



Building a Toolkit: Quality ERMHS Assessments, Reports, Goals, & Data Tracking

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Presentation Agenda & Goals

- Introductions: Who is in the room?
- Educationally Related Mental Health Services (ERMHS) History: AB 114 Overview
- Develop an Understanding of:
 - Referral Process of Regional or Tiered ERMHS
 - Assessment Plan Development
 - Types of Assessments
 - Report Writing & Templates
 - Goal Development & Goal Banks
 - Tracking Data & Templates
- Next Steps: Innovation and Dreams
- Questions/Comments from YOU!



History of AB 114 and Educationally Related Mental Health Services

1974:
California
Master Plan
for Special
Education

1984: AB 3632 (AKA
26.5 Services) Mandated
Interagency
Collaboration between
County Mental Health
and Education regarding
IEP mental
health/counseling
related services

Post AB 114
World...What
is NEXT?

1975: Special
Education/IDEA Law
Passes

2011: AB 114 Passes and
rendered AB 3632
inoperable. LEAs and
School Districts solely
responsible for mental
health/counseling related
services

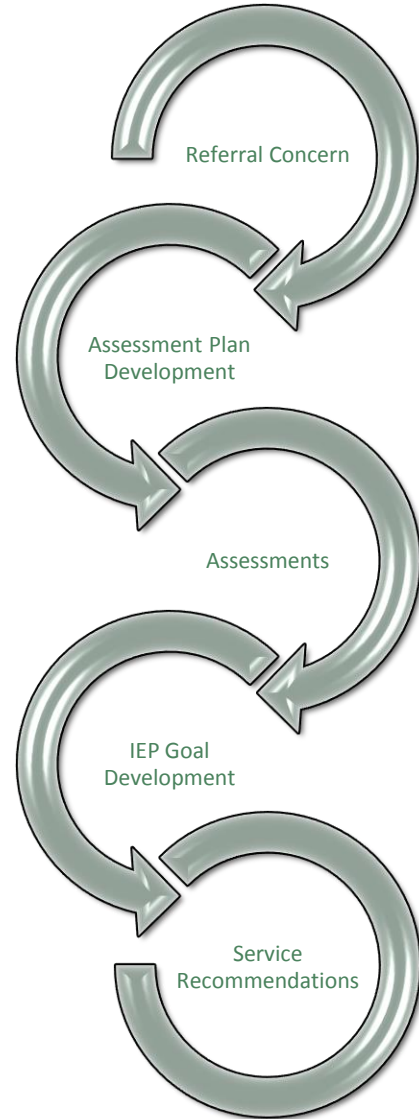


School Based Mental Health Services: Post AB 114

- LEAs/Districts Responsible for Services - can contract with outside agencies, county mental health, or provide the services through their own staff.
- Staff with PPS Credential should be involved in Supervision of the Continuum of Educationally Related Mental Health Services
- From 1984-2011, this was the only service another agency prepared the assessment, IEP goals, service delivery. It is common practice to provide a robust assessment to determine need, goals, services. Pre AB 114, “26.5” reports were based on a medical model and considered “treatment plans” that were often counter intuitive to the IEP and Educational Process.



Process Process Process..... The IEP is Sacred!



DRIVERS:

