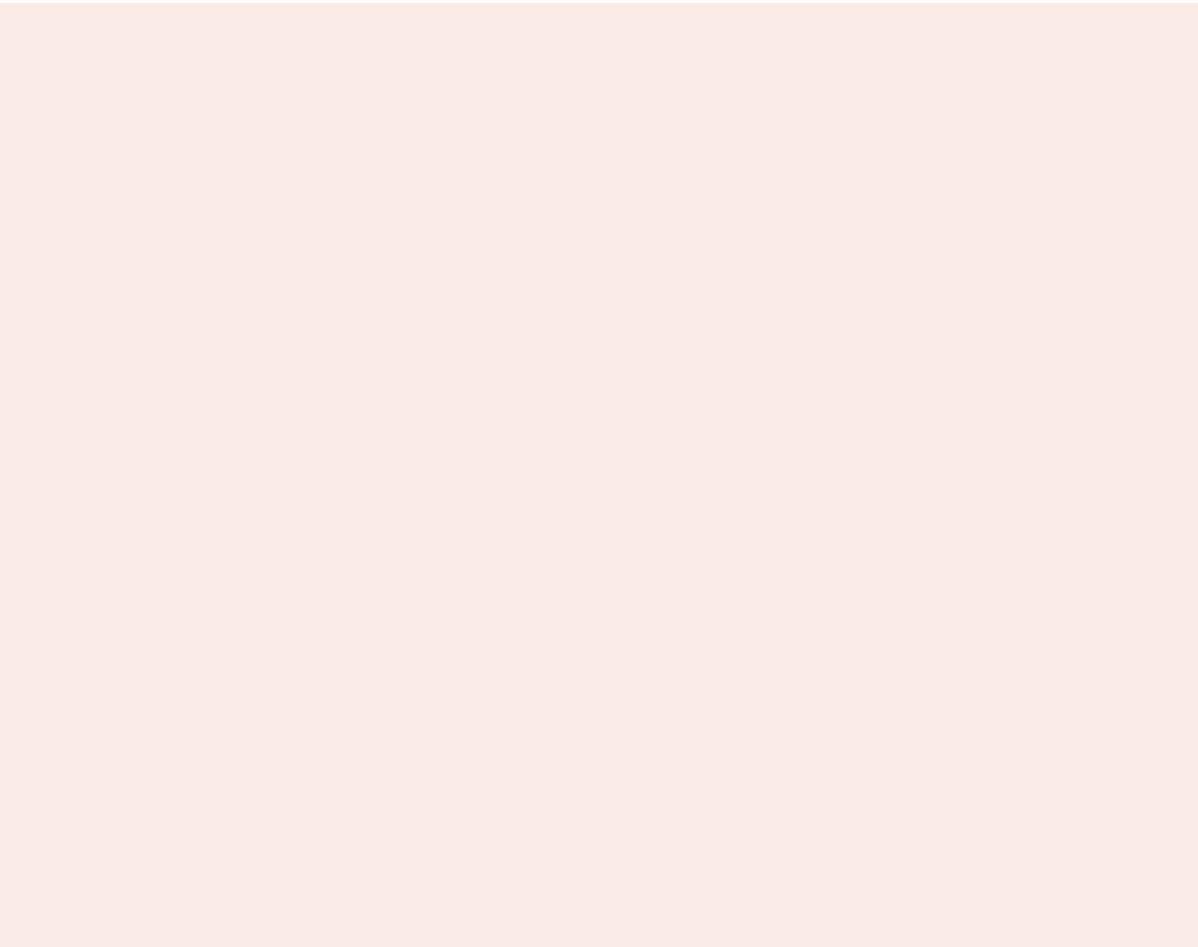
- *What would you change in the current intervention (i.e., CI/CO), if anything, to meet Taylor's needs?*
- *How will you know when to start fading services for Taylor? Bonus question: Where might you start in fading services if indicated?*
- *Who would need to be part of the team at this point?*
- *Are your mental health supports able to communicate with the team/individuals who would be monitoring academic progress and/or interventions?*



## Take-aways

The goal of this scenario is to problem-solve a specific case. It demonstrates the importance of determining what students are going through outside of school that may be impacting them at school. Trauma situations can greatly impact student behavior. It also focuses on how different school teams should be able to communicate effectively. Additionally, fading services and determining the level of support needed for maintenance should be discussed.

