



# **District Student Wellbeing Services Reflection Tool**

# Overview: District Student Wellbeing Services Reflection Tool (1/2)

To help school systems assess and strengthen services and partnerships that support students' mental, physical, and emotional health.

Loss, illness, isolation, and the continued disruptions of Covid-19 have taken a heavy toll on America's K-12 students. Many school districts are struggling to meet students' needs<sup>1</sup>—and a large number of children are not receiving adequate supports.<sup>2</sup>

Districts can customize the tool to suit their needs

This tool includes a menu of exercises that districts can use to:

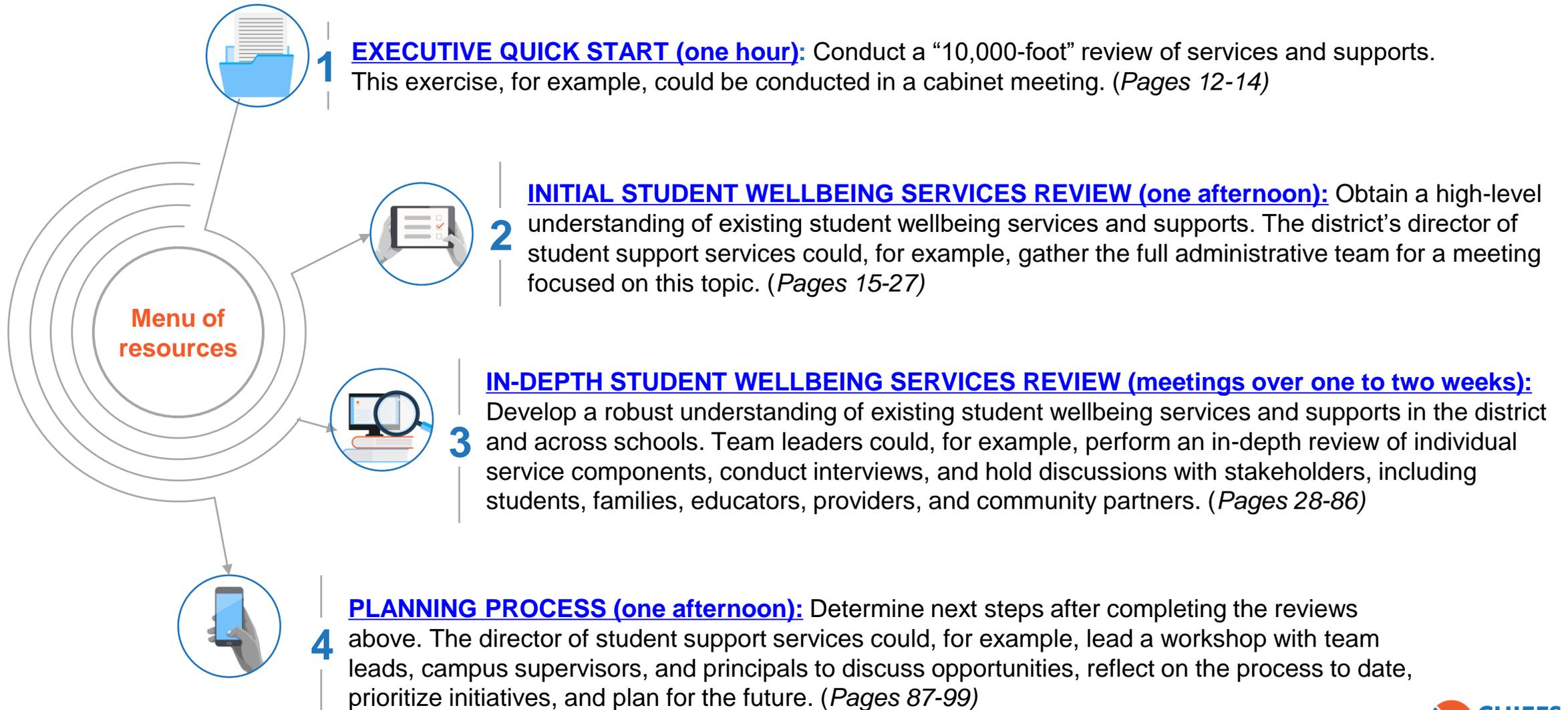
- **Understand how students can access supports** and **identify obstacles** that might prevent children from getting the help they need.
- **Determine if services are effective** and if they are widespread or are only available at certain schools.
- Pinpoint **opportunities to expand wellbeing services** using existing resources or with the addition of new resources.
- **Document existing funding** sources and find new ones.
- Set priorities and **develop plans for the future.**

The District Student Wellbeing Services Reflection Tool is grounded in the 10-point framework developed by The Coalition to Advance Future Student Success, a group of 12 leading education organizations committed to working together to reopen, recover, and rebuild schools.

1. Nationwide, schools employ an average of 9.25 counselors per 10k students (vs. recommended ratio of 40); districts staff 3.8 psychologists per 10k students (vs. recommended ratio of ~14). See [NCES \(Common Core of Data: School District Survey 2019-20\)](#)

2. 59.6% of children nationwide who experienced a major depressive episode did NOT receive treatment. See [Mental Health America \(2018\)](#)

# Overview: District Student Wellbeing Services Reflection Tool (2/2)



# Overview of document purpose



## What this document is

An LEA-focused reflection tool that encompasses student experience and student wellbeing service inputs / outcomes

Exercises to help LEAs reflect on current student wellbeing and mental health services, prioritize actions to improve student wellbeing service provision, and identify potential funding sources for new actions

Collections of example practices that have demonstrated efficacy in research settings or from use by other districts

Different communities have different needs, and different perspectives on the role of schools in filling those needs. This document is designed to cover the full range of actions a system leader *could* take. We rely on system leaders to decide what actions are most appropriate for their communities



## What this document is not

Comprehensive, definitive, or always-applicable diagnostic of best practices on what every LEA should provide to all students in all circumstances

An assertion of what schools ought to consider within their scope of responsibility in supporting their students

A validated rubric for quantifying and comparing different LEA student wellbeing services

A comprehensive, school-centered diagnostic. Tools such as The SHAPE System's School Mental Health Profile and the University of Wisconsin's School Mental Health Framework can help individual schools evaluate their screening, tiered services, system of care, and continuous improvement practices

# This tool was developed leveraging several sources of knowledge



## Federal guidance for K-12 service delivery

We drew from sources such as SAMHSA's guides to

- [Screening in schools](#)
- [Whole-child approaches to mental health](#)
- [Advancing comprehensive school mental health systems](#)
- Multi-Tiered System of Supports ([MTSS](#)) approach



## The academic literature on these services in schools

We built from work done by the [University of Wisconsin](#), [National Center for School Mental Health at the University of Maryland School of Medicine](#), the [UCLA Center for Mental Health in Schools](#), and [others](#).



## Pilots and guided input from partner SEAs and LEAs

This tool was co-created through conversations with Tennessee and Ohio's Departments of Education and school districts across Tennessee and Texas.



## Experts in psychology, education, and public health

Experts included former Substance Abuse and Mental Health Services Administration (SAMHSA) senior leadership, academics, and school administrators.

In particular, we would like to acknowledge Sharon Hoover, PhD.; Janice K. Jackson, EdD.; Bryan Johnson, EdD.; Jennifer Kitson, EdS., NCSP; Art McCoy, PhD.; Mark Weber, MBA; and Marleen Wong, PhD. for their review and input.



## Guidance on recommended practices from non-profits, think tanks, and professional associations

Best practice guides including those from

- [National Association of School Psychologists](#)
- [American School Counselor Association](#)
- [Collaborative for Academic, Social, and Emotional Learning](#)
- [The National School Climate Center](#)
- [The Trauma and Learning Policy Initiative](#)
- [Center on Positive Behavioral Interventions and Support](#)
- [commonsense.org](#)
- and [others](#)

# Districts can support student needs at schools and potentially enable supports in other settings, where relevant

## District ability to engage

## Sections of activities to address student needs

<p><b>Schools</b></p> 	<p>Equip school professionals with tools to identify and address needs</p> <hr/> <p>Provide student wellness and academic development programming</p> <hr/> <p>Create healthy school climate (admin, faculty, students, stakeholders)</p> <hr/> <p>Foster supportive friendships and peer networks</p>	<p>Districts and schools are well positioned to train staff and provide programming. They can also take steps to improve school climate and foster positive social experiences for students.</p>
<p><b>External/ Non-school</b></p> 	<p>Provide professional mental health services</p> <hr/> <p>Support use of community-based wellness and social services</p>	<p>Districts and schools can proactively identify student needs and provide resources to address (e.g., education on healthy digital life), or facilitate connection to existing resources.</p>
<p><b>Digital</b></p> 	<p>Promote safe, supportive digital environments</p>	
<p><b>Family partnerships</b></p> 	<p>Partner with families to support efforts at home</p>	

## **Instructions to the Facilitator Using This Document**

[Executive Quick Start](#)

[Initial Student Wellbeing Services Review](#)

[In-Depth Student Wellbeing Services Review](#)

[Planning Process](#)

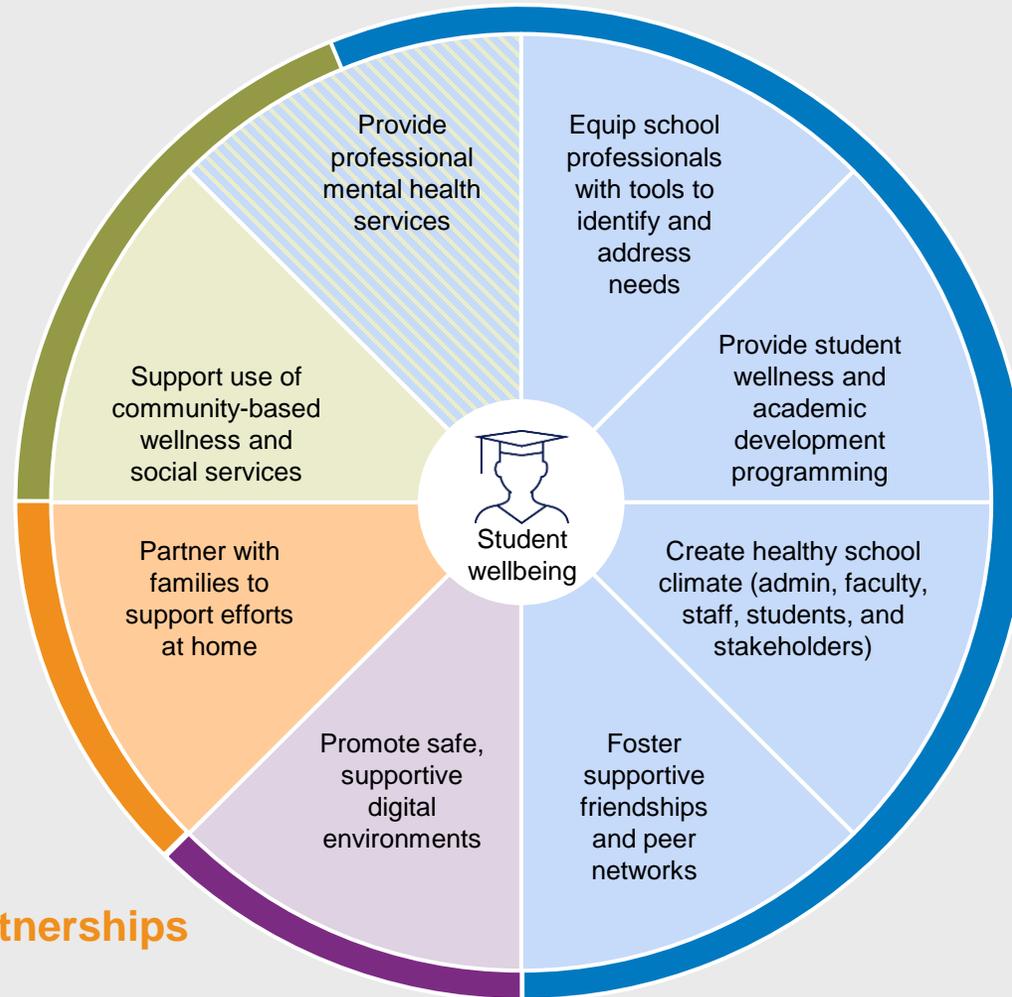
# Content

**This tool can help a district reflect on the supports it provides to foster student wellbeing across a number of components**

**External/Non-school**



**In-school**



**Family partnerships**



**Digital**

# This reflection tool includes several sections that require different levels of effort and address different district needs

	Purpose	Time to conduct	Recommended team	Why to use this
<b>Executive Quick Start</b>	Reflect on the 10,000-foot review of student wellbeing services and supports in the district and determine which components should be prioritized moving forward	An hour	Superintendent, District student wellbeing and/or mental health leads, Chief-of-Staff	<ul style="list-style-type: none"> <li>• Quickest path to a view of strengths and opportunities to do more</li> </ul>
<b>Initial Student Wellbeing Services Review</b>	<p>Obtain a quick, high-level understanding of current student wellbeing services and supports in the district</p> <p>Develop hypotheses for further investigation</p> <p>Prioritize completing the initial review for all sections within the district's scope</p>	An afternoon	District student wellbeing or mental health lead, Director-level leaders for student wellbeing and/or mental health services	<ul style="list-style-type: none"> <li>• Fast path to understanding of current situation</li> <li>• Quicker prioritization and implementation of solutions</li> </ul>
<b>In-Depth Student Wellbeing Services Review</b>	<p>Develop a robust understanding of current student wellbeing service offering in the district to inform thorough strategy setting and planning</p> <p>Consider prioritizing the components on which to focus after the quick reflection based on results</p>	Meetings over one to two weeks	<p>Student wellbeing and/or mental health leadership team, provider supervisors, campus supervisors</p> <p><i>(Also consider principals and wellness or mental health teams, community partners, families, and students)</i></p>	<ul style="list-style-type: none"> <li>• Deeper, more robust understanding of current situation</li> <li>• Deeper ideation of potential solutions from representative sources</li> </ul>

**These sections can be used as a suite to conduct a broad review of student wellbeing services or as individual, discrete tools based on the district's needs**

# Districts can tailor how they use this reflection tool depending on system needs, current state of efforts and leadership preferences

