



## WSCC Emotional Well-Being Learning Collaborative

May Community of Practice Call Using Data to Drive Student Well-Being Work

CDC National Initiative to Advance Health Equity in K-12 Education by Preventing Chronic Disease and Promoting Healthy Behaviors

Priority 2: Emotional Well-Being

National Center for School Mental Health & Collaborative for Academic, Social, and Emotional Learning





## Welcome!

Please change your Zoom Name to: STATE-Name, i.e. MD-Zahra

Once you're done, please share your favorite game to play as a kid.









## Feedback Survey

Please open the feedback survey link. We will ask you to fill this out at the end of the call.

- Link is available in the chat or;
- Scan the QR Code; or
- Type in bit.ly/wscclc2







#### Meme Check-In...

On a scale of memes, how are you feeling?



























Check-in

Using Data to Drive Student Well-Being Work

**Breakout Groups** 

**Next Steps** 

Feedback Survey









# Using Data to Drive Student Well-Being Work









# "If you can't measure it, you can't improve it."

Lord Kelvin





## Using Data to Drive Student Well-Being Work

Understanding SEL Competency Assessments, Mental Health Screeners and Additional Data Collection Strategies

- What do these tools offer? How are they different?
- What are best practices for leveraging these tools to drive well-being in schools?

## What are you measuring and why? Understanding Mental Health Screeners & SEL Competency Assessments

**SEL Competency Assessment:** Evaluates the nature, quality, or ability of students' SEL competencies, specifically interpersonal and intrapersonal knowledge, skills attitudes and mindsets to identify a level of strength and to guide instructional practices with a continuous improvement lens (McKown 2020; CASEL Assessment Workgroup 2018)

Mental Health Screening: A process for identifying students at risk of developing mental and behavioral health challenges (Twyford, et al., 2010) as well as an evidence-based and proactive method for monitoring universal (tier 1) supports (Romer et al, 2020).







## Poll

 Please share your experience with using data to drive student well-being work.



### Differences between Tier 1 and Tier 2/3 Data

#### **SEL Competency Assessments Mental Health Screeners** Generate new and useful information to Generate an aggregate understanding of the better serve students in interventions impact of SEL to continuously improve that prevent or mitigate mental health classroom, schoolwide, districtwide and equitychallenges and promote resilience driven SEL efforts. These tools do not have an individual use. Improve access to mental health Measure how SEL implementation is impacting instruction (formative assessment) supports Identify students at risk for future Examine the effectiveness of districtwide, schoolwide and classroom-based SEL efforts

Advance equity by revealing disparities in student needs' being met or not met by schools/districts

(summative assessment)

For adults: impacts professional learning, adult wellbeing efforts and changes to environment

- negative outcomes or students who may need monitoring or intervention
- Identify personal strengths and wellness as well as risk factors
- Measure cumulative impact of district mental health supports and services





### **SEL Data Collection Efforts**

- Focus on the whole classroom, grade and school community not individual student responses/needs/strengths
  - Individual student data is not reported or shared!
- Help us understand how well our tier 1 SEL efforts are supporting student competency development and the schoolwide climate and culture for SEL

## What do SEL Competency Assessments Measure? Example questions

#### **Self-Management**

- How often do you come to class prepared?
- How often do you pay attention and resist distractions?
- Once you get upset, how often can you get yourself to relax?

#### **Social Awareness**

- How carefully do you listen to other people's points of view?
- How well do you get along with students who are different from you

## **Belonging & Supportive Relationships**

- How well do people at your school understand you as a person?
- Do you have a teacher or other adult from school who you can count on to help you, no matter what?

### **Types of SEL Data**

## Commonly Used Sources of Outcome Data

- School or classroom climate surveys
- Student engagement, academic growth or behavior data
- SEL competency assessments

## Commonly Used Sources of Implementation Data

- Observed SEL practices
- Implementation fidelity tools/assessments from an evidence-based program
- Family and community partner surveys on SEL implementation
- Student feedback on SEL implementation (surveys, focus groups)



## **Identifying Data to Measure SEL Progress**

Goal Area	Examples of Data to Use/Collect to Track Progress		
Improved staff climate and relationships	<ul> <li>Staff responses on a school climate survey</li> <li>Staff individual or group interviews</li> <li>Meeting agendas documenting use of SEL 3 Signature Practices (measures implementation)</li> <li>Valid/reliable assessment of student Social Emotional competence</li> <li>Related data such as student responses on a school climate survey or reduced office referrals</li> <li>Interview students about the consistency and effectiveness of SEL practices in their classrooms (measures implementation)</li> </ul>		
Student growth in social and emotional competencies			
Effective implementation of a new SEL strategy or program	<ul> <li>Notes from group discussion at grade level meeting</li> <li>Student feedback and/or shifts in behavior/skills</li> <li>Observation protocol</li> <li>Follow-up survey after initial professional learning (measures implementation)</li> </ul>		





What questions do you have about using data to inform Tier 1 efforts?