- *Are students able to move from one tier to the other in both directions?*
- *Does this scenario help you identify any gaps or needs at your current school/district?*
- *For improved school-based mental health implementation, what would you like to:*
  - » *Keep doing?*
  - » *Stop doing?*
  - » *Do differently?*
  - » *Start doing?*
- *What is your biggest take-away from this scenario?*





## Comprehensive School Mental Health Case Examples

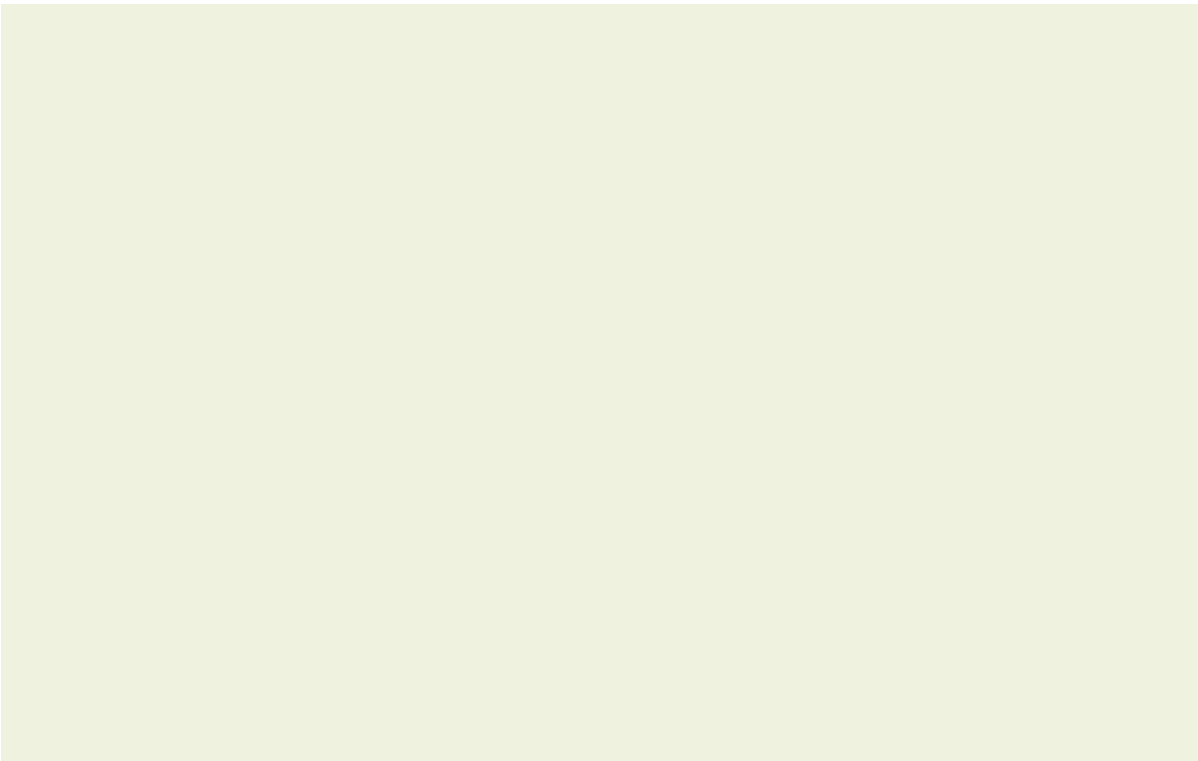
# Tier 2/3 Scenario #2 (Middle)

### Initial Information

A beloved teacher at your middle school was in a car accident that occurred within view of the bus line at the end of a school day two weeks ago. The teacher was injured and is currently in the hospital being treated for multiple broken bones. She is stable, but will be unable to return to school for several more weeks.

A school-based clinician has noticed that many students who witnessed the accident and the following medical response are being referred to her for concerns related to post traumatic stress, including persistently talking about the accident, refusing to ride the bus, withdrawal, trouble paying attention in class, and engaging in more behavioral outbursts. So far, 10 students have been referred for significant changes in behavior.