Starting point	Recommended process	Likely outcome
<i>“Our district has not yet prioritized student wellbeing initiatives, we need to understand how to get started”</i>	<ol style="list-style-type: none"> <li>1) Complete ‘Executive Quick Start,’ set the stage for next steps</li> <li>2) Complete Initial Student Wellbeing Services Review; surface insights and priorities to leadership</li> </ol>	<ul style="list-style-type: none"> <li>• Uncover current state of wellbeing supports in the district</li> <li>• Discover areas where it may be valuable to prioritize ‘digging deeper’</li> <li>• Determine next steps for advancing on initiatives; develop clear action plan to advance over the next 3-6 months; monitor progress over time</li> </ul>
<i>“Our district has started work on this; we have some hypotheses on where we should go deeper”</i>	<ol style="list-style-type: none"> <li>1) Complete Initial Student Wellbeing Services Review to prioritize areas to go deeper; surface insights and priorities to leadership</li> <li>2) Conduct In-Depth Student Wellbeing Services Review for priority areas</li> <li>3) Launch planning workshop to reflect, prioritize interventions, and begin planning</li> </ol>	<ul style="list-style-type: none"> <li>• Reflect on the effectiveness of current efforts</li> <li>• Add targeted initiatives to move the needle on outcomes</li> <li>• Identify areas where the district can increase or adjust what it is doing to improve outcomes</li> </ul>
<i>“Our district is deep in this content, we have some initiatives well-underway, and want to identify improvements or new opportunities”</i>	<ol style="list-style-type: none"> <li>1) Complete Initial Student Wellbeing Services Review to uncover the impact and breadth of the district’s efforts and identify priority improvements</li> <li>2) If appropriate, conduct In-Depth Student Wellbeing Services Review for priority areas</li> <li>3) As needed, launch planning workshop to plan next steps</li> </ol>	<ul style="list-style-type: none"> <li>• Reflect on the impact and effectiveness of current efforts</li> <li>• Identify priority improvements to existing initiatives to fully realize potential student impact</li> <li>• If relevant, identify select initiatives to pursue as part of a coordinated effort to address student wellbeing</li> </ul>

## Suggested reflection

**Given district-to-district differences, it is worth reflecting on the following questions as the district team develops a path forward:**

- Who in the system is already involved in and knowledgeable in these areas? How can they be best engaged in reflecting on current state?
- What questions or challenges can be anticipated as the district invests more energy in student wellness? “
- What approaches have been successful within the district in the past, particularly with regard to bringing forward new ideas or advancing existing initiatives? “
- Who will need to be bought in and supportive in order to ensure long-term success? “
- What other considerations might inform the path forward? “

# Districts can decide what components to prioritize and what to defer

Different districts have different needs and different philosophies about what schools can or should do to address student wellbeing needs. What sections, if any, should be deferred for now, given the district's needs? After completing the fast reflection, what sections should the group go "deep" on (i.e., spend an additional ~1 hour discussing)?

Sections		Let's defer for now	Let's go "deep," based on the Executive Quick Start	
Student wellbeing services reflection tool	Schools	Equip school professionals with tools to identify and address needs	<input type="checkbox"/>	<input type="checkbox"/>
		Provide student wellness and academic development programming	<input type="checkbox"/>	<input type="checkbox"/>
		Create healthy school climate (admin, faculty, students, stakeholders)	<input type="checkbox"/>	<input type="checkbox"/>
		Foster supportive friendships and peer networks	<input type="checkbox"/>	<input type="checkbox"/>
		Provide professional mental health services	<input type="checkbox"/>	<input type="checkbox"/>
	External / Non-school	Support use of community-based wellness and social services	<input type="checkbox"/>	<input type="checkbox"/>
	Digital	Promote safe, supportive digital environments	<input type="checkbox"/>	<input type="checkbox"/>
Family partnerships	Partner with families to support efforts at home	<input type="checkbox"/>	<input type="checkbox"/>	
Student experience reviews	Student experience archetype exercises	<input type="checkbox"/>	<input type="checkbox"/>	

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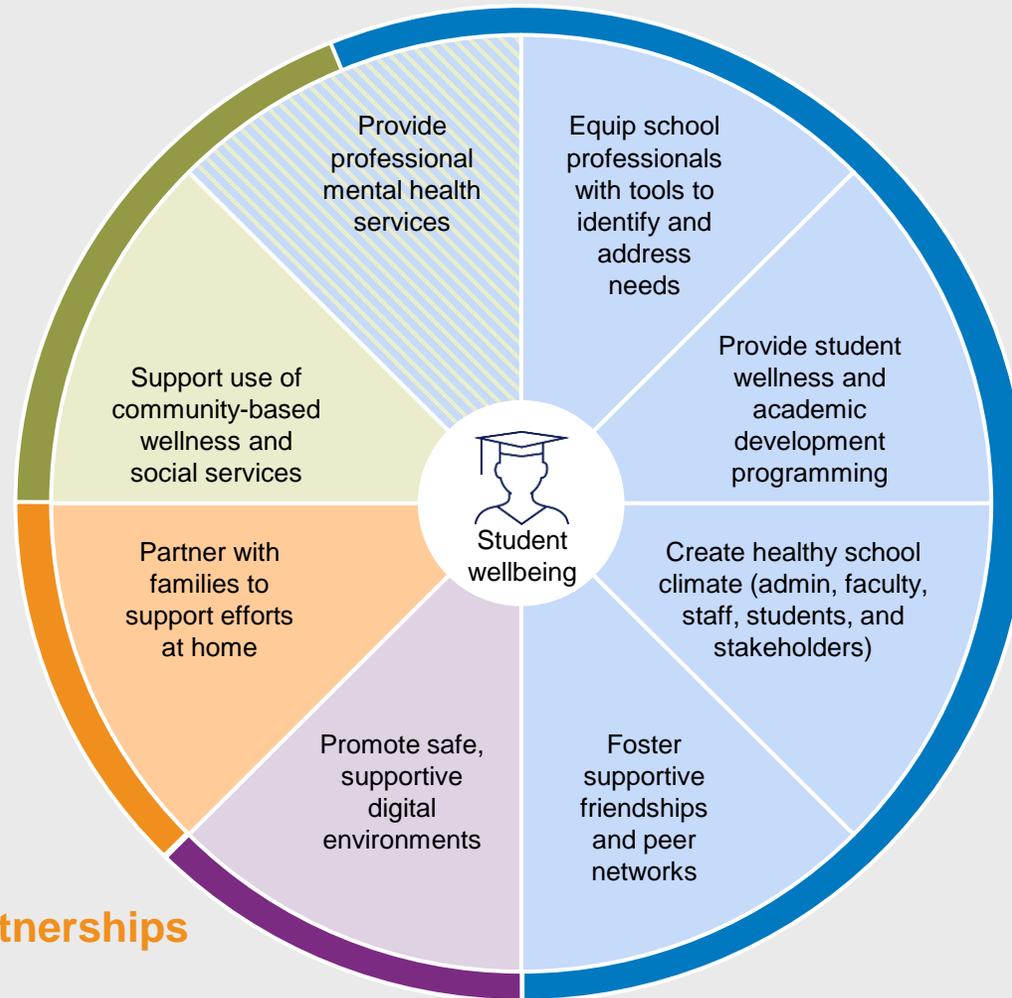
# Content

**This tool (referred to as the “wheel”) can help a district reflect on the supports it provides to foster student wellbeing across a number of components**

**External/Non-school**



**In-school**



**Family partnerships**



**Digital**

# For reflection

What segments of the wheel is the district performing well on?

What segments of the wheel are growth opportunities for the district?

What 3-5 segments of the wheel should be a priority going forward?



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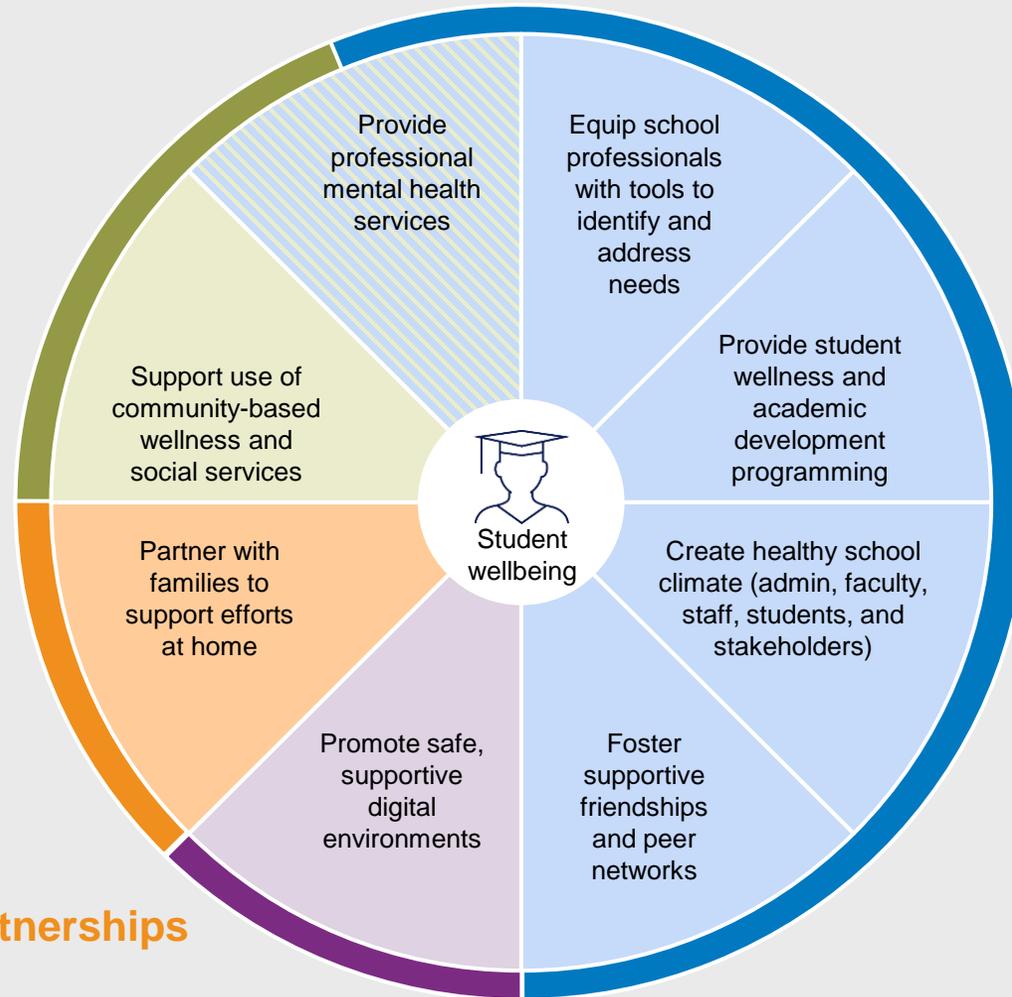
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**This tool (referred to as the “wheel”) can help a district reflect on the supports it provides to foster student wellbeing across a number of components**

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**Digital**

# Instructions for the Initial Student Wellbeing Services review

## Reflect on the district's current level of support

Each component includes example practices; review the example practices, description, and research, then check if “yes” and leave blank if “no” in response to the following statements about each practice:

- This exists in some schools
- This exists in all schools
- We are tracking how well this works
- Our efforts are achieving the intended goals

## Record any immediate reflections or next steps

In areas where people recorded “exists in some schools” or “no,” discuss as a group whether:

- Any immediate next steps arose
- This is an area the team should review in more detail using the In-Depth Student Wellbeing Services Review

## Synthesize learnings

Complete the final reflection and consider using it as a report-out to the Superintendent or Deputy leading this process.

# Guided review: Equip school professionals with tools to identify and address needs

Check all that apply *In-school* 

Component	Example practices	Description	Research and Practice	Extent of action		Tracking	Impact	Don't know/ Learn more
				This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Provide professionals with resources to identify student needs	<b>Universal screening tools for baseline assessment of needs across student population</b>	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-fail approach ( <a href="#">SAMHSA, 2019</a> ) Increases the likelihood of identifying students with internalizing behaviors ( <a href="#">American Counseling Association</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Aggregation of existing school data</b>	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors e.g., students demonstrating adjustment difficulties or other challenges ( <a href="#">SAMHSA 2011</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Teacher/staff training on identifying warning signs for mental health needs</b>	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs ( <a href="#">SAMHSA 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide tools to address student needs	<b>Clear instructions to teachers on how to respond to student needs</b>	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	93% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond ( <a href="#">American Psychological Association, cited by Mills Univ.</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Clear channels for accessing help for students, including crisis support and relevant referral services</b>	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) ( <a href="#">NCSMH 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
District & school-level co-ordination structures	<b>Team-based approach for addressing school, class, and individual needs</b>	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs ( <a href="#">SHAPE 2021</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Provide student wellness and academic development programming

Check all that apply *In-school* 

Component	Example practices	Description	Research and Practice	Extent of action		Tracking	Impact	Don't know/ Learn more
				This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Incorporate student wellness and academic development into the schools' missions	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students	These practices are recommended by: <ul style="list-style-type: none"> <li>The <a href="#">SHAPE System</a></li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a></li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide programming for student wellness and academic development and resilience to promote positive behaviors	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum	A southern school district uses regularly administered surveys to track student needs, adjust interventions, and hold school providers accountable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches	Conditions affecting student wellbeing are ever-changing (e.g., COVID-19 ramifications); and programming related to student wellness should adapt to students' needs ( <a href="#">NCSMH 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide selective programming based on need	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)	SAMHSA's MTSS framework includes school-adapted, selective programming for students with shared specific risk factors ( <a href="#">SAMHSA 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)

