



School Health Services NATIONAL QUALITY INITIATIVE

Accountability • Excellence • Sustainability

an initiative of the School-Based Health Alliance and the Center for School Mental Health



This is an ABBREVIATED version of the Quality Assessment.

Please go to www.theSHAPEsystem.com to complete this form electronically on our interactive, user-friendly platform.

School Mental Health Quality Assessment Tool for School Districts

INSTRUCTIONS: The School Mental Health Team District Leader should complete this assessment tool, answering questions about the status of the Comprehensive School Mental Health System (CSMHS) in their school district**. CSMHS are defined as school district-community partnerships that provide a continuum of mental health services to support students, families and the school community. “Mental health services” include activities, services and supports that address social, emotional and behavioral well-being of students, **including substance use**.

District "Quality" refers to the characteristics which contribute to or directly represent the overall standard of services and supports provided in schools, based on established best practices in school mental health research, policy and practice.

** "District" refers to your district-level comprehensive school mental health system (or district CSMHS), including all school-employed, community-employed, and other partners and stakeholders, including youth and families, who comprise your team.

How do I answer for ALL the schools in our district?

We anticipate most districts will have a range of self-ratings from 1 to 6, as every district has strengths as well as areas for improvement. Also, the schools within your district might reflect a range of progress as well, and a variety of data collection and reporting strategies, depending on how different the schools in your district are. For items where some of your schools have the indicator “Fully in Place” or a 6, but other schools are more accurately described as having the indicator “Not in Place”, please respond in between 1 and 6 accordingly. That is, please respond based on your district as a whole; a “mix” of progress among the schools in your district would be reflected by a rating of 2, 3, 4, or 5, depending on what that mix looks like.

This School Mental Health Quality Assessment Tool is designed for your district to self-assess your system’s quality. The team-based process of completing this Quality Assessment Tool is also intended to facilitate your team’s communication about various aspect of school mental health quality and establish a common language about how quality improvements are pursued in your local district.

Teaming

Many schools have teams that meet to discuss and strategize about student mental health issues. Schools may have one team devoted to the full continuum of mental health supports (mental health promotion to selective and indicated intervention) or they may have multiple teams that address different parts of the continuum (e.g., school climate team, student support team, intervention/tertiary care team, Tier 2/3 team, any other team that is tasked with addressing student mental health concerns as part of their purpose). The following questions relate to any school mental health team(s) at schools in your district.

1. To what extent was your district's school mental health system team(s) multidisciplinary (diverse professional and non-professional team members included based on who was on the team)?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

2. To what extent did your district's school mental health system team(s) avoid duplication and promote efficiency? For example, consistent communication and coordination among various teams could be one strategy in place to avoid duplication of services.

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

3. To what extent did your district's teams employ best practices for meeting structure and process?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

4. To what extent did your district have systems in place to promote data sharing among school mental health team members?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

5. To what extent were students in your district, whose mental health needs could *not* be met in the school, referred or connected to community resources?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

Needs Assessment/Resource Mapping

Needs assessment is a collaborative process to evaluate the unique breadth, depth, and prevalence of student mental health needs in your community. Resource mapping is a method used to identify and link community and school-based resources with an agreed upon vision, organizational goals, strategies, or expected outcomes. It may also be referred to as asset mapping or environmental scanning.

1. To what extent has your district conducted a comprehensive student mental health needs assessment?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

2. To what extent has your district utilized your needs assessment to inform decisions about school mental health service planning (program selection, service array) and implementation?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

3. To what extent has your district conducted resource mapping to identify existing school and community mental health services and supports?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

4. To what extent did your district utilize resource mapping to inform decisions about school mental health service planning (program selection, service array) and implementation?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

Screening

Screening is the assessment of students to determine whether they may be at risk for a mental health concern.