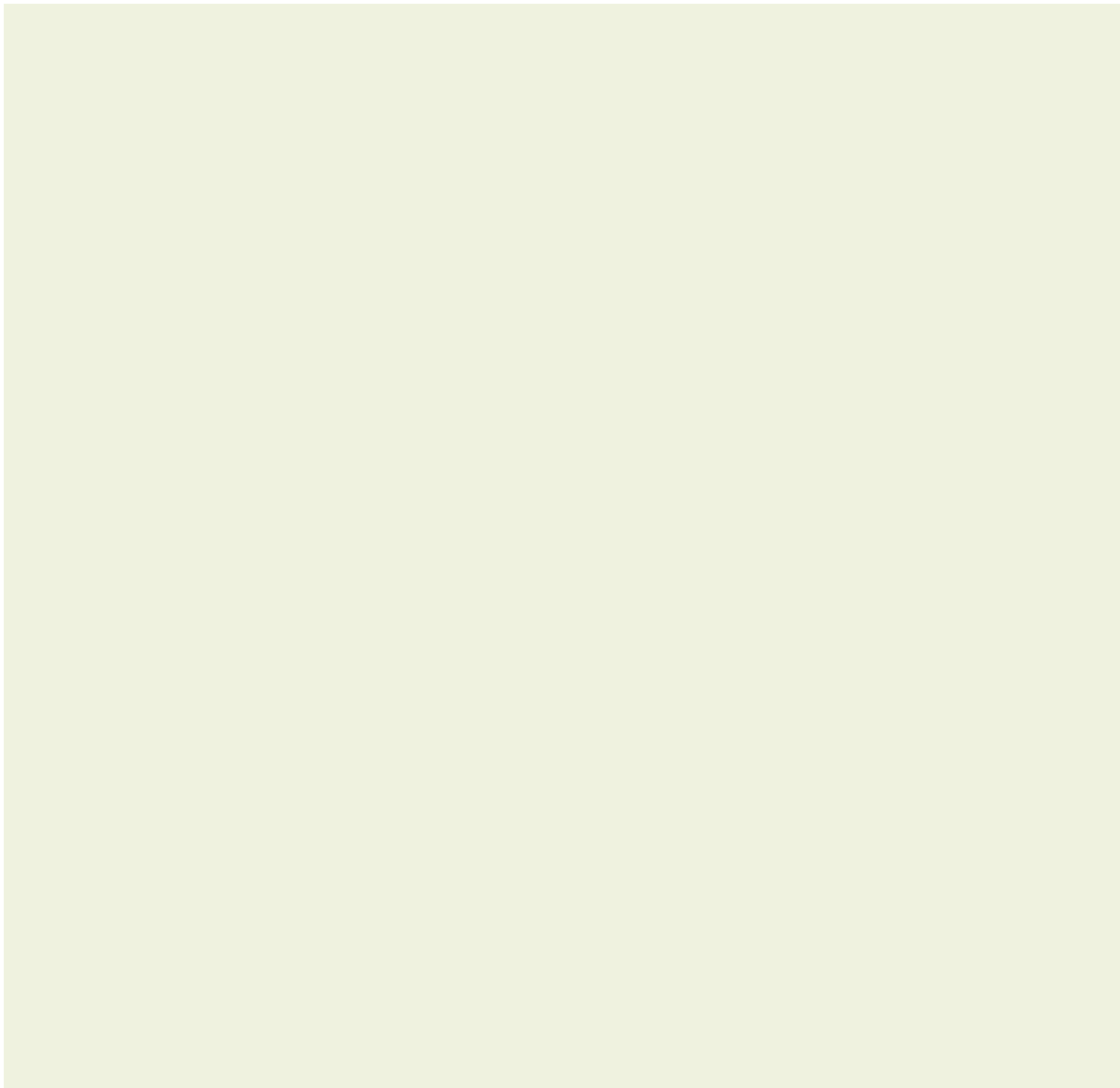
- *What mental health programming or intervention would you put in place to address the needs of these students?*
- *What additional data or information is needed to determine next steps*
- *Who would need to be part of the team at this point?*
- *How does your school's current crisis response plan address a situation like this?*
- *What would be a poor response to this scenario?*



## Step 2

The school-based clinician started a group intervention for the 10 students identified as needing supports. She has chosen to implement the Cognitive Behavioral Intervention for Trauma in School (CBITS) program which is designed for students in grades 5-12 to reduce symptoms of posttraumatic stress disorder (PTSD), depression, and behavioral problems, as well as to improve functioning, grades and attendance, peer and parent support, and coping skills.