Check all that apply *In-school* 

Component	Example practices	Description	Research and Practice	Extent of action		Tracking	Impact	Don't know/ Learn more
				This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Promote safe and nurturing school environment	<b>Systematized approach to promoting healthy school climate</b>	Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools	<a href="#">The SHAPE System</a> advocates for these practices (2021)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Actions to help students feel safe at school</b>	Schools contain predictable / safe environments attentive to transitions / sensory needs Actions to prevent school-based adverse events (e.g., violence, bullying, substance abuse)	<ul style="list-style-type: none"> <li>Promoting physical safety contributes to healthy school climate (<a href="#">NCSSE 2021</a>)</li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a> advocates for these practices</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Connection within school communities, especially across different groups</b>	Caring teacher-student-peer relationships that promote respect for individuals and establish strong student connections with the school Focus on hope & recovery to reduce stigma	<a href="#">CASEL</a> , the Learning Policy Institute, and Minneapolis Public Schools correlate broad student connectivity with improving school climate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Focus on staff wellbeing</b>	Staff members are encouraged to be proactive in their self-care, including personal healthcare plans	Staff mental wellbeing has been correlated with overall school climate ( <a href="#">NCSMH 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Positive, evidence-based, trauma-sensitive approaches to student discipline	<b>Positive behavioral interventions</b>	Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on "problem students"	Positive Behavioral Interventions and Supports ( <a href="#">PBIS</a> ) systemwide approach significantly decreases disciplinary and truancy metrics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Motivational, age-appropriate expectations for all students</b>	Clearly, consistently communicated expectations, and supports to help students meet them; the range and intensity of these efforts is driven by students' needs	A Western state LEA adopted school-wide, classroom-centered approach to expectations setting, and saw decreases in disciplinary action across multiple metrics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Measures of exclusionary discipline</b>	Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)	Several Midwest LEAs have used data-informed approaches to identify and correct for biases in disciplinary actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Foster supportive friendships and peer networks

Check all that apply *In-school* 

Component	Description	Research and practice	Extent of action		Tracking	Impact	
			This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	Don't know/ Learn more
Foster positive social environments in classrooms	Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors	<a href="#">RCTs have demonstrated</a> the efficacy of social awareness training for teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teach and model conflict resolution	Teach students conflict resolution and problem solving Model conflict resolution when resolving disputes	Modeling conflict resolution behaviors was <a href="#">shown to decrease discipline concerns</a> long-term	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create opportunities for friendship formation	Provide physical spaces, equipment, and time for socializing and play Use in- and out-of-class group work to connect students	School design best practices increasingly point to open, multipurpose spaces to foster group work, socializing, and dynamic learning ( <a href="#">Edutopia 2018</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticipate and intervene at moments of transition	Adopt programs for periods of transition (new schools, puberty) such as peer support by older students	Peer Group Connection (PGC) programs addressing transition points <a href="#">can boost graduation rates by 10 p.p.</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Provide professional mental health services

Check all that apply *In school, or by partnership between districts/school and external organizations* 

Component	Example practices	Description	Research and Practice	Extent of action		Tracking	Impact	Don't know/ Learn more
				This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Provide students access to mental health support personnel	<b>School counselors and social workers</b>	Wellness promotion; identification and triaging of illness among students (1 social worker/400 students, 1 school counselor/250 students)	NASP <a href="#">Recommendations for Comprehensive School Safety Policies (2013)</a> American School Counselor Association (ASCA) <a href="#">recommended number of school counselors</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Primary-care providers</b>	Diagnosis and treatment of symptoms, or referral to specialist care (1 PCP/400 students)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Psychology / psychiatry</b>	Coordinated care to manage complex patient needs (1 psychologist/500 students) Can be sourced via community partnerships		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively manage personnel	<b>Establish clear personnel management structure</b>	Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners	In focus groups, specialist personnel consistently cite lack of leadership structure as a key barrier to accomplishing their mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Improve personnel time utilization</b>	Resolve operational problems, ensure staff spend time in their area of expertise, train support staff to provide larger array of mental health services	Districts that implement these strategies see specialists' utilization increase from as little as 9% up to 75%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Set protocols across a student's support journey	<b>Set clear care protocols</b>	Protocols by role for crisis response / assessment, care coordination, info sharing, return to school	These practices are recommended by: • The <a href="#">SHAPE System</a> • <a href="#">Univ. of Wisconsin's Blue Mental Health Framework</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Attend to entire care lifecycle</b>	Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work with partners	<b>Build clear referral processes with a complete set of partners</b>	Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses Set up clearly documented referral and info sharing process	Student and family member input helped a Midwest SD determine community partnerships were acceptable, feasible, & unbiased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Support use of community-based wellness and social services

Check all that apply *Partnership between districts/school and external organizations*



Component	Example practices	Description	Research and Practice	Extent of action		Tracking	Impact	Don't know/ Learn more
				This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Provide students access to partner services	<b>Health and welfare services</b>	Where relevant, ensure students can access housing, health, and economic welfare services	Meeting student physical needs is a prerequisite for mental health ( <a href="#">UCLA</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Community connection</b>	Work with religious groups, leadership development programs, and mentor programs to foster connection to community	Religious and mentorship programming has been effective in both outreach and outcomes (see for example <a href="#">OJP 2018</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Recreation resources</b>	Connect students with of-interest recreation resources (including sports, arts, cultural)	Supporting students in engaging community programming can increase child wellbeing ( <a href="#">Harvard Success Plans 2019</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use clear mgmt. structures to build strong partnerships	<b>Community partner relationship management by district / school multi-stakeholder teams</b>	Develop multi-stakeholder teams (educators, school mental health, community staff, community leaders) by level of service, with clearly delineated, non-duplicative goals  Frequently communicate with students, families, school staff, and community mental health professionals to ensure all parties understand array of services available for youth and families	SAMHSA has established clear justification and guidelines for organized, multi-stakeholder team coordination of current services and advocacy for new services addressing student needs ( <a href="#">SAMHSA 2011</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Clear partnership SOPs</b>	Establish communication, data sharing, operations, seamless integration procedures, colocation, and roles and responsibilities through MOUs		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Utilize school resources to serve students and families</b>	Leverage trust in schools, physical space, logistics resources, and relationships with families / students, based on key stakeholder input	California is considering using schools as Wellness Centers to provide students and families physical, mental, and social and emotional health services in school settings ( <a href="#">MHSOAC 2020</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Promote safe, supportive digital environments

Check all that apply



Component	Description	Research and practice	Extent of action		Tracking	Impact	
			This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	Don't know/ Learn more
Promote mentally healthy, safe, and responsible engagement with digital media	<p>Teach students digital safety practices, including those related to securing and keeping private sensitive data</p> <p>Help students self-regulate digital consumption (with a goal of productive consumption, not necessarily consumption reduction)</p> <p>Help students understand risks of social media (e.g., body image issues) and how to self-regulate</p>	<p><a href="#">Commonsense.org</a> provides a <a href="#">Digital Citizenship Curriculum</a> that teachers can use to teach these and other digital literacy skills</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discourage cyber bullying	<p>Employ consistent, transparent disciplinary policies that focus on behavior correction / rehabilitation</p> <p>Promote safe school climates to ensure students are comfortable honestly discussing issues with school staff/teachers</p> <p>Where appropriate, engage parents</p>	<p>Nationwide, 15.7% of high schoolers were cyber bullied (<a href="#">Youth Risk Behavior Survey 2019</a>); the highest rates were among middle school girls</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support parents	<p>Provide education and resources to help parents create safe, healthy home digital environments</p>	<p><a href="#">Commonsense.org</a> provides resources to parents that districts can make available to them</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure safety of school-provided digital devices	<p>Adopt and consistently refresh best practices to ensure digital safety (incl. data security) and health (including monitored access and restricted access to age-inappropriate content)</p>	<p>Consider leveraging available guides for education settings and filtering on school-provided digital devices (see here for an example of such a guide, <a href="#">published by the ALA for public libraries</a>)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leverage digital tools to provide mental health care and promote student wellbeing	<p>Where appropriate, use telehealth from experts to expand the reach / impact of the school mental health workforce and provide services in remote areas (e.g., rural)</p>	<p>Preliminary evidence suggests telehealth services may be as feasible, acceptable, sustainable, and effective as in-person services. For example, one study found a significant concordance between video and in-person evaluations and no meaningful difference in satisfaction (<a href="#">International Review of Psychiatry 2015</a>)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Guided review: Partner with families to support efforts at home

Check all that apply *Family partnerships* 

Component	Description	Research and practice	Extent of action		Tracking	Impact	Don't know/ Learn more
			This exists in some schools	This exists in all schools	We are tracking how well this works	Our efforts are achieving the intended goals	
Keep families at the center of student wellbeing efforts	Adopt a culturally-relevant, family-centered approach empowering caregivers with evidence-based resources (e.g., ACT program for young children) Concerns about student mental health / emergencies are shared with families and supports for handling this provided by those with expertise	<a href="#">NCSMH's Ecological Systems Model</a> , based on SAMHSA-funded research, frames families as central to best-practice intervention approaches (2019) As an example, the <a href="#">ACT Program</a> is recommended by HHS, WHO, and CDC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide services to families	Consider partnering with other agencies (e.g., housing) to provide families access to direct services at schools	California is advocating the roll out of a statewide school-based family care "wellness centers" ( <a href="#">CA MHSOAC 2020</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Build partnership/connection with families	School practices focus on building strong family partnerships, and ensure alignment across multiple providers and experts to ensure consistency and coherence	The following organizations recommend these practices: <ul style="list-style-type: none"> <li><a href="#">The SHAPE System</a></li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a></li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Help families understand / access available school wellbeing supports	Provide families up-to-date, digitized resource maps; facilitate linkages to resources (e.g., access to a social work case manager) Ensure staff know how to support a family navigating community services	<a href="#">NCSMH's Ecological Systems Model</a> , based on SAMHSA-funded research, calls for comprehensive, up-to-date, publicly accessible resource mapping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pause and reflect: What immediate next steps arose? Is this a section the district should conduct an in-depth review of?

# Synthesize learnings

What was surprising about this reflection?



What immediate next steps arose as takeaways?



Upon reflection, what two or three areas should be a priority for action or further reflection moving forward?

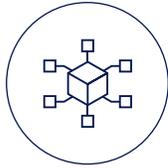
# [Template] Key learnings from the initial student wellbeing services review

**Instructions for use:** After synthesizing learnings, consider completing a high-level summary (sample outlined below) to report-out the results of the review to the Superintendent and cabinet.



## The district demonstrates strength in the following components

- 1 e.g., “Component 1 (“Equip school professionals with tools to identify and address needs”) appears to be a strength due to X programs and Y practices”
- 2
- 3



## The district has growth opportunities in the following components

- 1 e.g., “Component 2 (“Provide professional mental health services”) shows specific improvement opportunities, including A and B”
- 2



## Today’s review suggests the following next steps

- 1 e.g., “Person A to reach out to Person B by X date to understand current state of Y initiative”
- 2
- 3

[Instructions to the Facilitator Using This Document](#)

[Executive Quick Start](#)

[Initial Student Wellbeing Services Review](#)

**[In-Depth Student Wellbeing Services Review](#)**

[Planning Process](#)

## Content

**Teams can complete selected sections based on interest and the results of the initial services review**

## Sections

<b>Student wellbeing services reflection tool</b>	<b>Schools</b>	Equip school professionals with tools to identify and address needs
		Provide student wellness and academic development programming
		Create healthy school climate (admin, faculty, students, stakeholders)
		Foster supportive friendships and peer networks
		Provide professional mental health services
	<b>External / Non-school</b>	Support use of community-based wellness and social services
	<b>Digital</b>	Promote safe, supportive digital environments
	<b>Family partnerships</b>	Partner with families to support efforts at home
<b>Student experience reviews</b>		Student experience archetype exercises

# You will be asked 7 questions for each component of student wellbeing supports

- 1 As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?

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- 2 How many students do our services cover? Which interventions are Tier 1, Tier 2, or Tier 3? Do they occur at every school?

---

- 3 How well are our current services working? Consider learnings from the student experience reviews

---

- 4 What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?

---

- 5 At present, how are our current district and school services funded?

---

- 6 How could we further directly provide or help schools provide these services *with existing funding and current workforce?*<sup>1</sup>

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- 7 How could we further directly provide or help schools provide these services *with new funding and/or additional workforce?*

1. Consider using an asset or resource mapping to understand current strengths and needs. [See University of Maryland](#) for more information

# Each component includes 2 elements

An overview of sample practices for each component as was included in the **initial services review**, the research base that supports it, and whether the practice is typically Tier 1, 2, or 3

Space to reflect on each of the seven questions

**Guided review: Equip school professionals with tools to identify and address needs**

Overview of potential district practices: this overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions

Component	Example practices	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Provide professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-fall approach (SAMHSA 2019). Increases the likelihood of identifying students with internalizing behaviors (American Counseling Association)	✓		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors e.g., students demonstrating adjustment difficulties or other challenges (SAMHSA 2011)	✓		
	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs (SAMHSA 2019)	✓		
Provide tools to address student needs	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	93% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond (American Psychological Association, cited by Mills Univ.)		✓	
	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) (NCSM/SHAPE 2019)		✓	✓
District & school-level coordination structures	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs (SHAPE 2021)		✓	

Source: SAMHSA. Screening for Behavioral Health Risk in Schools, MH.gov educators guide, American Psychological Association, NCSM/SHAPE 2020; SAMHSA. Realizing the Promise of the Whole School Approach (2011)

**Guided review: Equip school professionals with tools to identify and address needs**

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**Guided review: Equip school professionals with tools to identify and address needs**

Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
Provide professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support		
Provide tools to address student needs	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports		
	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support		
District & school-level coordination structures	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop		
	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs		

37

36

35

34

# Districts conducting the In-Depth Services Review can select from several tools through which they can reflect on the District's performance

Focus of upcoming section

## Standard components of the In-Depth Services Review

## Additional component

### District services reflection deep dive

An inventory of example practices, and reflection questions for districts to determine where they are doing well, and where there are opportunities to improve

**Guided review: Equip school professionals with tools to identify and address needs**

Overview of potential district practices: this overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions

Component	Example practices	Description	Research and practice	Tier		
				1 Universal	2 Selective	3 Individual
Provide professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-fail approach (SAMHSA, 2013) Increases the likelihood of identifying students with internalizing behaviors (Vanderlin, Counseling Association)	●		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors (e.g., students demonstrating adjustment difficulties or other challenges) (SAMHSA, 2013)	●		
Provide tools to address student needs	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs (SAMHSA, 2013)	●		
	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	83% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond (American Psychological Association, cited by Mills, 2017)		●	
District & school-level coordination structures	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) (NCSEMI, 2013)		●	●
	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs (SHAPE, 2021)		●	