## Mental Health Screening Best Practices





## Why screen for MH concerns?

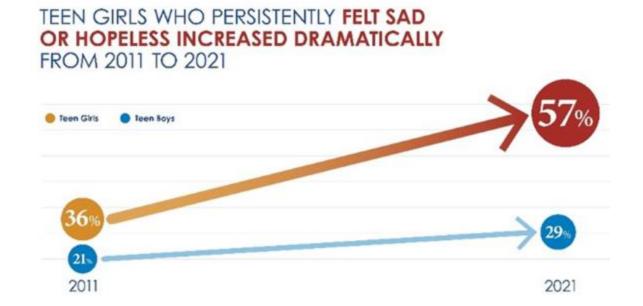
- Support a multi-tiered system of supports (MTSS).
- Inform prevention and early intervention strategies.
- Identify concerns specific to grades, classrooms, or educators.
- Identify students with the highest well-being.
- Identify students at risk for mental illness or harm to self or others.
- Improve access to mental health supports.
- Economically sound.

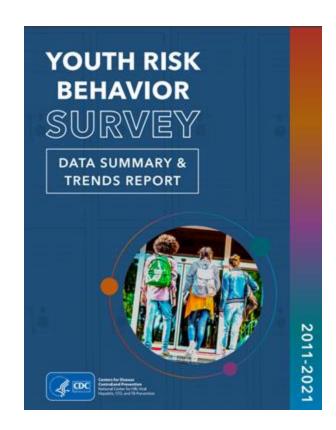




## Why screen for mental health concerns?

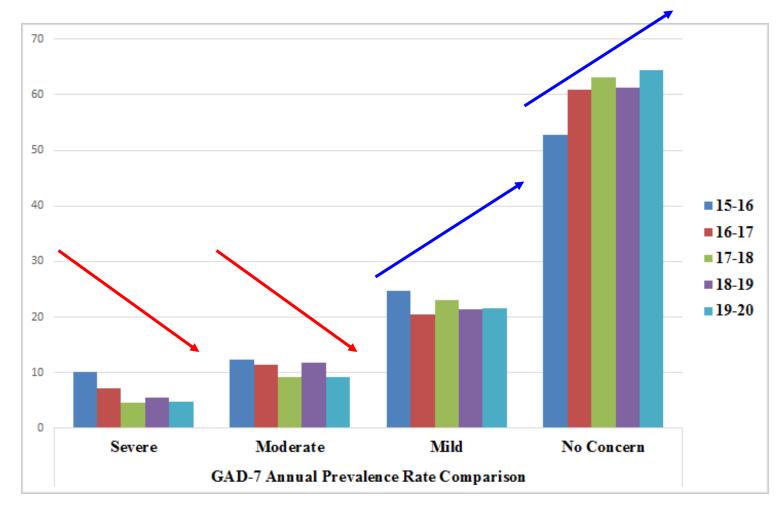
- Elevated Student Mental Health Concerns
- Identify Students with Highest Risk Mental Health Concerns
- Resource Allocation





## How will this achieve the overarching objective? Prevention and intervention...

- Early identification through screening = PREVENTION.
- Proactive, preventative services = Sensitivity to emerging concerns. We INTERVENE before crisis and diagnosis.
- Providing all students with the knowledge and skills they need to manage stress, seek support, resolve conflict, and navigate their social environment = PREVENTION.



## Evolving Practice: Seeking Innovative Strategies

#### **Initial Phase of Implementation**

- Active Consent
- Paper and pencil screening
- Single-student or small group screening
- Administration facilitated by SMH staff

#### **Improved Practices**

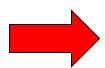


- Web-based screening
- Grade-level or school-wide screening
- Administration through advisory and tech courses