- *How will you determine if the group is “working?”*
- *What data will you need to collect or track for progress monitoring?*
- *Who would need to be part of the team at this point?*



### Step 3

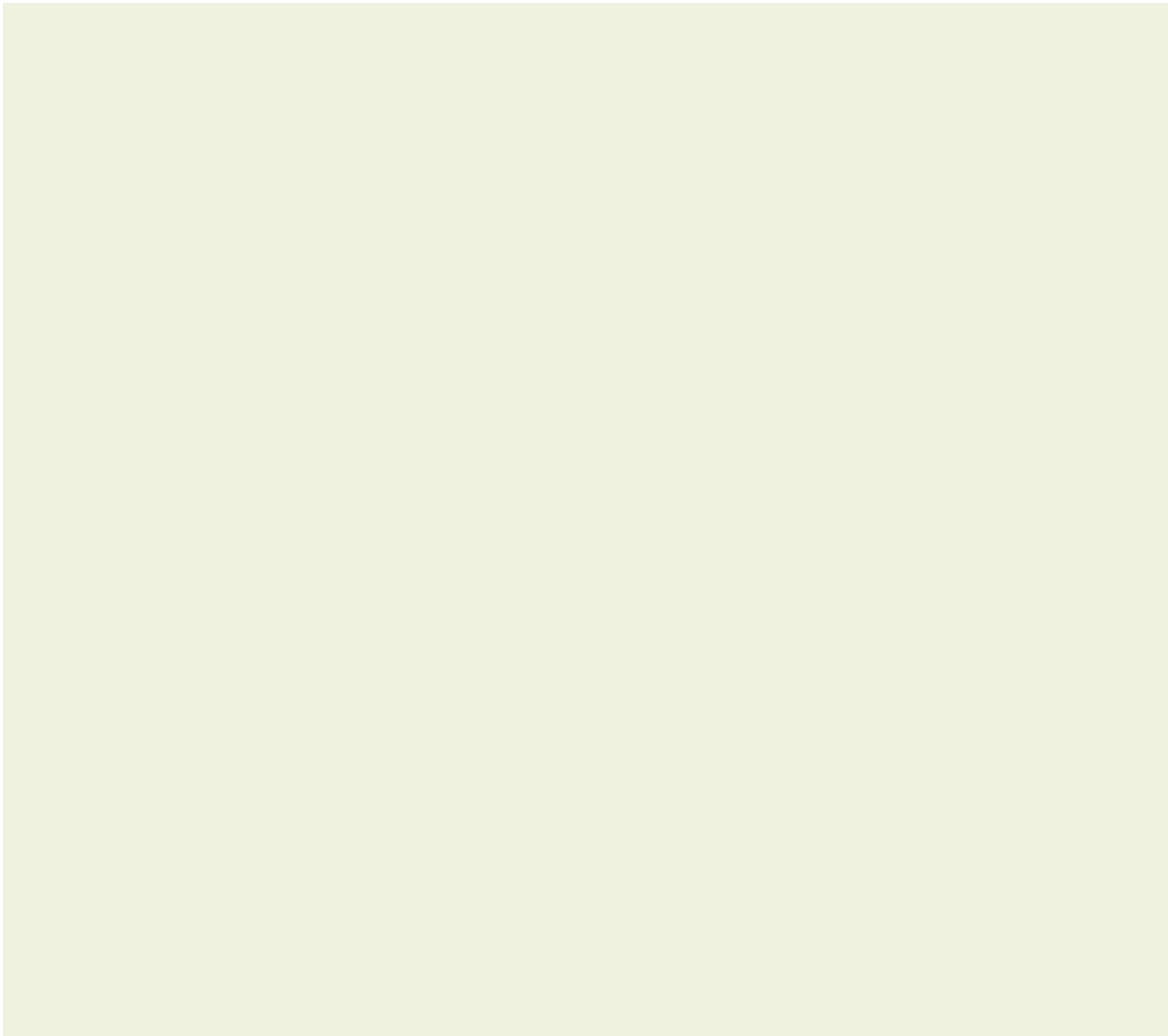
The school-based clinician is half-way through the 10 group sessions outlined in the CBITS protocol. The majority of the students are responding well to the intervention. However, at the student intervention team (SIT) meeting yesterday, grade-level teachers expressed significant concerns regarding Noah, one of the students in the CBITS group. His grandmother died in the last month, and teachers reported an escalation in aggressive behavior and noted concerns about negative self-talk and hopelessness about the future. Noah has also missed his last 3 basketball practices. The clinician noticed that in the last two group sessions, Noah has avoided speaking and stares blankly ahead.