Source: SAMHSA, Screening for Behavioral Health Risk in Schools, MH.gov educators guide; American Psychological Association; NCSEMI; SHAPE 2020; SAMHSA, Strengthen the Presence of the Whole-School Approach (2011)

### Exercises for planning to improve supports

A step-by-step process to action-plan based on reflections from student experience reviews and the district services reflection tool

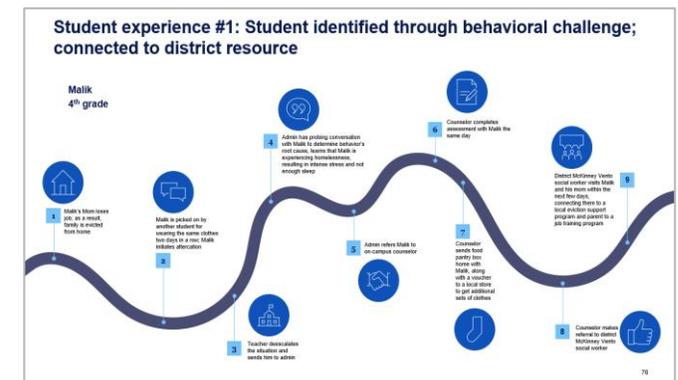
**5: For each priority initiative, think through what (if anything) needs to be done each year, and estimate effort required**

LEA effort required: ● Low ● Medium ● High

Strategy	Year 1 Semester 1	Year 1 Semester 2	Year 2 Onwards
1 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Student experience reviews

Sample steps a student might take to access support in a district as a way to diagnose potential barriers from the perspective of a student



# Guided review: Equip school professionals with tools to identify and address needs

In-school



Overview of potential district practices: this overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

Component	Example practices	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Provide professionals with resources to identify student needs	<b>Universal screening tools for baseline assessment of needs across student population</b>	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-fail approach ( <a href="#">SAMHSA, 2019</a> ) Increases the likelihood of identifying students with internalizing behaviors ( <a href="#">American Counseling Association</a> )	✓		
	<b>Aggregation of existing school data</b>	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors e.g., students demonstrating adjustment difficulties or other challenges ( <a href="#">SAMHSA 2011</a> )	✓		
	<b>Teacher/staff training on identifying warning signs for mental health needs</b>	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs ( <a href="#">SAMHSA 2019</a> )	✓		
Provide tools to address student needs	<b>Clear instructions to teachers on how to respond to student needs</b>	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	93% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond ( <a href="#">American Psychological Association, cited by Mills Univ.</a> )		✓	
	<b>Clear channels for accessing help for students, including crisis support and relevant referral services</b>	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) ( <a href="#">NCSMH 2019</a> )		✓	✓
District & school-level coordination structures	<b>Team-based approach for addressing school, class, and individual needs</b>	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs ( <a href="#">SHAPE 2021</a> )		✓	

# Guided review: Equip school professionals with tools to identify and address needs



Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
<b>Provide professionals with resources to identify student needs</b>	<b>Universal screening tools for baseline assessment of needs across student population</b>	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern		
	<b>Aggregation of existing school data</b>	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support		
	<b>Teacher/staff training on identifying warning signs for mental health needs</b>	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports		
<b>Provide tools to address student needs</b>	<b>Clear instructions to teachers on how to respond to student needs</b>	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including “MH first aid” and when to engage extra school, community, or parent support		
	<b>Clear channels for accessing help for students, including crisis support and relevant referral services</b>	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop		
<b>District &amp; school-level coordination structures</b>	<b>Team-based approach for addressing school, class, and individual needs</b>	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs		

# Guided review: Equip school professionals with tools to identify and address needs

Component	Example practices	Description	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?	
Provide professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support		
	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports		
Provide tools to address student needs	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including “MH first aid” and when to engage extra school, community, or parent support		
	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop		
District & school-level coordination structures	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs		

# Guided review: Equip school professionals with tools to identify and address needs



Component	Example practices	Description	At present, how are our current district and school services funded?
<b>Provide professionals with resources to identify student needs</b>	<b>Universal screening tools for baseline assessment of needs across student population</b>	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	
	<b>Aggregation of existing school data</b>	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	
	<b>Teacher/staff training on identifying warning signs for mental health needs</b>	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports	
<b>Provide tools to address student needs</b>	<b>Clear instructions to teachers on how to respond to student needs</b>	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including “MH first aid” and when to engage extra school, community, or parent support	
	<b>Clear channels for accessing help for students, including crisis support and relevant referral services</b>	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	
<b>District &amp; school-level coordination structures</b>	<b>Team-based approach for addressing school, class, and individual needs</b>	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	

# Guided review: Equip school professionals with tools to identify and address needs



Component	Example practices	Description	How could we further directly provide or help schools provide these services <i>with existing funding and current workforce?</i>	How could we further directly provide or help schools provide these services <i>with new funding and/or additional workforce?</i>
Provide professionals with resources to identify student needs	<b>Universal screening tools for baseline assessment of needs across student population</b>	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern		
	<b>Aggregation of existing school data</b>	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support		
	<b>Teacher/staff training on identifying warning signs for mental health needs</b>	Professional development for all school staff includes how to identify students in need of wellbeing and mental health supports		
Provide tools to address student needs	<b>Clear instructions to teachers on how to respond to student needs</b>	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including “MH first aid” and when to engage extra school, community, or parent support		
	<b>Clear channels for accessing help for students, including crisis support and relevant referral services</b>	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop		
District & school-level coordination structures	<b>Team-based approach for addressing school, class, and individual needs</b>	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs		

# Guided review: Provide student wellness and academic development programming

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

In-school 

Component	Example practices	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Incorporate student wellness and academic development into the schools' missions	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students	These practices are recommended by: <ul style="list-style-type: none"> <li>The <a href="#">SHAPE System</a></li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a></li> </ul>			
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students				
Provide programming for student wellness and academic development and resilience to promote positive behaviors	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum	A southern school district uses regularly administered surveys to track student needs, adjust interventions, and hold school providers accountable			
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches	Conditions affecting student social and emotional health are ever-changing (e.g., COVID-19 ramifications); and programming related to student wellness should adapt to students' needs ( <a href="#">NCSMH 2019</a> )			
Provide selective programming based on need	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)	SAMHSA's MTSS framework includes school-adapted, selective programming for students with shared specific risk factors ( <a href="#">SAMHSA 2019</a> )			

# Guided review: Provide student wellness and academic development programming



Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
<b>Incorporate student wellness and academic development into the schools' missions</b>	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students		
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students		
<b>Provide programming for student wellness and academic development and resilience to promote positive behaviors</b>	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum		
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches		
<b>Provide selective programming based on need</b>	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)		

# Guided review: Provide student wellness and academic development programming

Component	Example practices	Description	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?	
<b>Incorporate student wellness and academic development into the schools' missions</b>	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students		
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students		
<b>Provide programming for student wellness and academic development and resilience to promote positive behaviors</b>	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum		
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches		
<b>Provide selective programming based on need</b>	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)		

# Guided review: Provide student wellness and academic development programming

Component	Example practices	Description	At present, how are our current district and school services funded?
<b>Incorporate student wellness and academic development into the schools' missions</b>	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students	
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students	
<b>Provide programming for student wellness and academic development and resilience to promote positive behaviors</b>	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum	
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches	
<b>Provide selective programming based on need</b>	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)	

# Guided review: Provide student wellness and academic development programming

In-school



Component	Example practices	Description	How could we further directly provide or help schools provide these services <i>with existing funding and current workforce?</i>	How could we further directly provide or help schools provide these services <i>with new funding and/or additional workforce?</i>
<b>Incorporate student wellness and academic development into the schools' missions</b>	<b>School-wide prioritization of student wellbeing</b>	The school's mission, philosophy, and policies reflect an explicit focus on the development and wellbeing of students		
	<b>Staff alignment on central role of child wellbeing</b>	Most staff support a focus on the positive emotional and mental development of students		
<b>Provide programming for student wellness and academic development and resilience to promote positive behaviors</b>	<b>Tailored universal programming for observable needs</b>	School climate and other data are evaluated to determine what school/classroom interventions students and others (e.g., teachers) actually need across all grade levels and curriculum		
	<b>Continually improved program offerings</b>	Data-based, periodic refresh of program offerings as student needs evolve, and to ensure fidelity to up-to-date, evidence-based approaches		
<b>Provide selective programming based on need</b>	<b>Targeted supports for students with specialized needs</b>	Selective programming for preventing pervasive problems (anxiety, depression, substance abuse)		

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.



Component	Example practices	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Promote safe and nurturing school environments	<b>Systematized approach to promoting healthy school climate</b>	Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools	<a href="#">The SHAPE System</a> advocates for these practices (2021)	✓		
	<b>Actions to help students feel safe at school</b>	Schools contain predictable / safe environments attentive to transitions / sensory needs  Actions to prevent school-based adverse events (e.g., violence, bullying, substance abuse)	<ul style="list-style-type: none"> <li>Promoting physical safety contributes to healthy school climate (<a href="#">NCSSLE 2021</a>)</li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a> advocates for these practices</li> </ul>	✓		
	<b>Connection within school communities, especially across different groups</b>	Caring teacher-student-peer relationships that promote respect for individuals and establish strong student connections with the school  Focus on hope & recovery to reduce stigma	<a href="#">CASEL</a> , the Learning Policy Institute, and Minneapolis Public Schools correlate broad student connectivity with improving school climate	✓		
	<b>Focus on staff wellbeing</b>	Staff members are encouraged to be proactive in their self-care, including personal healthcare plans	Staff mental wellbeing has been correlated with overall school climate ( <a href="#">NCSMH 2019</a> )	✓		
Positive, evidence-based, trauma-sensitive approaches to student discipline	<b>Positive behavioral interventions</b>	Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on "problem students"	Positive Behavioral Interventions and Supports ( <a href="#">PBIS</a> ) systemwide approach significantly decreases disciplinary and truancy metrics	✓		
	<b>Motivational, age-appropriate expectations for all students</b>	Clearly, consistently communicated expectations, and supports to help students meet them; the range and intensity of these efforts is driven by students' needs	A Western state LEA adopted school-wide, classroom-centered approach to expectations setting, and saw decreases in disciplinary action across multiple metrics	✓		
	<b>Measures of exclusionary discipline</b>	Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)	Several Midwest LEAs have used data-informed approaches to identify and correct for biases in disciplinary actions	✓		

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)



Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
<b>Promote safe and nurturing school environments</b>	<b>Systematized approach to promoting healthy school climate</b>	Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools		
	<b>Actions to help students feel safe at school</b>	Schools contain predictable / safe environments attentive to transitions / sensory needs  Actions to prevent school-based adverse events (e.g., violence, bullying, substance abuse)		
	<b>Connection within school communities, especially across different groups</b>	Caring teacher-student-peer relationships that promote respect for individuals and establish strong student connections with the school  Focus on hope & recovery to reduce stigma		
	<b>Focus on staff wellbeing</b>	Staff members are encouraged to be proactive in their self-care, including personal healthcare plans		
<b>Positive, evidence-based, trauma-sensitive approaches to student discipline</b>	<b>Positive behavioral interventions</b>	Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on “problem students”		
	<b>Motivational, age-appropriate expectations for all students</b>	Clearly, consistently communicated expectations, and supports to help students meet them; the range and intensity of these efforts is driven by students’ needs		
	<b>Measures of exclusionary discipline</b>	Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)		

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)

Component	Example practices	Description	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?	
Promote safe and nurturing school environments	<b>Systematized approach to promoting healthy school climate</b>	Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools		
	<b>Actions to help students feel safe at school</b>	Schools contain predictable / safe environments attentive to transitions / sensory needs  Actions to prevent school-based adverse events (e.g., violence, bullying, substance abuse)		
	<b>Connection within school communities, especially across different groups</b>	Caring teacher-student-peer relationships that promote respect for individuals and establish strong student connections with the school  Focus on hope & recovery to reduce stigma		
	<b>Focus on staff wellbeing</b>	Staff members are encouraged to be proactive in their self-care, including personal healthcare plans		
Positive, evidence-based, trauma-sensitive approaches to student discipline	<b>Positive behavioral interventions</b>	Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on “problem students”		
	<b>Motivational, age-appropriate expectations for all students</b>	Clearly, consistently communicated expectations, and supports to help students meet them; the range and intensity of these efforts is driven by students’ needs		
	<b>Measures of exclusionary discipline</b>	Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)		

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)

Component	Example practices	Description	At present, how are our current district and school services funded?
<p>Promote safe and nurturing school environments</p>	<p><b>Systematized approach to promoting healthy school climate</b></p>	<p>Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools</p>	
	<p><b>Actions to help students feel safe at school</b></p>	<p>Schools contain predictable / safe environments attentive to transitions / sensory needs</p> <p>Actions to prevent school-based adverse events (e.g., violence, bullying, substance abuse)</p>	
	<p><b>Connection within school communities, especially across different groups</b></p>	<p>Caring teacher-student-peer relationships that promote respect for individuals and establish strong student connections with the school</p> <p>Focus on hope &amp; recovery to reduce stigma</p>	
	<p><b>Focus on staff wellbeing</b></p>	<p>Staff members are encouraged to be proactive in their self-care, including personal healthcare plans</p>	
<p>Positive, evidence-based, trauma-sensitive approaches to student discipline</p>	<p><b>Positive behavioral interventions</b></p>	<p>Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on “problem students”</p>	
	<p><b>Motivational, age-appropriate expectations for all students</b></p>	<p>Clearly, consistently communicated expectations, and supports to help students meet them; the range and intensity of these efforts is driven by students’ needs</p>	
	<p><b>Measures of exclusionary discipline</b></p>	<p>Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)</p>	