Concerns/Needs

DRIVES

Referral

DRIVES

Assessments

DRIVES

Goals

DRIVES

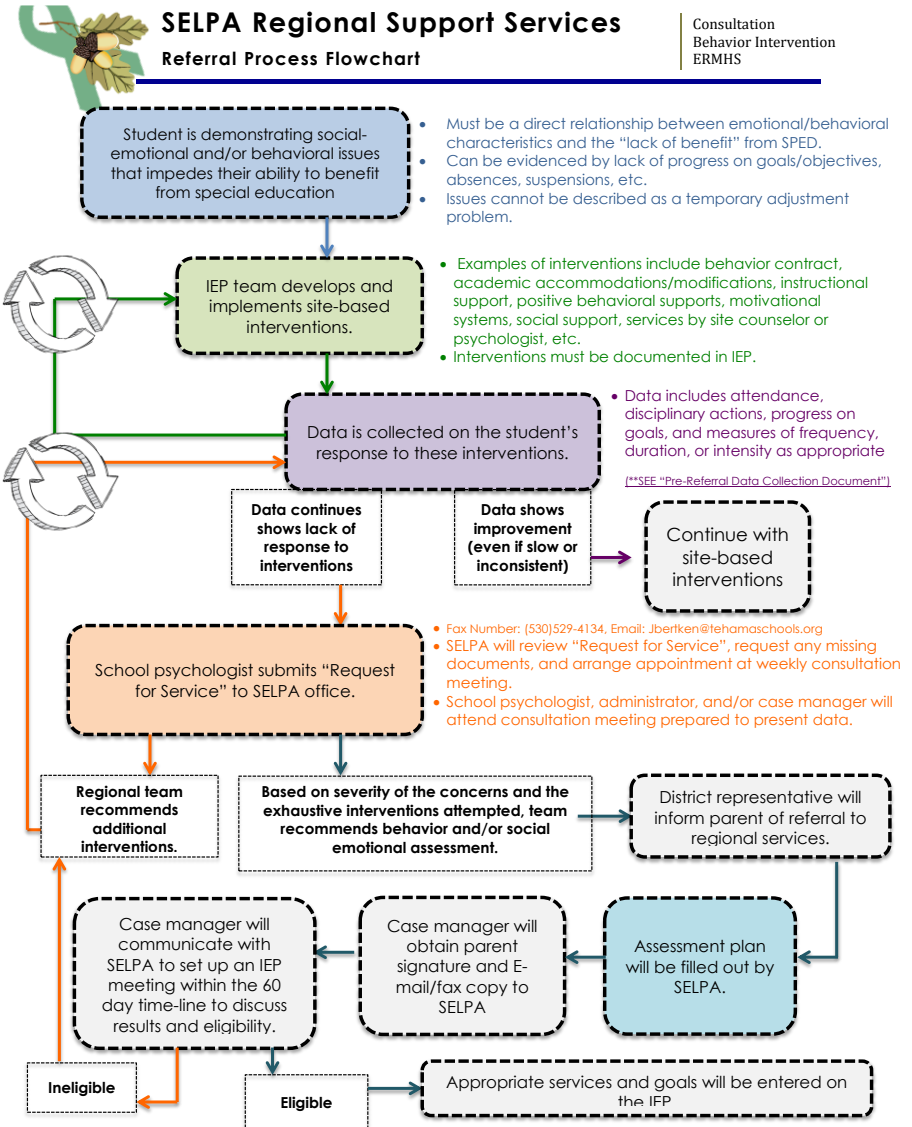
Services



The Continuous Process of Data tracking of needs (assessments), goals and services -- doesn't stop and should not be linear.



Referral Structure Template





SELPA Regional Support Services

Request for Service

Consultation
Behavior Intervention
ERMHS

900 Palm, Red Bluff, CA 96080 | Phone: 530.527-8564 | Fax: 530.529-4134

Student Name:	District:
Date of Birth:	School:
Grade:	Contact Person:
Parent Name:	Contact Phone:
Parent Contact:	Date of Request:
<input type="checkbox"/> Administrator Approval:	
Sign: _____	Date: _____

Please indicate the IEP team concerns:

Impulsive/Disruptive Behavior

Describe: _____

Depression/Withdrawal

Describe: _____

Anxiety/Stress

Describe: _____

Anger/Aggression

Describe: _____

2 REGIONAL SUPPORT SERVICES

Please Check Boxes to Indicate Existing Interventions:

Behavior	Social-Emotional
<u>Tier 1</u> <input type="checkbox"/> PBIS <input type="checkbox"/> Classroom token economy <input type="checkbox"/> Other: _____	<u>Tier 1</u> <input type="checkbox"/> Class-wide Social-Emotional Curriculum (Specify: _____) <input type="checkbox"/> Other: _____
<u>Tier 2</u> <input type="checkbox"/> Check-in-Check-out <input type="checkbox"/> Visual Schedule <input type="checkbox"/> Behavior Report Cards <input type="checkbox"/> Behavior Contract <input type="checkbox"/> Other: _____	<u>Tier 2</u> <input type="checkbox"/> Small group social skills instruction <input type="checkbox"/> Friendship Group/Lunch Bunch <input type="checkbox"/> Other: _____
<u>Tier 3</u> <input type="checkbox"/> Behavior Intervention Plan (BIP) <input type="checkbox"/> Functional Behavior Analysis (FBA) <input type="checkbox"/> Other: _____	<u>Tier 3</u> <input type="checkbox"/> Counseling Services (___ min/ _____ Provided by: _____ <input type="checkbox"/> Service written into IEP <input type="checkbox"/> Goals included in IEP <input type="checkbox"/> Other: _____

Please Identify Services Recommended by IEP Team:

- Behavior Assessment
- ERMHS Assessment
- Intensive Behavior Interventionist (IBI)
- Other: _____

TCDE Office Use Only

Date Received: _____

Date Consultation Meeting Scheduled: _____

District Rep. Attending Consultation Meeting: _____



Assessment Plan Development

- Referral processed through the ERMHS Provider (SELPA, COE, LEA, etc.) at the Coordinator level
- Case staffing referral model: Referring party joins ERMHS team and presents the case and need
- ERMHS Team develops the Assessment Plan for the LEA/Referring party and an IEP is scheduled to present to the paren. What Boxes are checked? It Depends!
 - ✓ Social Emotional/Behavior
 - ✓ Other
 - ✓ Health
- The ERMHS assessment can also be concurrent with a full initial or triennial evaluation.



Assessment Tools

(Note: Not Exhaustive or Prescriptive)

Standardized Assessments

- ❖ Behavior Assessment System for Children 3rd Ed.
 - Rating Scales, Structured Developmental History, Self-Reports, Observational System, Parenting Relationship Scale, etc.
- ❖ Becks Youth Inventory – 2nd Ed.
- ❖ Resiliency Scales for Children & Adolescents: A Profile of Personal Strengths
(sister assessment to the Becks)
- ❖ Trauma Symptom Checklist for Children
- ❖ The Revised Children's Manifest for Anxiety Scale – 2nd Ed.
- ❖ Behavior and Emotional Rating Scale – 2nd Ed.

Non Standardized Assessment

- ❖ Interviews (Student and the Adults involved in the life of the student)
- ❖ Observations (Multiple Settings)
- ❖ Comprehensive Health & Developmental (if there is not a current one available)
- ❖ Neuro-sequential Model of Therapeutics: Clinical Metric (Dr. Bruce Perry's assessment/brain mapping)



Report Writing – Breakdown of Report:

Reason for Referral & Objectives of Assessment:

➤ Statement of Referral: SAMPLE Language:
“At the time of the referral, specific concerns included the following: impulsivity, difficulty managing her emotions, attention and concentration deficits. According to documentation provided by ABC School staff, the problems that are interfering with Wendy’s access to her educational program have not demonstrated adequate response to intervention attempts implemented at the site-level”

➤ Objectives of Assessment:

1. To determine Wendy’s current levels of social-emotional and/or behavioral functioning.
2. To determine the impact of Wendy’s social-emotional and/or behavioral problems on her educational program
3. To determine whether Wendy is eligible for Regional Educationally Related Mental Health Services
4. (If Eligible) To identify appropriate social-emotional and/or behavioral goals
5. To make recommendations for how Wendy will best be supported by school staff, family members, and/or other involved parties



Report Writing – Breakdown of Report:

School Intervention History/Previous Assessments

- Thorough History of Educational History, including what interventions have been put in place
- Use neutral language, especially if reporting discipline and/or previous placements related to disability areas. **Do not solely focus on discipline history**
- Use strengths-based approach - show what has worked in the history
- Report when the student was found eligible for special education (disability type) and placement / service history
- Other data points:
 - Health and Developmental History/School Nurse report or history
 - Previous psycho-educational and outside agency reports (if available)



Report Writing – Breakdown of Report:

Environmental Factors: Think ACEs

- ✓ History of trauma
- ✓ Exposure to domestic violence or substance abuse
- ✓ Abuse (Physical, Verbal, Emotional, Neglect)
- ✓ Incarcerated parents/caregivers
- ✓ Significant life transitions (moves, divorce, etc.)
- ✓ Medical Issues
- ✓ Greif (loss of caregiver or close family)
- ✓ Family history of mental health issues

Sample Language: “Paul has history of significant life changes, loss of loved ones, and exposure to substance abuse and domestic violence. Paul is currently living his paternal grandmother. Custody was granted to his grandmother on 1/1/20. In the current arrangement, Paul’s mother is able to contact Paul by phone for a ½ hour on weeknights and has visitation rights as long as it is supervised by a licensed professional. Paul’s father, is currently incarcerated. As per guardian report, his father is set to be released within 6 months of the writing of this report; however, this has not been independently confirmed. According to an interview with Paul’s mother, Paul was exposed to domestic violence when he was an infant. Paul’s parents had a long, difficult divorce that occurred when Paul was approximately one year old. According to other records, Paul has changed guardianship a number of times. Paul expresses sadness and frustration about his living situation and transitions.”



Report Writing – Breakdown of Report

- Observation: Multiple Settings
 - Classroom
 - Playground
 - Cafeteria
 - Testing
 - Other areas that behavioral/emotional issues may be occurring (bus, unstructured time, etc.)

- Interviews
 - Student
 - Parent(s)
 - Teachers and other educators involved with the student
 - Previous teachers
 - School Psychologist and/or School Counselor



Report Writing – Breakdown of Report

Assessment Results & Clinical Impressions:

Let's Take a look at some real life examples and
language



Report Writing – Eligibility & Recommendations

“Results of the current assessment suggest that Paul is experiencing social-emotional difficulties that significantly interfere with his ability to access to his Special Education program. Paul’s hyperactive, impulsive, defiant, and dysregulated behaviors are likely related to disruptions in his emotional development and a lack of coping strategies. The impact that Paul’s behaviors have on his education suggests that he could benefit from more services and supports directed at addressing his social-emotional challenges.

From the information gathered in this assessment, it appears that Paul DOES MEET eligibility criteria for Regional Educationally Related Mental Health Services.”



Report Writing – Eligibility & Recommendations

“Results of the current assessment suggest that Wendy is experiencing social-emotional difficulties that significantly interfere with her access to her Special Education program.

The results indicated that Wendy has very high anxiety, a limited internal locus of control and deeply rooted attachment difficulties that will take time and patience to help her learn new ways of coping

From the information gathered in this assessment, it appears that Wendy meets eligibility criteria for Regional Educationally Related Mental Health Services. ”



Goal Development

Self-Efficacy: By 1/2021, when prompted during a counseling session (while debriefing a behavioral incident), Paul will increase his sense of accountability for his behavior and control over his circumstances by identifying at least one way in which his behavior resulted in an undesirable consequence and how he might have acted differently to have had a more positive resolution (on at least 2/3 opportunities.)

PRO Tip: Baseline language should match Goal language (copy and paste helps)!



Goal Development

Emotional Self-Regulation: By 1/2021, When prompted during a counseling session, Paul will be able to describe his own anger response (demonstrating recognition of the physical symptoms of anger and impulsive reaction to those symptoms-- "Amygdala Hijack") and demonstrate three different strategies for pausing his initial impulsive response (mindfulness, deep breathing, visualizing, counting to ten, etc.) in order to give him time to think about the goals, potential efficacy, and possible outcomes of his behavior.