- *What would you do, if anything, to meet Noah's needs?*
- *What additional information would the team need?*
- *Who would need to be part of the team at this point?*

## Step 4

The school-based clinician chose to move Noah to individual sessions to address his needs. He has been meeting his treatment goals, but needs more skill building. The 10-session CBITS protocol has been completed with the other 9 students. All students have demonstrated improvement in target goals. Six of the students are meeting treatment goals and demonstrating generalization of skills. Teachers and data indicate they are no longer at risk. However, the other 3 students need more practice in skill building and generalization.

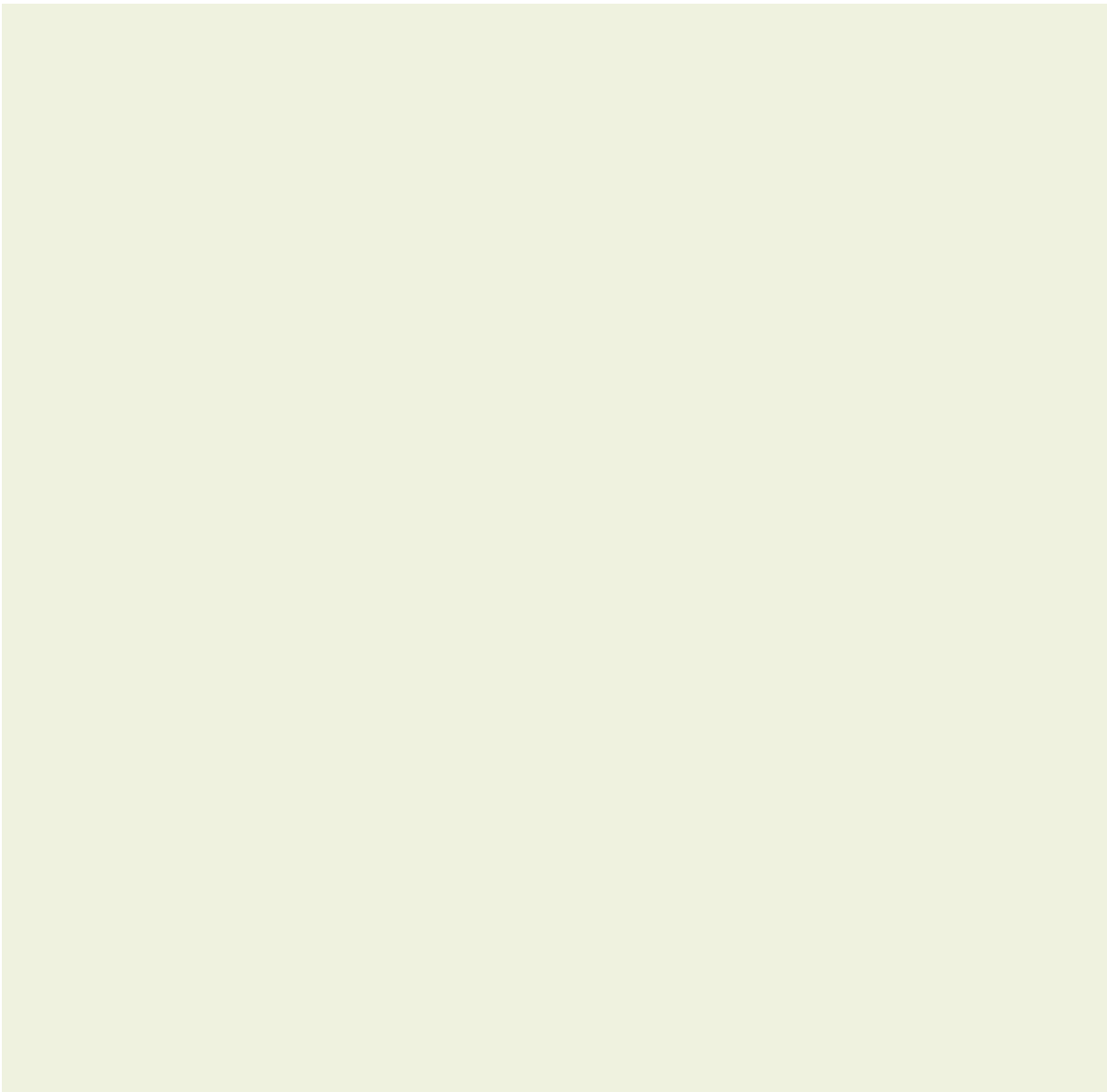
- *What is the course of action for the students who have completed the CBITS program?*
- *Would you do something different for the 3 students who data indicate are still at risk?*
- *What would the course of action be for Noah?*
- *Who would need to be part of the team at this point?*