# Guided review: Create healthy school climate (admin, faculty, staff, students, and stakeholders)

Component	Example practices	Description	How could we further directly provide or help schools provide these services <i>with existing funding and current workforce?</i>	How could we further directly provide or help schools provide these services <i>with new funding and/or additional workforce?</i>
Promote safe and nurturing school environments	<b>Systematized approach to promoting healthy school climate</b>	Systems ensure there are positive school climate strategies used frequently and consistently throughout the schools		
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Positive, evidence-based, trauma-sensitive approaches to student discipline	<b>Positive behavioral interventions</b>	Interventions to promote positive behaviors and address underlying causes of negative behaviors; shifts from programming and disciplinary activity solely focused on “problem students”		
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	<b>Measures of exclusionary discipline</b>	Schools collect and disaggregate data (race / ethnicity, disability, SES) regarding exclusionary discipline (e.g., seclusion, suspensions)		

# Guided review: Foster supportive friendships and peer networks

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

In-school 

Component	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
<b>Foster positive social environments in classrooms</b>	Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors	<a href="#">RCTs have demonstrated</a> the efficacy of social awareness training for teachers	✓		
<b>Teach and model conflict resolution</b>	Teach students conflict resolution and problem solving Model conflict resolution when resolving disputes	Modeling conflict resolution behaviors was <a href="#">shown to decrease discipline concerns</a> long-term	✓		
<b>Create opportunities for friendship formation</b>	Provide physical spaces, equipment, and time for socializing and play Use in- and out-of-class group work to connect students	School design best practices increasingly point to open, multipurpose spaces to foster group work, socializing, and dynamic learning ( <a href="#">Edutopia 2018</a> )	✓		
<b>Anticipate and intervene at moments of transition</b>	Adopt programs for periods of transition (new schools, puberty) such as peer support by older students	Peer Group Connection (PGC) programs addressing transition points <a href="#">can boost graduation rates by 10 p.p.</a>	✓		

# Guided review: Foster supportive friendships and peer networks



Component	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
<p><b>Foster positive social environments in classrooms</b></p>	<p>Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors</p>		
<p><b>Teach and model conflict resolution</b></p>	<p>Teach students conflict resolution and problem solving Model conflict resolution when resolving disputes</p>		
<p><b>Create opportunities for friendship formation</b></p>	<p>Provide physical spaces, equipment, and time for socializing and play Use in- and out-of-class group work to connect students</p>		
<p><b>Anticipate and intervene at moments of transition</b></p>	<p>Adopt programs for periods of transition (new schools, puberty) such as peer support by older students</p>		

# Guided review: Foster supportive friendships and peer networks

Component	Description	How well are our current services working?	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?
<p><b>Foster positive social environments in classrooms</b></p>	<p>Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors</p>		
<p><b>Teach and model conflict resolution</b></p>	<p>Teach students conflict resolution and problem solving Model conflict resolution when resolving disputes</p>		
<p><b>Create opportunities for friendship formation</b></p>	<p>Provide physical spaces, equipment, and time for socializing and play Use in- and out-of-class group work to connect students</p>		
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# Guided review: Foster supportive friendships and peer networks

Component	Description	At present, how are our current district and school services funded?
<p><b>Foster positive social environments in classrooms</b></p>	<p>Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors</p>	
<p><b>Teach and model conflict resolution</b></p>	<p>Teach students conflict resolution and problem solving Model conflict resolution when resolving disputes</p>	
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# Guided review: Foster supportive friendships and peer networks

Component	Description	How could we further directly provide or help schools provide these services <i>with existing funding and current workforce?</i>	How could we further directly provide or help schools provide these services <i>with new funding and/or additional workforce?</i>
<b>Foster positive social environments in classrooms</b>	Train teachers in social awareness, foster democratic class norms, frequently use student names, discuss student interests, identify and reward student prosocial behaviors		
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# Guided review: Provide professional mental health services

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

*In school, or by partnership between districts/school and external organizations*



Component	Example practices	Description	Research and practice	Tier 1	Tier 2	Tier 3
				Universal	Selective	Individual
Provide students access to mental health support personnel	School counselors and social workers	Wellness promotion; identification and triaging of illness among students (1 social worker/400 students, 1 school counselor/250 students)	NASP <a href="#">Recommendations for Comprehensive School Safety Policies (2013)</a>  American School Counselor Association (ASCA) <a href="#">recommended number of school counselors</a>			✓
	Primary-care providers	Diagnosis and treatment of symptoms, or referral to specialist care (1 PCP/400 students)				✓
	Psychology / psychiatry	Coordinated care to manage complex patient needs (1 psychologist/500 students)  Can be sourced via community partnerships				✓
Effectively manage personnel	Establish clear personnel management structure	Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners	In focus groups, specialist personnel consistently cite lack of leadership structure as a key barrier to accomplishing their mission			✓
	Improve personnel time utilization	Resolve operational problems, ensure staff spend time in their area of expertise, train support staff to provide larger array of mental health services	Districts that implement these strategies see specialists' utilization increase from as little as 9% up to 75%			✓
Set protocols across a student's support journey	Set clear care protocols	Protocols by role for crisis response / assessment, care coordination, info sharing, return to school	These practices are recommended by: <ul style="list-style-type: none"> <li>The <a href="#">SHAPE System</a></li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a></li> </ul>			✓
	Attend to entire care lifecycle	Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)				✓
Work with partners	Build clear referral processes with a complete set of partners	Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses  Set up clearly documented referral and info sharing process	Student and family member input helped a Midwest SD determine community partnerships were acceptable, feasible, & unbiased			✓

# Guided review: Provide professional mental health services

*In school, or by partnership between districts/school and external organizations*



Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
Provide students access to mental health support personnel	<b>School counselors and social workers</b>	Wellness promotion; identification and triaging of illness among students (1 social worker/400 students, 1 school counselor/250 students)		
	<b>Primary-care providers</b>	Diagnosis and treatment of symptoms, or referral to specialist care (1 PCP/400 students)		
	<b>Psychology / psychiatry</b>	Coordinated care to manage complex patient needs (1 psychologist/500 students)  Can be sourced via community partnerships		
Effectively manage personnel	<b>Establish clear personnel management structure</b>	Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners		
	<b>Improve personnel time utilization</b>	Resolve operational problems, ensure staff spend time in their area of expertise, train support staff to provide larger array of mental health services		
Set protocols across a student's support journey	<b>Set clear care protocols</b>	Protocols by role for crisis response / assessment, care coordination, info sharing, return to school		
	<b>Attend to entire care lifecycle</b>	Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)		
Work with partners	<b>Build clear referral processes with a complete set of partners</b>	Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses Set up clearly documented referral and info sharing process		

# Guided review: Provide professional mental health services

*In school, or by partnership between districts/school and external organizations*



**What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?**

Component	Example practices	Description	How well are our current services working?	
<p>Provide students access to mental health support personnel</p>	<p><b>School counselors and social workers</b></p>	<p>Wellness promotion; identification and triaging of illness among students (1 social worker/400 students, 1 school counselor/250 students)</p>		
	<p><b>Primary-care providers</b></p>	<p>Diagnosis and treatment of symptoms, or referral to specialist care (1 PCP/400 students)</p>		
	<p><b>Psychology / psychiatry</b></p>	<p>Coordinated care to manage complex patient needs (1 psychologist/500 students)  Can be sourced via community partnerships</p>		
<p>Effectively manage personnel</p>	<p><b>Establish clear personnel management structure</b></p>	<p>Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners</p>		
	<p><b>Improve personnel time utilization</b></p>	<p>Resolve operational problems, ensure staff spend time in their area of expertise, train support staff to provide larger array of mental health services</p>		
<p>Set protocols across a student's support journey</p>	<p><b>Set clear care protocols</b></p>	<p>Protocols by role for crisis response / assessment, care coordination, info sharing, return to school</p>		
	<p><b>Attend to entire care lifecycle</b></p>	<p>Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)</p>		
<p>Work with partners</p>	<p><b>Build clear referral processes with a complete set of partners</b></p>	<p>Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses Set up clearly documented referral and info sharing process</p>		

# Guided review: Provide professional mental health services

*In school, or by partnership between districts/school and external organizations*



Component	Example practices	Description	At present, how are our current district and school services funded?
<p>Provide students access to mental health support personnel</p>	<p><b>School counselors and social workers</b></p>	<p>Wellness promotion; identification and triaging of illness among students (1 social worker/400 students, 1 school counselor/250 students)</p>	
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<p>Effectively manage personnel</p>	<p><b>Establish clear personnel management structure</b></p>	<p>Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners</p>	
	<p><b>Improve personnel time utilization</b></p>	<p>Resolve operational problems, ensure staff spend time in their area of expertise, train support staff to provide larger array of mental health services</p>	
<p>Set protocols across a student's support journey</p>	<p><b>Set clear care protocols</b></p>	<p>Protocols by role for crisis response / assessment, care coordination, info sharing, return to school</p>	
	<p><b>Attend to entire care lifecycle</b></p>	<p>Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)</p>	
<p>Work with partners</p>	<p><b>Build clear referral processes with a complete set of partners</b></p>	<p>Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses Set up clearly documented referral and info sharing process</p>	

# Guided review: Provide professional mental health services

*In school, or by partnership between districts/school and external organizations*



Component	Example practices	Description	How could we further directly provide or help schools provide these services <i>with existing funding and current workforce?</i>	How could we further directly provide or help schools provide these services <i>with new funding and/or additional workforce?</i>
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	<b>Primary-care providers</b>	Diagnosis and treatment of symptoms, or referral to specialist care (1 PCP/400 students)		
	<b>Psychology / psychiatry</b>	Coordinated care to manage complex patient needs (1 psychologist/500 students)  Can be sourced via community partnerships		
Effectively manage personnel	<b>Establish clear personnel management structure</b>	Designated director for managing personnel, including setting utilization targets, resolving problems, collecting outcome data, and managing partners		
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Set protocols across a student's support journey	<b>Set clear care protocols</b>	Protocols by role for crisis response / assessment, care coordination, info sharing, return to school		
	<b>Attend to entire care lifecycle</b>	Attend to intake, progress monitoring, follow-up services, return to school (for those hospitalized)		
Work with partners	<b>Build clear referral processes with a complete set of partners</b>	Identify set of partners that meet school needs via staff, student, and family input. Partners can support on or off campuses Set up clearly documented referral and info sharing process		

# Guided review: Support use of community-based wellness and social services

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

Partnership between districts/school and external organizations



Component	Example practices	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Provide students access to partner services	<b>Health and welfare services</b>	Where relevant, ensure students can access housing, health, and economic welfare services	Meeting student physical needs is a prerequisite for mental health ( <a href="#">UCLA</a> )		✓	
	<b>Community connection</b>	Work with religious groups, leadership development programs, and mentor programs to foster connection to community	Religious and mentorship programming has been effective in both outreach and outcomes (see for example <a href="#">OJP 2018</a> )	✓	✓	
	<b>Recreation resources</b>	Connect students with of-interest recreation resources (including sports, arts, cultural)	Supporting students in engaging community programming can increase child wellbeing ( <a href="#">Harvard Success Plans 2019</a> )	✓	✓	
Use clear mgmt. structures to build strong partnerships	<b>Community partner relationship management by district / school multi-stakeholder teams</b>	Develop multi-stakeholder teams (educators, school mental health, community staff, community leaders) by level of service, with clearly delineated, non-duplicative goals  Frequently communicate with students, families, school staff, and community mental health professionals to ensure all parties understand array of services available for youth and families	SAMHSA has established clear justification and guidelines for organized, multi-stakeholder team coordination of current services and advocacy for new services addressing student needs ( <a href="#">SAMHSA 2011</a> )	✓		
	<b>Clear partnership SOPs</b>	Establish communication, data sharing, operations, seamless integration procedures, colocation, and roles and responsibilities through MOUs		✓	✓	✓
	<b>Utilize school resources to serve students and families</b>	Leverage trust in schools, physical space, logistics resources, and relationships with families / students, based on key stakeholder input	California is considering using schools as Wellness Centers to provide students and families physical, mental, and social and emotional health services in school settings ( <a href="#">MHSOAC 2020</a> )	✓		

# Guided review: Support use of community-based wellness and social services

Partnership between districts/school and external organizations



Component	Example practices	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
Provide students access to partner services	<b>Health and welfare services</b>	Where relevant, ensure students can access housing, health, and economic welfare services		
	<b>Community connection</b>	Work with religious groups, leadership development programs, and mentor programs to foster connection to community		
	<b>Recreation resources</b>	Connect students with of-interest recreation resources (including sports, arts, cultural)		
Use clear mgmt. structures to build strong partnerships	<b>Community partner relationship management by district / school multi-stakeholder teams</b>	Develop multi-stakeholder teams (educators, school mental health, community staff, community leaders) by level of service, with clearly delineated, non-duplicative goals  Frequently communicate with students, families, school staff, and community mental health professionals to ensure all parties understand array of services available for youth and families		
	<b>Clear partnership SOPs</b>	Establish communication, data sharing, operations, seamless integration procedures, colocation, and roles and responsibilities through MOUs		
	<b>Utilize school resources to serve students and families</b>	Leverage trust in schools, physical space, logistics resources, and relationships with families / students, based on key stakeholder input		

# Guided review: Support use of community-based wellness and social services

Partnership between districts/school and external organizations



Component	Example practices	Description	How well are our current services working?	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?
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# Guided review: Promote safe, supportive digital environments

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

Digital 

Component	Description	Research and practice	Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Promote mentally healthy, safe, and responsible engagement with digital media	<p>Teach students digital safety practices, including those related to securing and keeping private sensitive data</p> <p>Help students self-regulate digital consumption (with a goal of productive consumption, not necessarily consumption reduction)</p> <p>Help students understand risks of social media (e.g., body image issues) and how to self-regulate</p>	<a href="#">Commonsense.org provides a Digital Citizenship Curriculum</a> that teachers can use to teach these and other digital literacy skills	✓		
Discourage cyber bullying	<p>Employ consistent, transparent disciplinary policies that focus on behavior correction / rehabilitation</p> <p>Promote safe school climates to ensure students are comfortable honestly discussing issues with school staff/teachers</p> <p>Where appropriate, engage parents</p>	Nationwide, 15.7% of high schoolers were cyber bullied ( <a href="#">Youth Risk Behavior Survey 2019</a> ); the highest rates were among middle school girls	✓		
Support parents	Provide education and resources to help parents create safe, healthy home digital environments	<a href="#">Commonsense.org</a> provides resources to parents that districts can make available to them	✓		
Ensure safety of school-provided digital devices	Adopt and consistently refresh best practices to ensure digital safety (incl. data security) and health (including monitored access and restricted access to age-inappropriate content)	Consider leveraging available guides for education settings and filtering on school-provided digital devices (see here for an example of such a guide, <a href="#">published by the ALA for public libraries</a> )	✓		
Leverage digital tools to provide mental health care and promote student wellbeing	Where appropriate, use telehealth from experts to expand the reach / impact of the school mental health workforce and provide services in remote areas (e.g., rural)	Preliminary evidence suggests telehealth services may be as feasible, acceptable, sustainable, and effective as in-person services. For example, one study found a significant concordance between video and in-person evaluations and no meaningful difference in satisfaction ( <a href="#">International Review of Psychiatry 2015</a> )	✓	✓	✓

# Guided review: Promote safe, supportive digital environments

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# Guided review: Promote safe, supportive digital environments



What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?