PRO TIP: Goals should be able to be both **OBSERVED** and **MEASURED!**



Goal Development

Emotional Self-Regulation: By 2/2020, given participation in one-on-one counseling, Wendy will increase her ability to set appropriate boundaries and increase her self-esteem by learning to 1) identify emotional triggers, 2) recognize associated feelings, and 3) respond appropriately using assertive communication skills to effectively get her needs met in 2 out of 4 situations.

PRO TIP: SMART GOALS:

- **S**pecific (simple, sensible, significant)
- **M**easurable (meaningful, motivating)
- **A**chievable (agreed, attainable)
- **R**elevant (reasonable, realistic, results-based)
- **T**ime Bound (time based, time limited)



Service Offerings

- Individual Counseling
- Group Counseling (AKA Counseling and Guidance)
- Psychological Services (consultation/staff training)
- Social Work Services (consultation/staff training)
- Parent Counseling
- Behavior Intervention Services (coordination and consultation with behaviorists/ERMHS Coordinator on Behavior Intervention Plans (BIP) and/or Direct Treatment Protocols (DTP))
- Non-Public Day School and Residential Placement Oversight, Visits, Placement Assistance



Data Tracking - Big Picture

- ✓ Eligible Students by District/LEA of Accountability
- ✓ Percent of ERMHS of each District/LEAs Special Education Population
- ✓ Number of students exited
 - Per month
 - Per year
 - Since inception
- ✓ Referral Tracking:
 - By Month
 - Accepted
 - Declined
 - Interims/Coming in with ERMHS

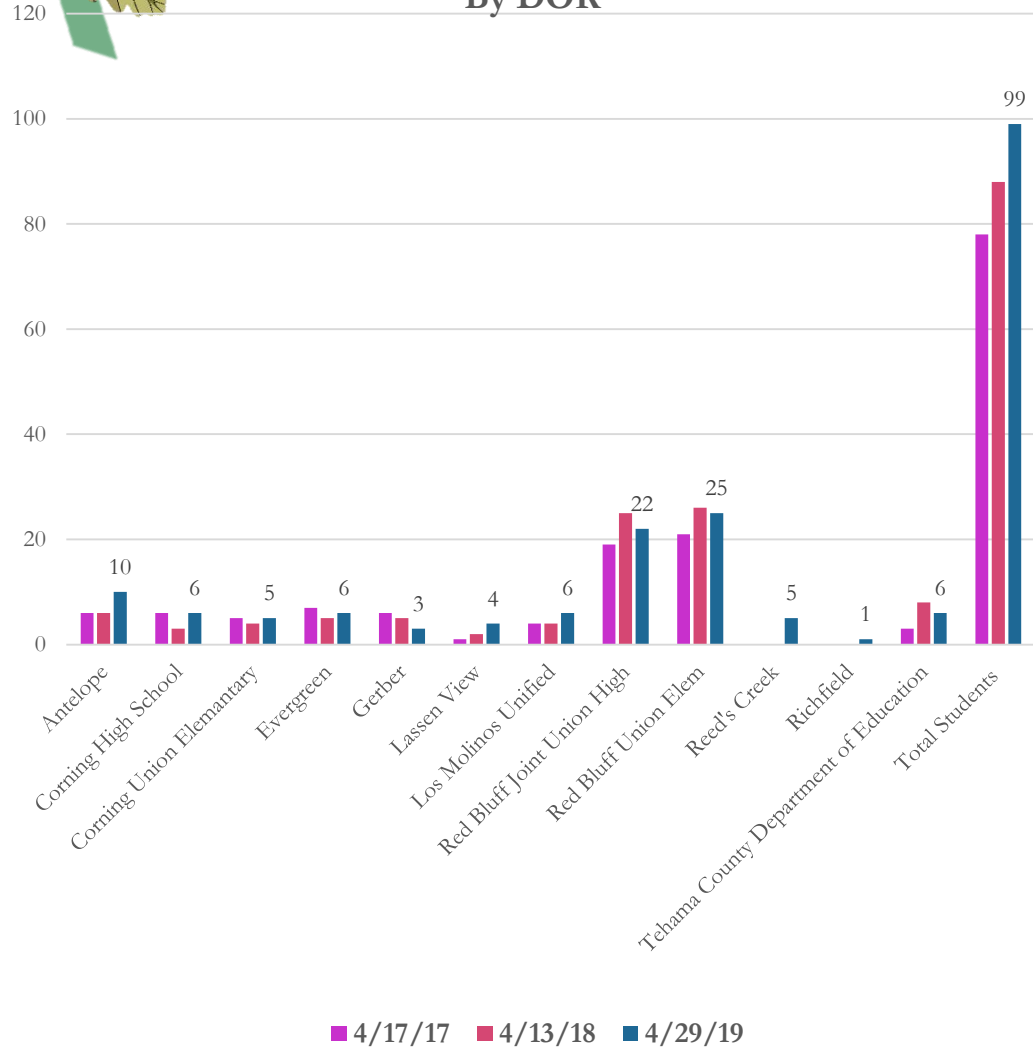
PRO TIP: Present Data at a stakeholders meetings:

- ✓ SELPA Governance
- ✓ Board Meeting
- ✓ Community Advisory Superintendents Monthly Council (CAC)
- ✓ Regional Meeting
- ✓ Cabinet
- ✓ Chief Business Official

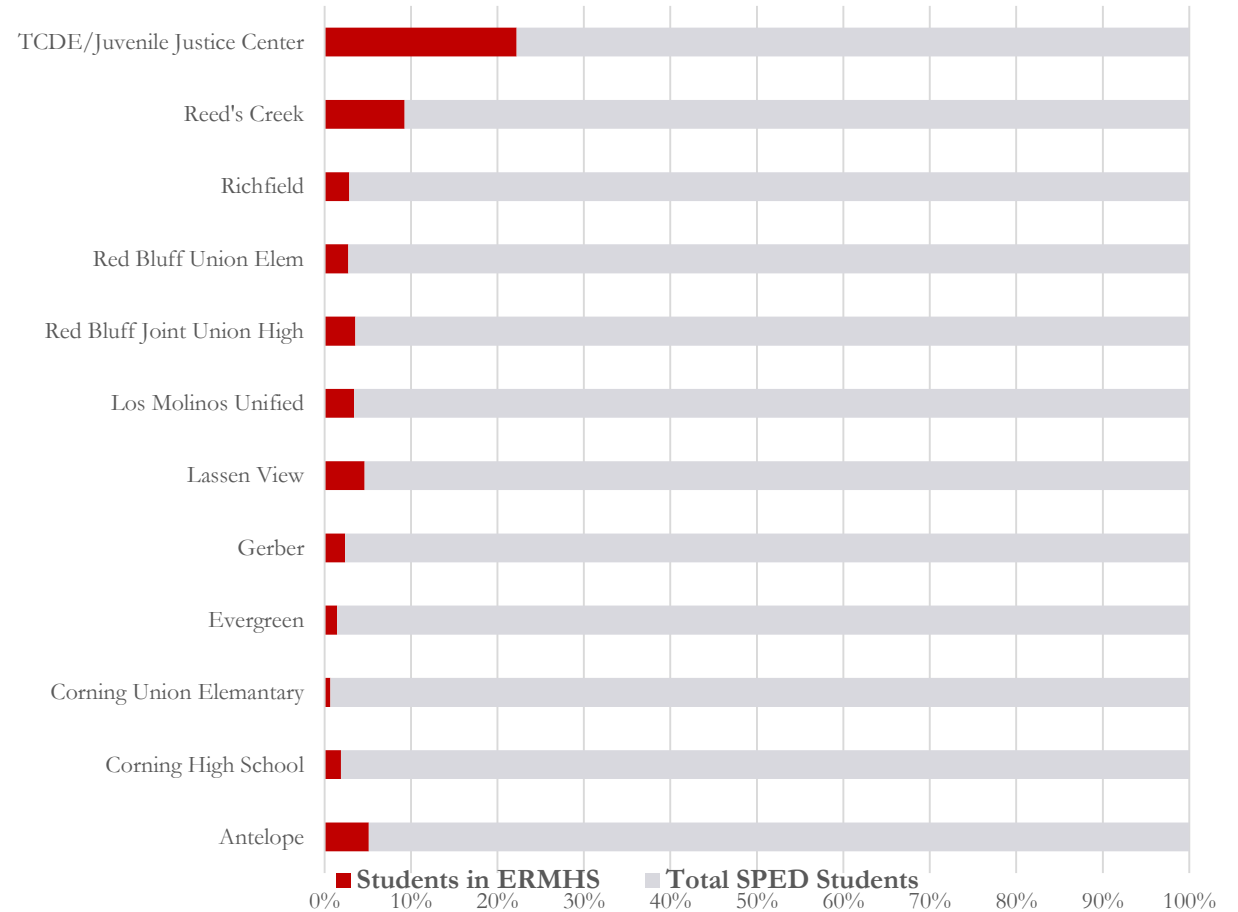


Data Tracking - Big Picture - Samples

By DOR



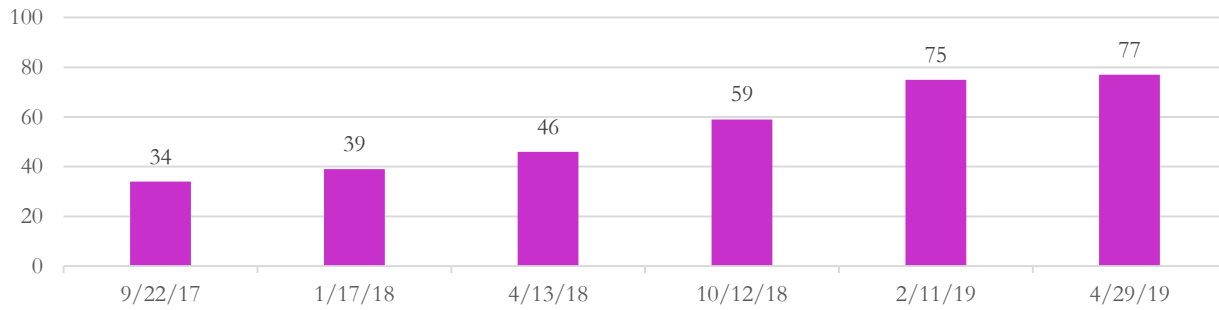
% of SPED Population with Regional ERMHS