## Take-aways

The goal of this scenario is to demonstrate how students can flow through the different tiers of service based on data and identified need. Think about your current T2/3 supports.

- *Does this scenario help you identify any gaps or needs at your current school/district?*
- *For improved school-based mental health implementation, what would you like to:*
  - » *Keep doing?*
  - » *Stop doing?*
  - » *Do differently?*
  - » *Start doing?*
- *What is your biggest take-away from this scenario?*



## Comprehensive School Mental Health Case Examples

# Tier 2/3 Scenario #3 (High)

### Initial Information

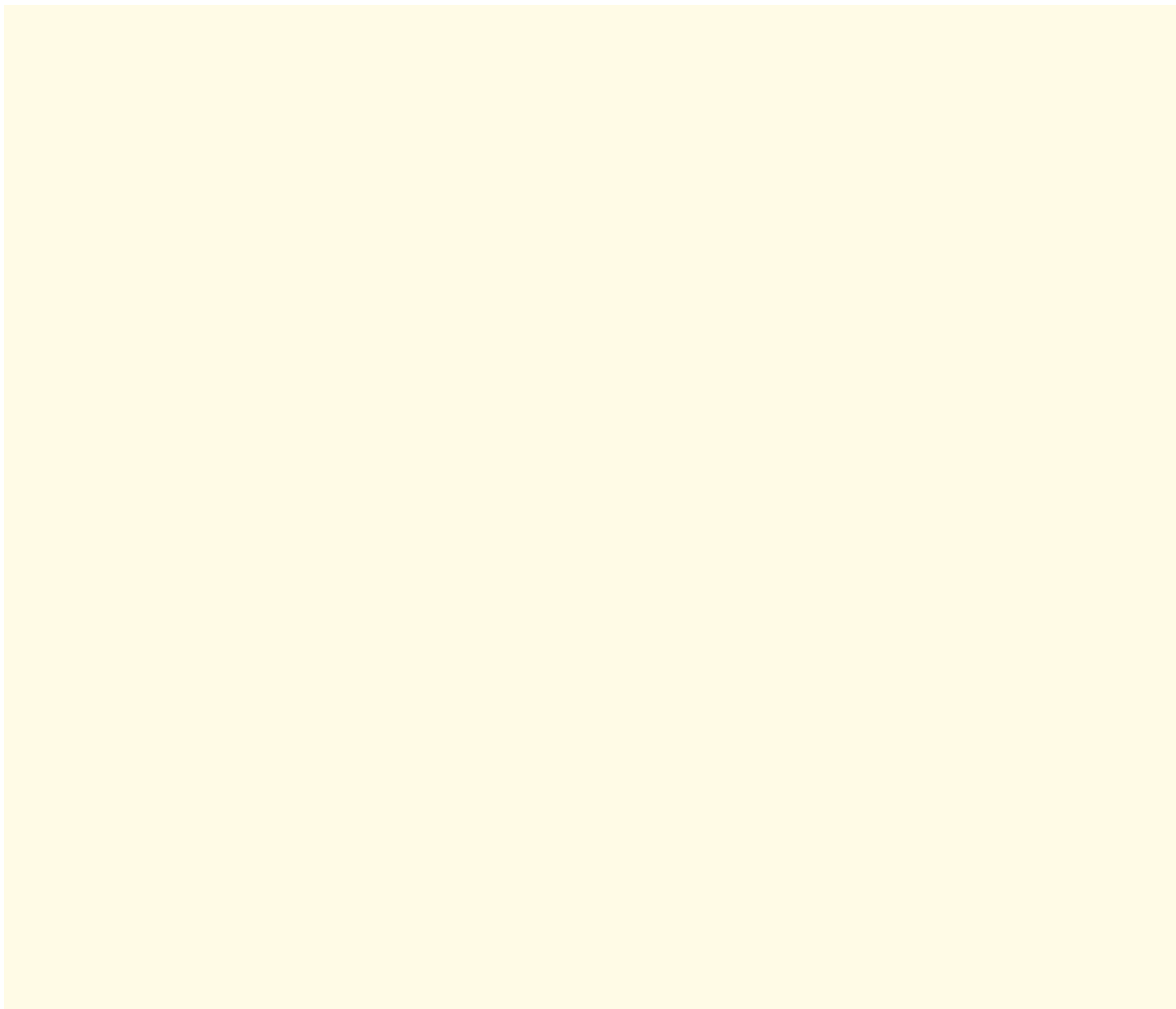
Chloe, a 17-year-old junior, confided in her Art teacher that she needs help. She said she “has so much anxiety about everything every day” that she feels “frozen” and unable to do anything. She reported she sits in her car in the school parking lot for 20 minutes “just to feel like she can walk in,” and a friend has started to walk into school with her to provide some accountability. She said she is missing a lot of school, and it is “hard to go back to class after missing” because all she can think about is how her peers and teachers think she is “lazy and dumb.”