Component	Description	How well are our current services working?	What evidence do we have of this? How are we measuring these things? Are we disaggregating data by sub-group?
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# Guided review: Promote safe, supportive digital environments

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# Guided review: Partner with families to support efforts at home

Overview of potential district practices: This overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions.

Family partnerships 

Component	Description	Research and practice	Family partnerships		
			Tier 1 Universal	Tier 2 Selective	Tier 3 Individual
Keep families at the center of student wellbeing efforts	Adopt a culturally-relevant, family-centered approach empowering caregivers with evidence-based resources (e.g., ACT program for young children) Concerns about student mental health / emergencies are shared with families and supports for handling this provided by those with expertise	<a href="#">NCSMH's Ecological Systems Model</a> , based on SAMHSA-funded research, frames families as central to best-practice intervention approaches (2019) As an example, the <a href="#">ACT Program</a> is recommended by HHS, WHO, and CDC	✓	✓	✓
Provide services to families	Consider partnering with other agencies (e.g., housing) to provide families access to direct services at schools	California is advocating the roll out of a statewide school-based family care "wellness centers" ( <a href="#">CA MHSOAC 2020</a> )	✓		
Build partnership/connection with families	School practices focus on building strong family partnerships, and ensure alignment across multiple providers and experts to ensure consistency and coherence	The following organizations recommend these practices: <ul style="list-style-type: none"> <li><a href="#">The SHAPE System</a></li> <li><a href="#">Univ. of Wisconsin's School Mental Health Framework</a></li> </ul>	✓	✓	✓
Help families understand / access available school wellbeing supports	Provide families up-to-date, digitized resource maps; facilitate linkages to resources (e.g., access to a social work case manager) Ensure staff know how to support a family navigating community services	<a href="#">NCSMH's Ecological Systems Model</a> , based on SAMHSA-funded research, calls for comprehensive, up-to-date, publicly accessible resource mapping	✓		

# Guided review: Partner with families to support efforts at home

Family partnerships



Component	Description	As an LEA, what are we doing to directly provide these services? How are we supporting schools to provide them?	How many students do our services cover? Which are Tier 1, Tier 2, or Tier 3? Do they occur at every school?
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# Guided review: Partner with families to support efforts at home

Family partnerships 

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# Guided review: Partner with families to support efforts at home

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# Districts conducting the In-Depth Services Review can select from several tools through which they can reflect on the District's performance

Focus of upcoming section

## Standard components of the In-Depth Services Review

### District services reflection deep dive

An inventory of example practices, and reflection questions for districts to determine where they are doing well, and where there are opportunities to improve

### Exercises for planning to improve supports

A step-by-step process to action-plan based on reflections from student experience reviews and the district services reflection tool

## Additional component

### Student experience reviews

Sample steps a student might take to access support in a district as a way to **diagnose potential barriers from the perspective of a student**

**Guided review: Equip school professionals with tools to identify and address needs**

Overview of potential district practices: this overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions

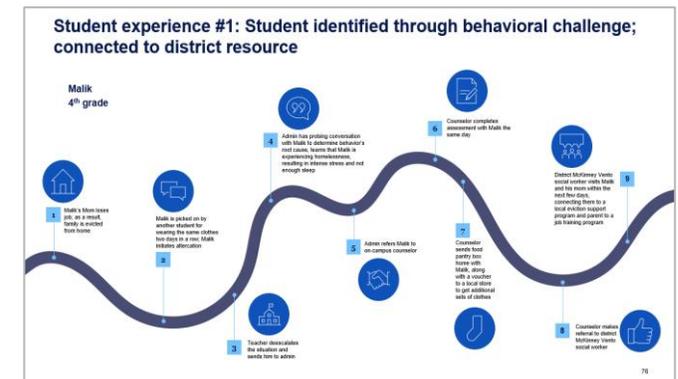
Component	Example practices	Description	Research and practice	Tier 1	Tier 2	Tier 3
				Universal	Selective	Individual
Provides professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-fail approach (SAMHSA, 2013) Increases the likelihood of identifying students with identifying behaviors (Venezian, Counseling Association)	●		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors (e.g., students demonstrating adjustment difficulties or other challenges) (SAMHSA, 2013)	●		
Provides tools to address student needs	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff including how to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs (SAMHSA, 2013)	●		
	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	83% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond (American Psychological Association, cited by Mills, 2017)		●	
District & school-level coordination structures	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) (NCSEMI, 2013)		●	●
	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs (SHAPE, 2021)		●	

Source: SAMHSA, Screening for Behavioral Health Risk in Schools, 6th year educators guide; American Psychological Association; NCSEMI; SHAPE 2020; SAMHSA, Teaching the Teachers of the Whole-School Approach (2011)

**5: For each priority initiative, think through what (if anything) needs to be done each year, and estimate effort required**

LEA effort required: ● Low ● Medium ● High

Strategy	Year 1 Semester 1	Year 1 Semester 2	Year 2 Onwards
1 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Why do student experience reviews?

## Student experience reviews can...



**...ground district leaders in students' day-to-day experience accessing supports**

Putting ourselves in students' shoes can uncover additional barriers to access and bring the "user experience" to problem-solving



**...identify areas where intention diverges from reality**

Student wellbeing programs may not be having their fully desired impact for several reasons, including:

- (1) Programs exist but there are process challenges on the ground
- (2) Processes are limited and do not fully address student needs

However, student experience reviews can be a helpful way to surface both of those breakdowns and begin to think through solutions

# Using student experience reviews

- 1 Assign members of the team to review student experiences in groups. Time permitting, consider cross-functional groups that include frontline campus employees or campus employee supervisors which will likely yield the highest-value insights.
- 2 In groups, review each student experience. Each experience includes an overview page, a page that outlines “what-ifs” to describe process breakdowns, and a page with reflection questions. As participants review these pages, circle the “what-ifs” that resonate most.
- 3 In groups, review the discussion questions on the final page of each experience:
  - What additional “what-ifs,” if any, occur in the district?
  - Which “what-ifs” are most common in the district?
  - Which “what-if(s)” would have the biggest impact on a student?
  - What might be the root cause(s) of the most concerning “what-if(s)” in the district?
- 4 Repeat with remaining student experiences.
- 5 Create and discuss additional student experiences based on what may be common in the district, as a way to more fully explore what types of experiences students may be having in the district.

Each of the following three student experiences outlines a **typical, generalized journey for student identification and access of student wellbeing or mental health services.**

These experiences **do not represent best practice**, rather they represent a compilation of what we’ve heard typically happens from a number of districts.

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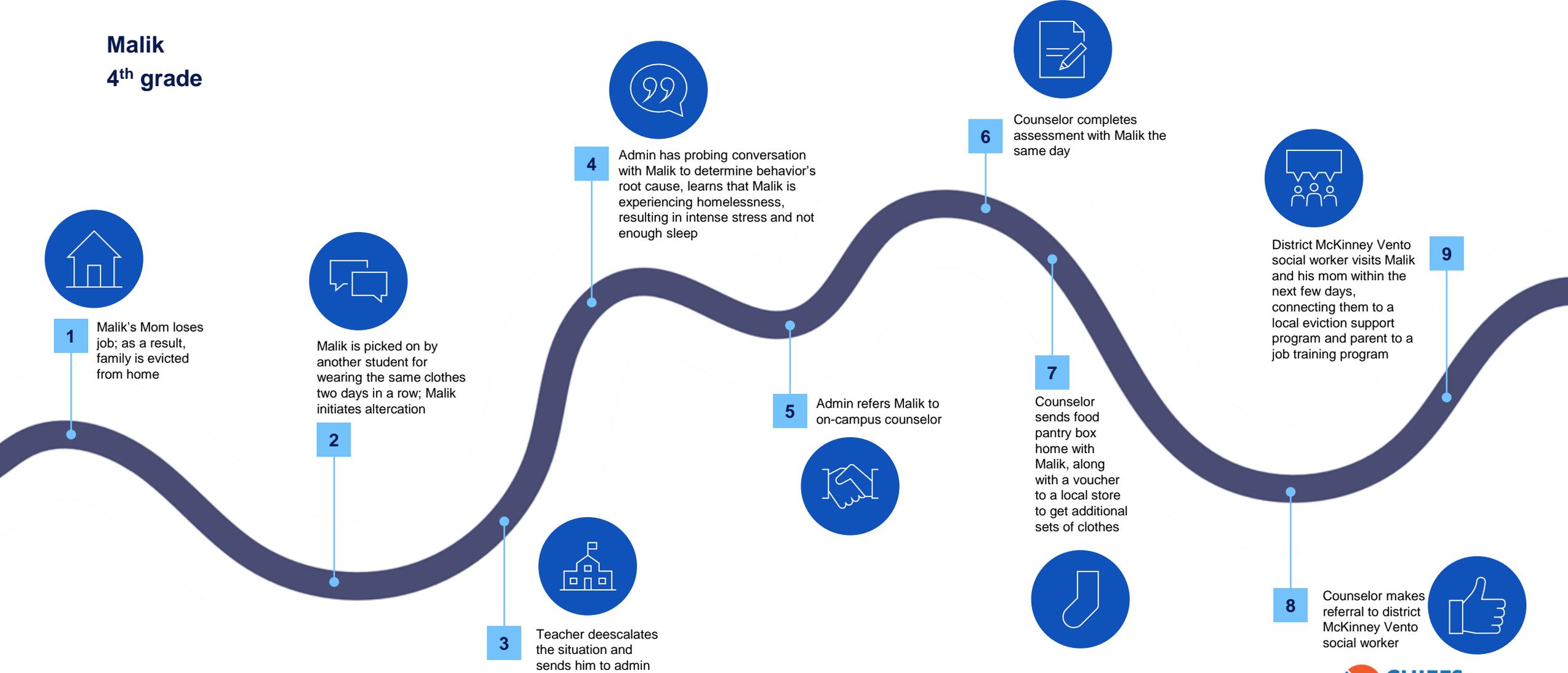
**Journey 1:** Student identified through a behavioral challenge and connected to district services

**Journey 2:** Student identified through a parent and connected to offsite services

**Journey 3:** Student identified through external system involvement

# Student experience #1: Student identified through behavioral challenge; connected to district resource

Malik  
4<sup>th</sup> grade



# Student experience #1: Student identified through behavioral challenge; connected to district resource

NOT EXHAUSTIVE - EXAMPLE ONLY

Malik



Malik's Mom loses job; as a result, family is evicted from home



Malik is picked on by another student for wearing the same clothes two days in a row; Malik initiates altercation



Teacher deescalates the situation and sends him to admin



Admin has probing conversation with Malik to determine behavior's root cause, learns that Malik is experiencing homelessness, resulting in intense stress and not enough sleep



Admin refers Malik to on-campus counselor



Counselor completes assessment with Malik the same day



Counselor sends food pantry box home with Malik, along with a voucher to a local store to get additional sets of clothes



Counselor makes referral to district McKinney Vento social worker



District McKinney Vento social worker visits Malik and his mom within the next few days, connecting them to a local eviction support program and parent to a job training program



3

What if teacher has not received training in identification, and does not recognize the potential need for support?

What if the student is sent to a disciplinary setting instead of a restorative setting?

4

What if the school has no available administrator?

What if the administrator does not have bandwidth to have a probing conversation?

What if the student does not view the administrator as a trusted adult and does not share the root cause?

6

What if the school has no on-campus counselor?

What if the counselor is busy or unavailable for several days or weeks?

What if the session is interrupted?

7

What if the school does not have an easily accessible pantry box or voucher?

What if the family does not have transportation to get an additional set of clothes?

8

9

What if the McKinney Vento counselor has a long backlog and therefore cannot see Malik for over a week?

What if the parent cannot be reached?

What if the parent does not accept help?