## MASMHC Universal Mental Health Screening Resource Guide &

MASMHC Universal Mental Health Screening Implementation Guide





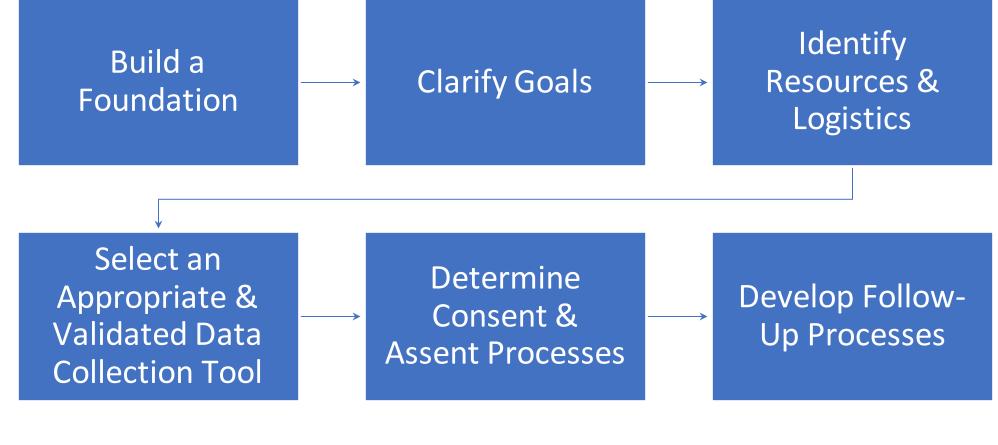








## Action Steps for Developing a Data Collection Plan for Understanding Student Well-Being



### Quality Indicator



To what extent did your district/school use best practices for mental health screening, planning, and implementation?

### **Best Practices:**

- Include students and families in the screening process.
- Use a selection process for a screening tool that considers reliability, feasibility, cost, and fit with the goals of screening.
- Share information about screening in multiple formats.
- Inform students and families about screening procedures.
- Roll out initial screening efforts gradually.
- Respond to risk of harm to self and others immediately.
- Have a process to assess screening results to triage students to appropriate services.





### Shifting the Lens: Equity-focused Efforts

- Data collection through a systems lens
- Identified strengths and stressors
- Solutions integrated into a multi-tiered system of support
- Promote Positive Mental Health Outcomes for Minoritized Youth

### Consider Cultural Factors from the start

- Complex stress related to poverty, immigration, language barriers
- Cultural beliefs about mental health and how concerns should be addressed
- Marginalized groups
- Strengths-based data collection efforts more acceptable across cultural groups



## A Strengths-Based Approach



- Focuses on identifying resilience factors (e.g., coping skills, social support, positive thinking)
- Aligns strengths with identified challenges
- Builds on existing student, family & community assets and resources
- Fosters cultural responsiveness







## University of California Santa Barbara

#### Project Covitality

(3)

HOME The Covitality Advantage SEHS Surveys

Wellness Screening Research Resources

Presentations IES Grant UC Equity Mental Health

CSWI SMHC Research Partners About

#### Wellness Screening and Monitoring



## SCHOOL SCHOOL



#### Screening

Universal screening supports prevention and early intervention practices in

## Complete Mental Wellness

"Free of psychopathology

#### Resources

UCSB Covitality Follow-up
Student Interview Form



## Select tool(s)

- Trauma-informed
- Culturally responsive
  - Tool normed for student population (age, language, racial/ethnic identity, developmental level)
- Get feedback from stakeholders, including youth!









## Where to look for validated data collection tools

- SHAPE Screening and Assessment Library
  - Sample- PSC-17
- Mental Health, Social-Emotional, and Behavioral Screening and Evaluation Compendium
- Brann et al. (2022). Usability of Social, Emotional, and Behavioral Assessments in Schools: A Systematic Review From 2009 to 2019
- RAND Education Assessment Finder



#### Pediatric Symptom Checklist (PSC)

Developers: M. Jellinek, J. Murphy, J. Robinson, A. Feins, S. Lamb, & T. Fenton

#### Overview

The Pediatric Symptom Checklist (PSC) is a screening tool intended to identify a wide range of psychosocial concerns. Full (35 item) and abbreviated (17 items) versions were developed for youth (Y-PSC) and caregiver (PSC) respondents. A version for caregivers is also available in pictorials (PPSC; picture options). Originally utilized in primary care, the PSC's application has also been expanded to school and community health and behavioral health settings.

#### Focus Area

Anxiety Depression/Mood Disruptive Behavior Global Functioning Hyperactivity Inattention

Reporter Student Caregiver

#### Subscales

Psychosocial impairment

Attentional impairment

- · Internalizing symptom impairment
- Externalizing symptom impairment

PSC-17 only

#### Response Options

Never Sometimes Often

#### Languages

English Spanish Other Purpose

Screening/Initial Evaluation Progress Monitoring

#### Versions

Y-PSC-17, Student, 17 items (for ages 11-18) Y-PSC, Student, 35 items (for ages 11-18) PSC, Caregiver, 35 items (for ages 3-16) PPSC, Caregiver, 35 items (for ages 3-16) PSC-17, Caregiver, 17 items (for ages 6-16)