- *What additional data or information is needed to determine next steps?*
- *Who would need to be part of the team at this point?*
- *What mental health programming or intervention would you put in place to address Chloe’s needs?*
- *How is your school/district equipped to handle self-referrals?*

## Step 2

The Art teacher completed the school-wide referral form and it was brought to the next student intervention team (SIT) meeting. The school counselor found Chloe has had 6 unexcused absences in the first month of the semester. She also has a number of tardies. Chloe's teachers report she does fine academically (grades are typically As and Bs), but she has a lot of missing work. Chloe is on the dance team at school, and her coach reported that although she shows up religiously for practices, she is often sick before competitions. She complains of headaches, stomachaches, and difficulty breathing. The team decided to implement a check-in/check-out (CI/CO) ODR protocol with Chloe using her homeroom teacher to promote attendance and homework accountability. Additionally, the school-based provider will meet with her individually weekly to implement brief CBT for skill-building.

- *How will you determine if the intervention (i.e., CI/CO, brief CBT) is “working?”*
- *What data will you need to collect or track for progress monitoring?*
- *Who would need to be part of the team at this point?*



### Step 3

Chloe has been attending her sessions with the school-based provider and is demonstrating skill development and an understanding of how anxiety impacts her. However, she is consistently missing her check-ins with her homeroom teacher and continues to miss school/come in late regularly. Further, her teachers continue to report numerous missing assignments. When asked, Chloe said she does not feel comfortable talking with her homeroom teacher because she's "the worst." She also indicated she almost always does the work but can't make herself turn it in until it is "perfect." She does not like asking for help because she feels she should already know the answer.

- *What would you change in the current intervention (i.e., CI/CO, brief CBT), if anything, to meet Chloe's needs?*
- *What additional information would the team need?*
- *Who would need to be part of the team at this point?*