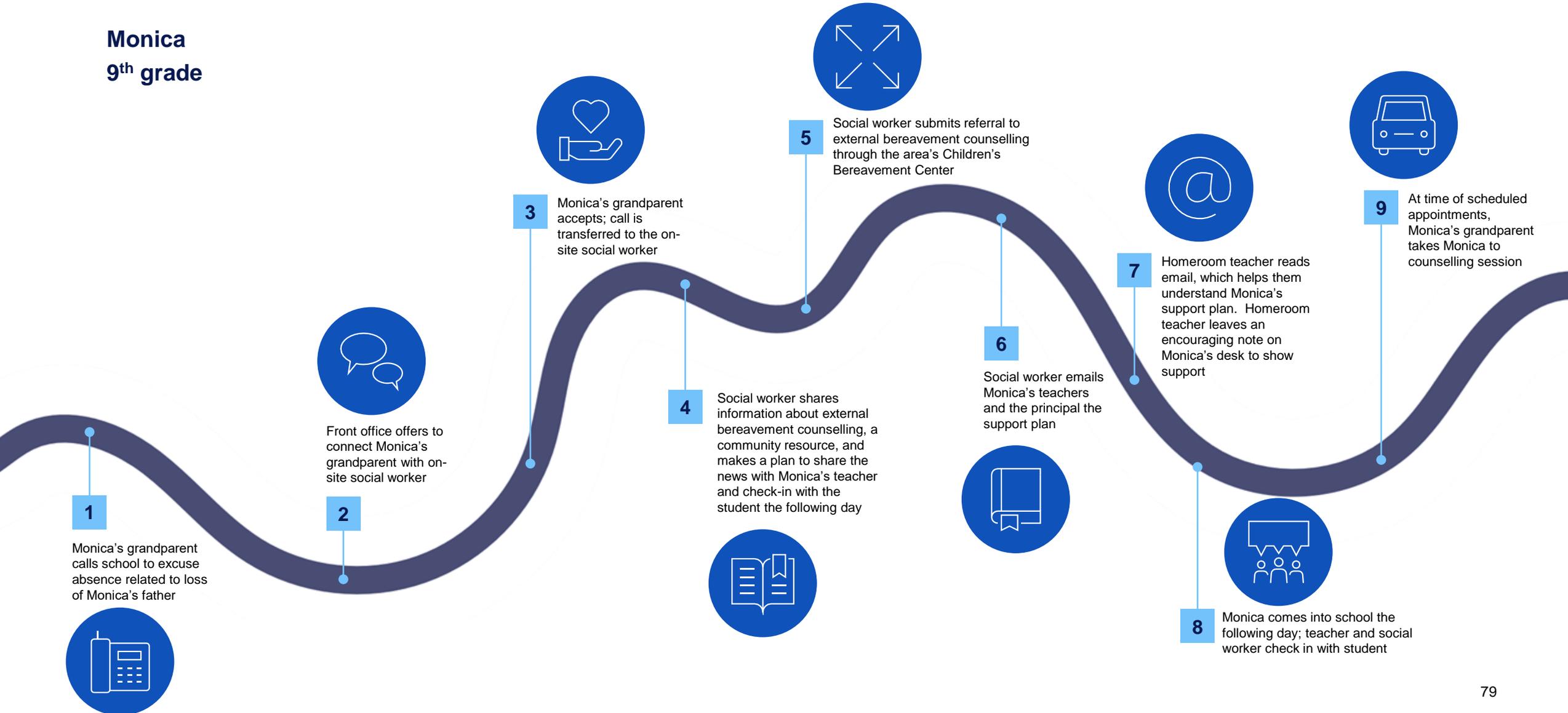
# Reflecting: student identified through behavioral challenge; connected to district resource

<p>What additional “what-ifs”, if any, occur in the district?</p>	<p>Which “what-ifs” are most common in the district?</p>	<p>Which “what-if(s)” would have the biggest impact on a student? And how might one approach addressing them?</p>	<p>What might be the root cause(s) of the most concerning “what-if(s)” in the district? And what might one do about them?</p>
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This handout will be used as a part of the final section: Aligning on implications of the reflection exercises

# Student experience #2: Student identified through their grandparent; connected to offsite resource

Monica  
9<sup>th</sup> grade



# Student experience #2: Student identified through parent; connected to offsite resource

NOT EXHAUSTIVE - EXAMPLE ONLY

Monica



Monica's grandparent calls school to excuse absence related to loss of Monica's father



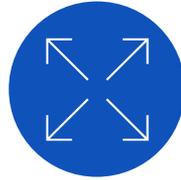
Front office offers to connect Monica's grandparent with on-site social worker



Monica's grandparent accepts; call is transferred to the on-site social worker



Social worker shares information about external bereavement counselling, a community resource, and makes a plan to share the news with Monica's teacher and check-in with the student the following day



Social worker submits referral to external bereavement counselling through the area's Children's Bereavement Center



Social worker emails Monica's teachers the support plan



Homeroom teacher reads email, which helps them understand Monica's support plan. Homeroom teacher leaves an encouraging note on Monica's desk to show support



Monica comes into school the following day; teacher and social worker check in with student



At time of scheduled appointments, Monica's grandparent takes Monica to counselling session



1  
What if the front office clerk doesn't know to connect the student's guardian to appropriate supports?  
What if the campus does not have a social worker?  
What if the social worker is busy and does not pick up the phone?

2  
What if the grandparent does not call the front office to excuse the absence?  
What if the grandparent is concerned about immigration factors and does not contact the school?  
What if the parent does not want to talk to the social worker?  
What if the parent has a language barrier with the social worker?

3  
What if the social worker is grant-funded and needs to devote the rest of her support to another focus (e.g., McKinney Vento)?  
What if the social worker is busy and it takes several days to return the parent's phone call?  
What if another crisis comes up and the social worker forgets to follow-up?  
What if the social work is not well-connected to teachers in the school, or does not have a process to share information with them?

4  
What if the teacher does not read their email?  
What if the teacher does not fully understand his role in the plan, or does not feel equipped to play it?

5  
What if another student sees the social worker or teacher speaking to the student, and the student feels embarrassed or angry?

6  
What if the grandparent does not consent to off-campus counseling?  
What if the child does not want counseling?  
What if there is a long wait for counseling?  
What if the student's guardian has no way to transport student to counseling?  
What if student's guardian does not follow-up and no one at the school knows?

# Reflecting: Student identified through their parent; connected to offsite resource

<p>What additional “what-ifs”, if any, occur in the district?</p>	<p>Which “what-ifs” are most common in the district?</p>	<p>Which “what-if(s)” would have the biggest impact on a student?</p>	<p>What might be the root cause(s) of the most concerning “what-if(s)” in the district?</p>
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This handout will be used as a part of the final section: Aligning on implications of the reflection exercises

# Student experience #3: Student identified for support through external agency

**Maria**  
7<sup>th</sup> grader



1

Maria was recently placed in foster care; her CARE team counselor calls the school she is now zoned in to get her enrolled



2

Front office staff takes the call and transfers her to the registrar



3

Registrar speaks to the CARE team counselor to enroll Maria, and connects the counselor to the school's social worker

4



The CARE team counselor and social worker create a campus support plan



5

Social worker informs relevant parties about the support plan, including the transportation department and Maria's teacher



6

Social worker works with teacher to better understand the impact of trauma on Maria, and how to support her in class



8

Social worker, acting as the main point of contact, continues to act as a conduit between internal and external team

7

When Maria comes to school, the social worker checks in and lets her know about the support plan



# Student experience #3: Student identified for support through external agency

Maria



Maria was recently placed in foster care; her CARE team counselor calls the school she is now zoned in to get her enrolled



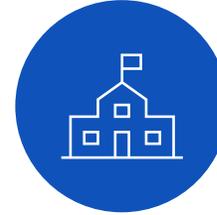
Front office staff takes the call and transfers her to the registrar



Registrar speaks to the CARE team counselor to enroll Maria, and connects the counselor to the school's social worker



The CARE team counselor and social worker create a campus support plan



Social worker informs relevant parties about the support plan, including the transportation department and Maria's teacher



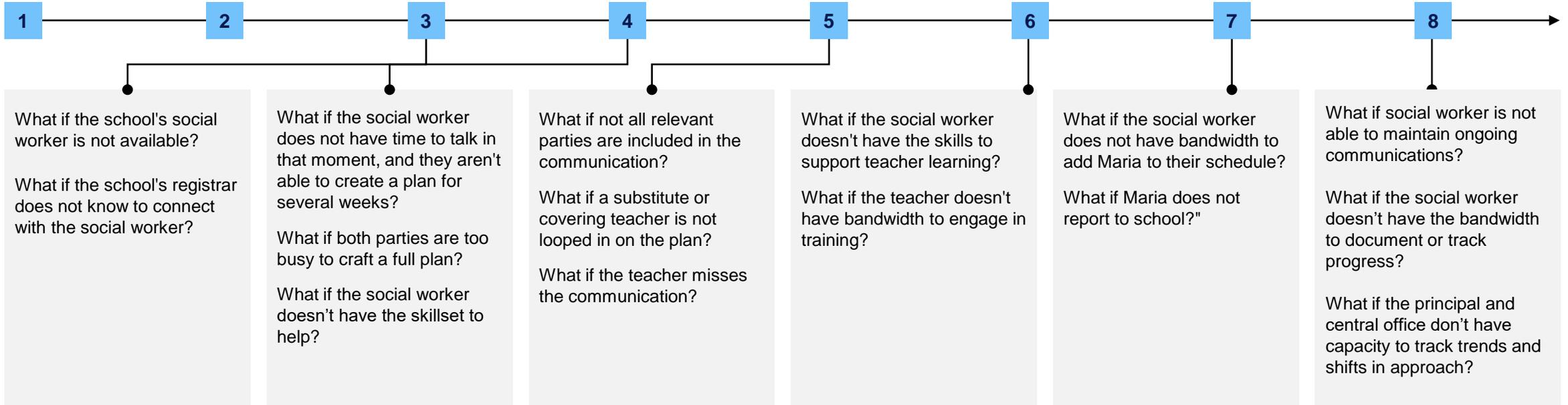
Social worker works with teacher to better understand the impact of trauma on Maria, and how to support her in class



When Maria comes to school, the social worker checks in and lets her know about the support plan



Social worker, acting as the main point of contact, continues to act as a conduit between internal and external team

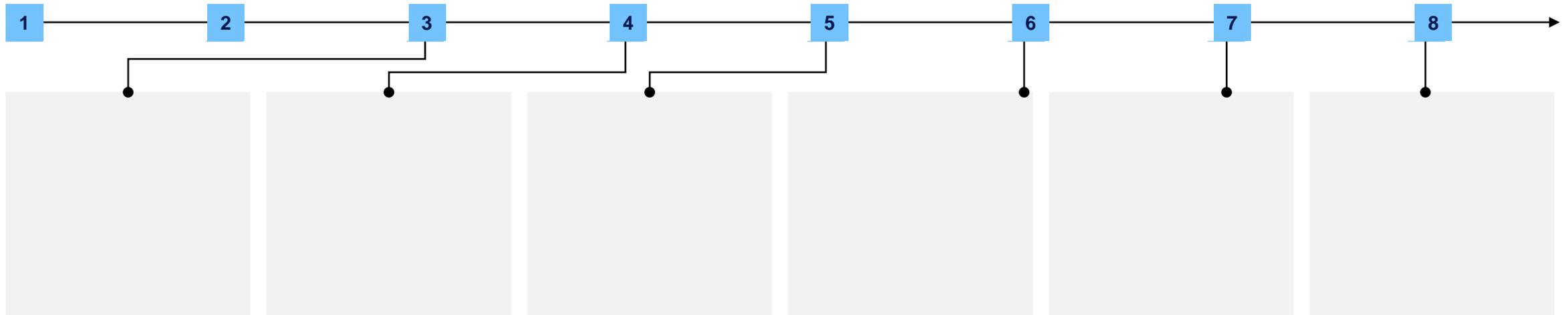


# Reflecting: student identified for support through external agency

<p>What additional “what-ifs”, if any, occur in the district?</p>	<p>Which “what-ifs” are most common in the district?</p>	<p>Which “what-if(s)” would have the biggest impact on a student?</p>	<p>What might be the root cause(s) of the most concerning “what-if(s)” in the district?</p>
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This handout will be used as a part of the final section: Aligning on implications of the reflection exercises

# Optional: If useful, detail another scenario not depicted in prior scenarios that may be common in the district



**Guiding questions:** What are some of the issues students in the district face? How might those come to the attention of staff currently? What happens when those items are surfaced? How might they get missed? What could one do to ensure those items are surfaced? What could one do to ensure the right action is taken?

# Reflecting: [Custom scenario]

<p>What additional “what-ifs”, if any, occur in the district?</p>	<p>Which “what-ifs” are most common in the district?</p>	<p>Which “what-if(s)” would have the biggest impact on a student?</p>	<p>What might be the root cause(s) of the most concerning “what-if(s)” in the district?</p>
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This handout will be used as a part of the final section: Aligning on implications of the reflection exercises

[Instructions to the Facilitator Using This Document](#)

[Executive Quick Start](#)

[Initial Student Wellbeing Services Review](#)

[In-Depth Student Wellbeing Services Review](#)

**[Planning Process](#)**

## Content

# Districts conducting the In-Depth Services Review can select from several tools through which they can reflect on the District's performance

Focus of upcoming section

## Standard components of the In-Depth Services Review

### District services reflection deep dive

An inventory of example practices, and reflection questions for districts to determine where they are doing well, and where there are opportunities to improve

**Guided review: Equip school professionals with tools to identify and address needs**

Overview of potential district practices: this overlay can help district and school student wellbeing service providers understand how suggested initiatives align to the MTSS framework for student mental health interventions

Component	Example practices	Description	Research and practice	Tier		
				1 Universal	2 Selective	3 Individual
Provides professionals with resources to identify student needs	Universal screening tools for baseline assessment of needs across student population	Assessment of student populations (e.g., student body, grade level) to determine whether individual students may be at risk for a mental health concern	Enables proactive and early needs identification rather than wait-to-ful approach (SAMHSA, 2013) Increases the likelihood of identifying students with identifying behaviors (American Counseling Association)	●		
	Aggregation of existing school data	Review of data a school collects (e.g., office discipline referrals, attendance data, GPA, health visits to school nurse) to identify students who might need extra support	Analysis of the data can help to identify risk factors (e.g., students demonstrating adjustment difficulties or other challenges) (SAMHSA, 2013)	●		
Provides tools to address student needs	Teacher/staff training on identifying warning signs for mental health needs	Professional development for all school staff to identify students in need of wellbeing and mental health supports	In-service mental health training increases in teachers' knowledge and ability to identify and address student mental health needs (SAMHSA, 2013)	●		
	Clear instructions to teachers on how to respond to student needs	Most teachers and other staff can recognize and respond to the warning signs for mental health needs, including "MH first aid" and when to engage extra school, community, or parent support	83% of teachers express concerns over students' mental well-being, but the vast majority feel ill-prepared to respond (American Psychological Association, cited by Mills, 2017)		●	
District & school-level coordination structures	Clear channels for accessing help for students, including crisis support and relevant referral services	Educators and staff know where to turn when a student needs extra support, that support is available, handoff is seamless, and referrals are followed up with to close loop	Clear referral and communication channels are essential for effectively providing student mental health services (e.g., counselors, social workers, psychologists, psychiatrists) (NCSEMI, 2013)		●	●
	Team-based approach for addressing school, class, and individual needs	Teams of educators, staff, specialized support personnel, and community stakeholders identify and address school, class, and individual needs	District- and school-level team approaches are more effective at integrating stakeholder input & identifying/addressing needs (SHAPE, 2021)		●	

Source: SAMHSA, Screening for Behavioral Health Risk in Schools, 6th year educators guide; American Psychological Association; NCSEMI; SHAPE 2020; SAMHSA, Teaching the Teachers of the Whole-School Approach (2011)

### Exercises for planning to improve supports

A step-by-step process to action-plan based on reflections from student experience reviews and the district services reflection tool

**5: For each priority initiative, think through what (if anything) needs to be done each year, and estimate effort required**

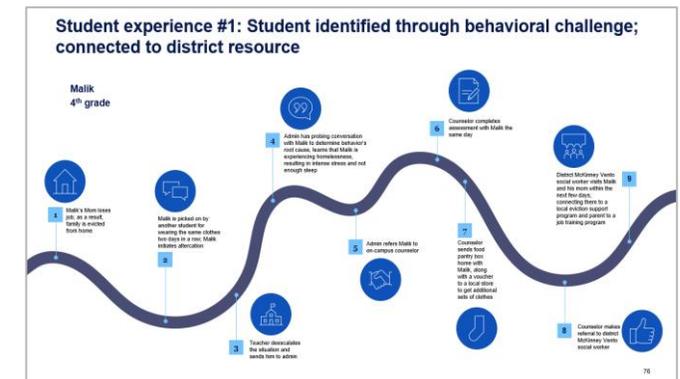
LEA effort required: ● Low ● Medium ● High

Strategy	Year 1 Semester 1	Year 1 Semester 2	Year 2 Onwards
1 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 (Priority initiative here)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Additional component

### Student experience reviews

Sample steps a student might take to access support in a district as a way to diagnose potential barriers from the perspective of a student



## Overview of these group discussion exercises

This section provides several group discussion exercises to help LEA leadership teams prioritize actions to improve their student services. We suggest completing these exercises as a group involving the LEA leadership team, LEA student wellbeing and/or mental health teams, and all others who participated in completing the reflection exercises.