#### Sample Items

- · Seem to be having less fun
- · Fidgety, unable to sit still
- Fight with other children
- · Worry a lot

#### **Estimated Completion Time**

Less than five minutes (17 items) Five minutes (35 items)

Cost

Access the measures: PSC-35 (caregiver) PSC-17(caregiver) PSC-35 (caregiver) Y-PSC-35 Y-PSC-17

## Tips on Addressing Barriers

Identified need will exceed our capacity

Set triaging data rules in advance

Review existing resources/capacity

Review surveillance data

Start small then adapt and scale up

Pushback and barriers

Involve multiple stakeholders in planning

Use existing community and parent forums

Start by screening for resilience and strengths

Start small then adapt and scale up

Obtaining consent from parents will exceed our capacity

Use passive consent and opt-out procedures

Share a consistent message in multiple formats

Engage parents in developing your message

Start small then adapt and scale up

Lack of consensus on what data should be collected

Obtain input on key focus areas to start with

Consider different measures by grade levels, schools, etc

Use the SHAPE Screening and Assessment Library & Rand Assessment Finder

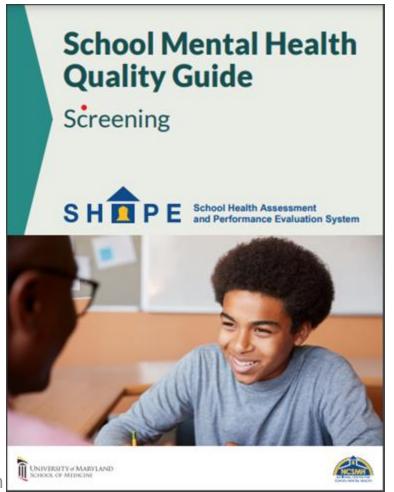
Start small then adapt and scale up







### School Mental Health Quality Guide - Screening







### Resources

- SHAPE Screening and Assessment Library
- Mental Health Screening Tools for Grades K-12
- Best Practices in Universal Social, Emotional and Behavioral Screening: An Implementation Guide 2.0
- Guidance for Trauma Screening in Schools
- Mental Health, Social Emotional, and Behavioral Screening and Evaluation Compendium
- Ready, Set, Go, Review: Screening for Behavioral Health Risk in Schools
- RAND Education Assessment Finder
- School Mental Health Quality Guide Screening
- Assessing Social Influencers of Health and Education
- <u>Screening Readiness Checklist</u>
- <u>State-Legislative-Guide-for-School-Mental-Health-1.pdf</u> (hopefulfutures.us)
- Understanding the Differences: Social and Emotional Learning (SEL) Competence Assessment and Social Emotional, and Behavioral (SEB) Screening and Assessment
- SEL Assessment to Support Effective Social Emotional Learning Practices at Scale
- MASMHC Universal Mental Health Screening Resource Guide
- MASMHC Universal Mental Health Screening Implementation Guide
- Child and Youth Resilience Measure
- Child and Youth Resilience Measure User Manual







## Breakout Group Time







## Choose Breakout Group

## Facilitated by Faculty Liaison

Data-Driven Tier 1 Efforts	Data-Driven Tier 2 & 3 Efforts	Overcoming Barriers & Resistance	Equity-Focused Data Collection Efforts
Duncan	Nancy	Jill	Tiffany

Please nominate one person in your group to briefly share out.

When prompted, join the breakout room of your choice.







## Final Session - Celebrating Your Accomplishments!

- Share your goals, accomplishments, and next steps
- Each district will be asked to share 2-3 slides (a template will be shared with you via email)







## Feedback Survey

- Please take 1–2 minutes to provide feedback on today's session!
- Click on the link in the chat OR;
- Scan the QR Code OR;
- Type in bit.ly/wscclc2









## Thank you for joining today!

Next Monthly Call: June 11, 2024

Remember to visit

e4ed.com to access our
Learning Collaborative
Resources, Monthly Call
Recordings and Slides









## WSCC Emotional Well-Being LC Communications

Contact: Dr. Zahra Ladhani: zladhani@som.umaryland.edu

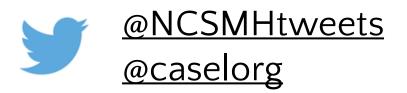
Websites: schoolmentalhealth.org; e4ed.com

casel.org

Listserv <a href="mailto:bit.ly/NCSMH\_listserv">bit.ly/NCSMH\_listserv</a>

**CASEL Newsletters:** Newsletters - CASEL

#### Social Media





@CenterforSchoolMentalHealth

@CASELorg