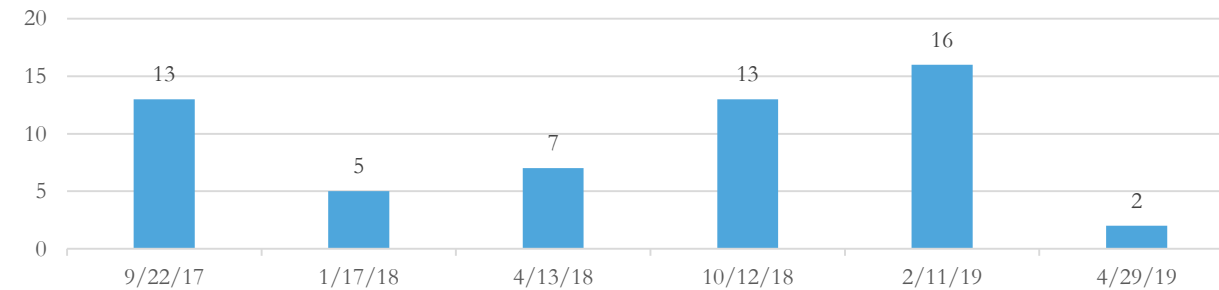


Data Tracking - Big Picture - Samples

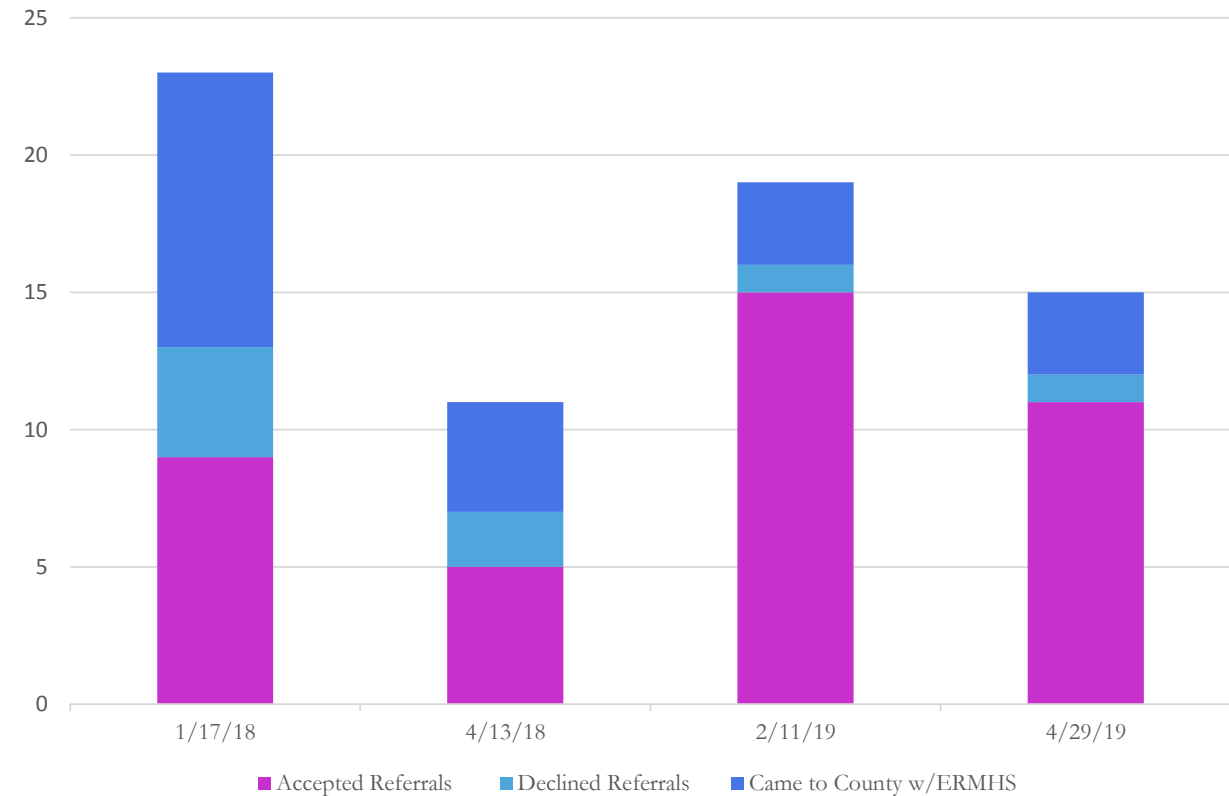
Number of Students Exited (Since Beginning of TCDE ERMHS)



Number of Students Exited (Since Last Data Analysis)



New students (since last data analysis)





Innovations and Dreams

- ❖ Braiding funding to offer more robust offerings
- ❖ Increasing prevention work and collaborating with our Preschool Intervention Team
- ❖ Increasing Parent-Child Interactive Therapy as a service option
- ❖ Improving and Increasing the use of Direct Treatment Protocol (DTP) implementation
- ❖ Increasing our use of Neuro-Sequential Model of Therapeutics Assessment (Dr. Bruce Perry)
- ❖ Offering more targeted professional development to our districts



Questions & THANK YOU!

Questions???

&

Thank YOU for Attending & YOUR commitment



Mental Health
Awareness Month