These exercises can help LEAs:

- 1 Make a plan for answering any remaining questions that arose during the reflection exercises
- 2 Ideate and prioritize actions based on estimated ease of implementation, impact, and time/cost required
- 3 Align on a comprehensive, succinct description of each action
- 4 Identify potential funding sources for priority initiatives
- 5 Develop a timeline and plan for implementing these actions

# Set a time and agenda for these group discussion exercises, and invite the team

Example agenda

<b>8:00</b>	Kick-off
<b>8:10</b>	Review reflection key findings (report from each team)
<b>8:50</b>	Prioritize actions by ease of implementation and impact
<b>9:50</b>	Align on comprehensive, succinct description of each action
<b>10:35</b>	Break
<b>10:45</b>	Identify possible funding sources for new actions
<b>11:30</b>	Assign responsibilities and set plans for new actions (breakout)
<b>12:00</b>	Discuss any remaining questions
<b>12:15</b>	Close for lunch

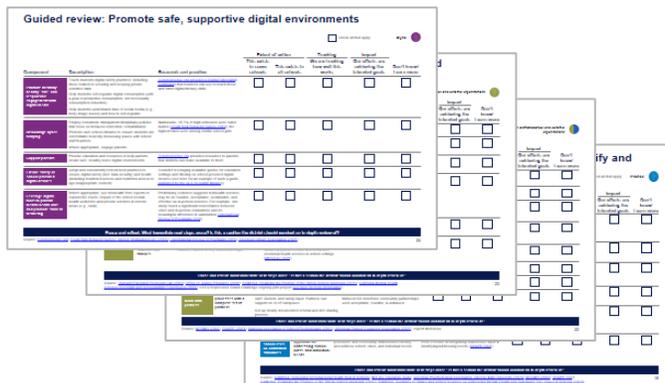
**Consider inviting the people who participated in completing the reflection exercises** (e.g., LEA leadership, LEA student wellbeing and/or mental health teams, school leadership, school student wellbeing and/or mental health teams, community leaders, parents, students)

# Gather the reflection learnings into one place

1

**Collect all completed reflection sections together into one place**

Gather all reflection worksheets. Consider grouping the worksheets from across the components together by question rather than keeping them grouped by section (e.g., put together the sheets answering questions about current funding for each component)

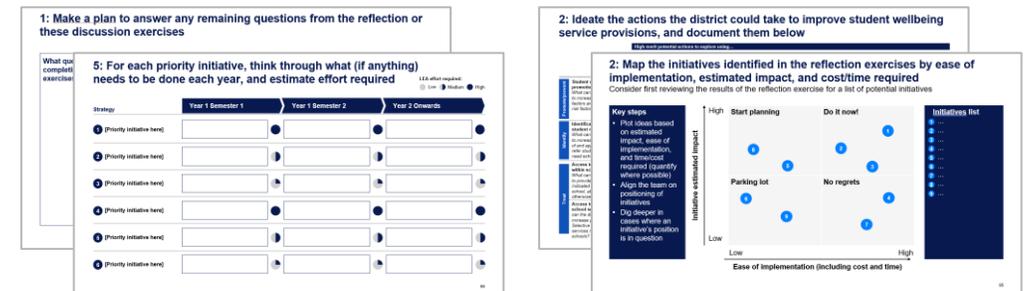


Sample reflections

2

**Make the reflection results and the discussion exercises available to everyone participating in these discussions**

Consider printing a copy of the rearranged reflection results for each participant. Consider printing a copy of the discussion exercises for each participant, and/or making posters or wall projections of the discussion exercises



Sample reflection pages

# 1: Make a plan to answer any remaining questions from the reflection or these discussion exercises

What questions, if any, does the team still have after completing the reflection or these discussion exercises?

What additional data would the team need, if any, to answer each of these questions?



## 2: Ideate the actions the district could take to improve student wellbeing service provisions, and document them below

### High merit potential actions to explore using...

**Activate capacity within the district and schools**

*What services can be provided directly by the district, or through the schools?*

**Activate capacity from other sources (e.g., community partnerships or state agencies)**

*What services can be provided through collaborating with others, such as state agencies or NGOs?*

**Build new capacity**

*What services would require additional resources (e.g., more mental health workers) or capacity to provide?*

Promote/prevent	<p><b>Student wellbeing promotion / prevention</b>  <i>What can the district do to increase protective factors and/or prevent risk factors?</i></p>			
Identify	<p><b>Identification of student needs</b>  <i>What can the district do to increase identification of and appropriately refer students who may need extra support?</i></p>			
Treat	<p><b>Access to support within school setting</b>  <i>What can the district do to provide Selective or Indicated services during school, at school, or otherwise by schools?</i></p>			
	<p><b>Access to care outside school setting</b>  <i>What can the district do to increase provision of Selective or Indicated services not outside of schools?</i></p>			

## 2: Align as a team on decision criteria for prioritizing solutions

Consider first reviewing the output from earlier reflection exercise(s).

### Impact

---

**Depth:** How much would the intervention change an individual student's experience?

**Breadth:** How many student experiences would the intervention change?

### Ease

---

**Complexity of the initiative:** Is the initiative a one-time change or would it require a number of actions and follow-ups?

**Level of required change:** How different is the initiative relative to what stakeholders are doing today?

**Bandwidth and desire for change:** Do stakeholders have the desire and capacity to make the desired change?

### Cost and time required

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**Resourcing:** How much additional resourcing (staff, space, start-up costs, ongoing costs) is required?

**Time to start:** How long would it take to begin planning the initiative?

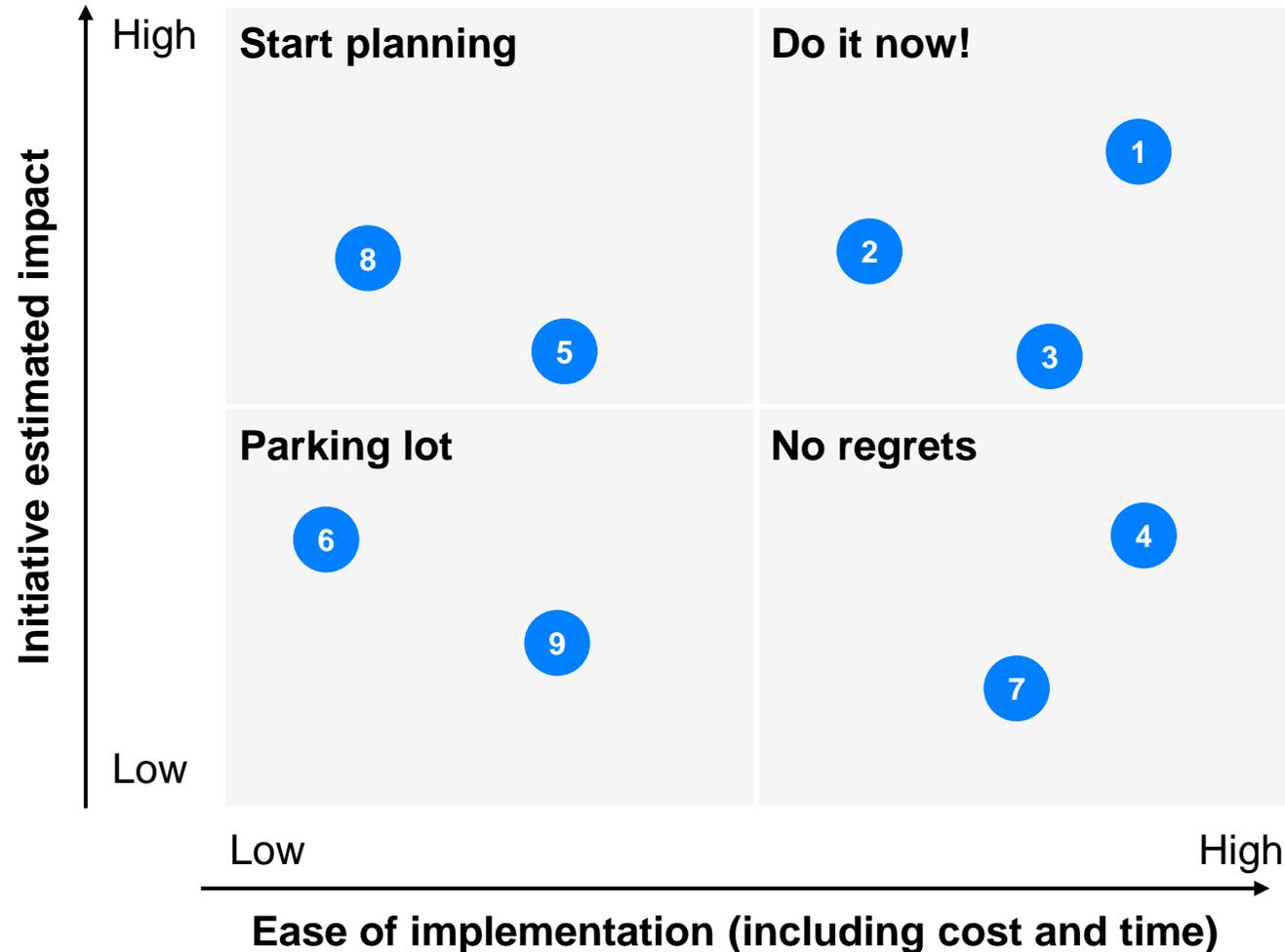
**Time to impact:** How long would it take before the initiative produced impact?

## 2: Map the initiatives identified in the reflection exercises by ease of implementation, estimated impact, and cost/time required

Consider first reviewing the results of the reflection exercise for a list of potential initiatives.

### Key steps

- Plot ideas based on estimated impact, ease of implementation, and time/cost required (quantify where possible)
- Align the team on positioning of initiatives
- Dig deeper in cases where an initiative's position is in question



### Initiatives list

- 1 ...
- 2 ...
- 3 ...
- 4 ...
- 5 ...
- 6 ...
- 7 ...
- 8 ...
- 9 ...

### 3: List the high-priority initiatives and provide a complete summary

Try to make the summary as complete/succinct as possible, precisely including all key elements of the action.

1 [Priority initiative here]: [provide summary here]

2 [Priority initiative here]: [provide summary here]

3 [Priority initiative here]: [provide summary here]

4 [Priority initiative here]: [provide summary here]

5 [Priority initiative here]: [provide summary here]

6 [Priority initiative here]: [provide summary here]

## 4: Identify potential sources of funding for the high-priority initiatives

Consider first taking another look at the list of current funding from the reflection exercise.

**What other funding could the district pursue for providing services in the district?**

- Medicaid / other insurance reimbursement?
- Other state / federal funding sources (DOE & other)?

**What needs to happen to secure this funding? Who will be responsible for ensuring it gets done?**

- Go funding source by funding source, as necessary



# 5: Identify primary owners and external stakeholders for each of the priority initiatives

Strategy	Responsible exec. leader	Accountable action owner	Other internal stakeholders	Other external stakeholders
1 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts direct, via schools]	[e.g., parents, community partners]
2 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts direct, via schools]	[e.g., parents, community partners]
3 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts, SEA, peer agencies]	[e.g., parents, community partners]
4 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts direct, via schools]	[e.g., parents, community partners]
5 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts direct, via schools]	[e.g., parents, community partners]
6 [Priority initiative here]	[First Last], [organization name]	[First Last], [organization name]	[e.g., districts direct, via schools]	[e.g., parents, community partners]

## Internal forums to manage progress could include:

### Effort-wide Steering Team:

- **Members:** Owners of each strategy, plus Superintendent and other members of leadership team as needed
- **Frequency:** Quarterly
- **Mandate:** Clear roadblocks, track key metrics, make pivots at the strategy level

### Content-area problem-solving groups:

- Where helpful, organize groups across priority initiatives to regularly help each other problem solve challenges and coordinate actions

# 5: For each priority initiative, think through what (if anything) needs to be done each year, and estimate effort required

LEA effort required:  
 ● Low   ● Medium   ● High

Strategy	Year 1 Semester 1	Year 1 Semester 2	Year 2 Onwards
1 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>
4 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>
5 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>
6 [Priority initiative here]	<input type="text"/>	<input type="text"/>	<input type="text"/>