## Step 4

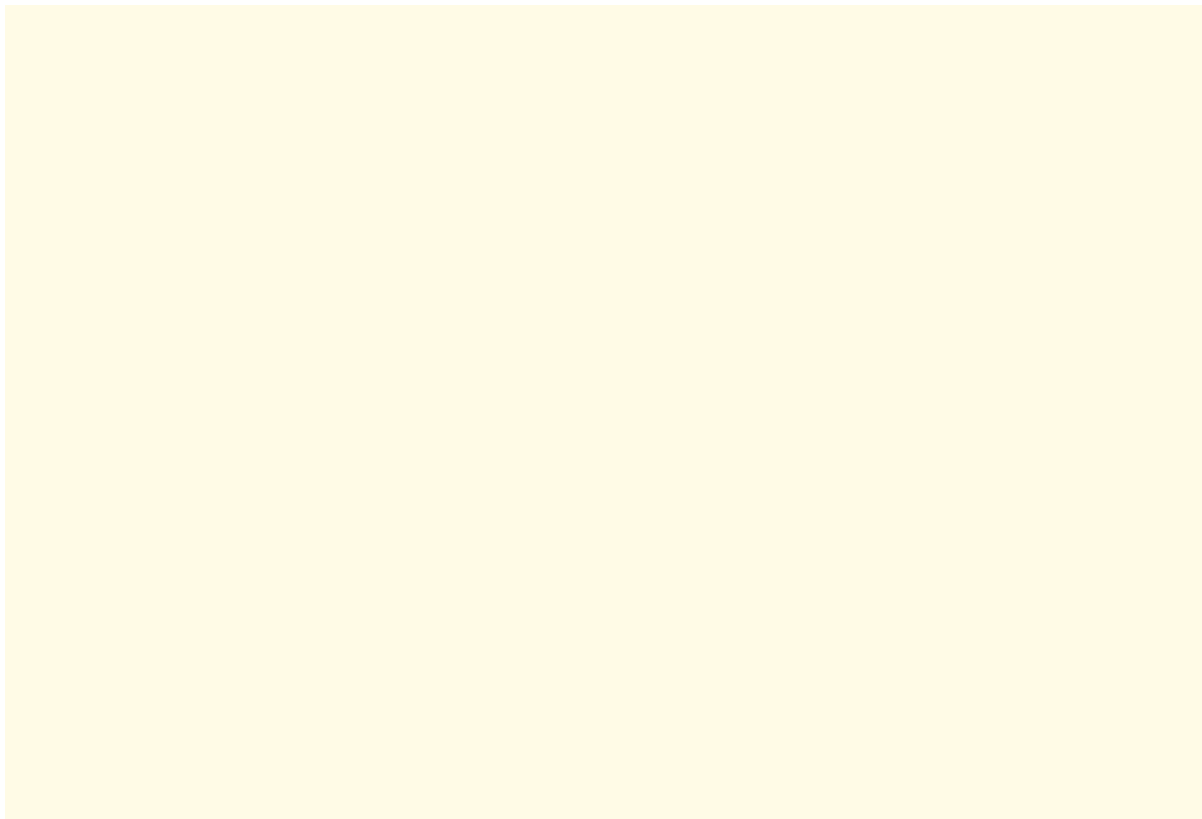
Once Chloe's contact for CI/CO was changed to her Art teacher and she was paired with a friend in study hall to provide tutoring and accountability (per her requests), Chloe began to attend school with much more regularity. She reported she "loves starting her day in the Art room" and noted she feels much more comfortable asking for help from her friend. She is also gaining confidence in the classroom. Her dance coach reports she has attended the last three dance competitions and she observes Chloe taking deep breathes and using grounding skills prior to competing. All treatment goals are being met at this point.

- *What would you change in the current intervention (i.e., CI/CO, brief CBT, change of study hall), if anything, to meet Chloe's needs?*
- *How will you determine if the intervention is "working?"*
- *What data will you need to collect or track for progress monitoring?*
- *How will you know when to start fading services for Chloe? Bonus question: where might you start in fading services if indicated?*
- *Who would need to be part of the team at this point?*

## Take-aways

The goal of this scenario is to problem-solve a specific case. It demonstrates the importance of obtaining student buy-in and feedback regarding interventions put in place. Additionally, fading services and determining the level of support needed for maintenance should be discussed.

- *Does this scenario help you identify any gaps or needs at your current school/district?*
- *For improved school-based mental health implementation, what would you like to:*
  - » *Keep doing?*
  - » *Stop doing?*
  - » *Do differently?*
  - » *Start doing?*
- *What is your biggest take-away from this scenario?*



Authors: West, H., Franta, E., Christiansen, J., Young, K., Zivny, S., and Clarke, B.