During last school year:

1. **How many students were enrolled in grades K-12?** **Optional

[NUMERIC RESPONSE] _____

2. **Of the students in your district, how many were screened for mental health concerns of any type?** **Optional

[NUMERIC RESPONSE] _____

3. **Based on this screening process, what was the total number of students identified as being at-risk for or having mental health problems that interfered with functioning in their home, school, and/or community?** **Optional

[NUMERIC RESPONSE] _____

4. **Based on this screening process, what was the number of unduplicated students who received a school mental health service (in-person contact with school-employed or community-partnered mental health professional) within seven (7) days of identification of being at-risk for or having a mental health problem?** **Optional

[NUMERIC RESPONSE] _____

5. **Of those students who were screened, how many received:**

6. **Depression screening?** **Optional

[NUMERIC RESPONSE] _____

7. **If more than 0, what tool(s) did you administer?** _____

8. **Suicidality screening?** **Optional

[NUMERIC RESPONSE] _____

9. **If more than 0, what tool(s) did you administer?** _____

10. **Substance use screening?** **Optional

[NUMERIC RESPONSE] _____

11. **If more than 0, what tool(s) did you administer?** _____

12. **Trauma screening?** **Optional

[NUMERIC RESPONSE] _____

13. **If more than 0, what tool(s) did you administer?** _____

14. **Anxiety screening?** **Optional

[NUMERIC RESPONSE] _____

15. **If more than 0, what tool(s) did you administer?** _____
16. **General mental health screening (covers various risk factors and symptoms)?** **Optional
[NUMERIC RESPONSE] _____
17. **If more than 0, what tool(s) did you administer?** _____
18. **Other mental health screening?** **Optional
[NUMERIC RESPONSE] _____
19. **If more than 0, what tool(s) did you administer?** _____

Evidence-Based Services and Supports

Evidence-Based Services and Supports are programs, services or supports that are based directly on scientific evidence, have been evaluated in large scale studies and have been shown to reduce symptoms and/or improve functioning. For instance, evidence-based services and supports are recognized in national evidence-based registries, such as the Substance Abuse Mental Health Services Administration (SAMHSA), National Registry of Evidence-based Programs and Practices (NREPP), Blueprints for Healthy Youth Development, and Institute of Education Sciences (IES) What Works Clearinghouse. A full continuum of evidence-based services and supports within a district includes mental health promotion, selective prevention, and indicated interventions. The following questions ask about evidence-based services and supports at all three tiers.

Mental health promotion services and supports (Tier 1) are mental health-related activities, including promotion of positive social, emotional, and behavioral skills and wellness which are designed to meet the needs of all students regardless of whether or not they are at risk for mental health problems. These activities can be implemented school-wide, at the grade level, and/or at the classroom level. Please include services provided by school-employed and community-employed, school-based professionals.

Selective services and supports (Tier 2) to address mental health concerns are provided for groups of students who have been identified through needs assessments and school teaming processes as being at risk for a given concern or problem. When problems are identified early and supports put in place, positive youth development is promoted and problems can be eliminated or reduced. Sometimes these are referred to as mental health “prevention” or “secondary” prevention services. Please include services provided by school-employed and community-employed, school-based professionals.

Indicated services and supports (Tier 3) to address mental health concerns are individualized to meet the unique needs of each student who is already displaying a particular concern or problem and displaying significant functional impairment. Sometimes these are referred to as mental health “intervention” or “tertiary” or intensive services. Please include services provided by school-employed and community-employed, school-based professionals.

Mental Health Promotion Services & Supports (Tier 1)

Mental health promotion services and supports (Tier 1) are mental health-related activities, including promotion of positive social, emotional, and behavioral skills and wellness, which are designed to meet the needs of all students regardless of whether or not they are at risk for mental health problems. These activities can be implemented school-wide, at the grade level, and/or at the classroom level. Please include services provided by school-employed and community-employed, school-based professionals.

Examples include school-wide assemblies, grade level or classroom presentations for all students regardless of whether or not they are at risk for mental health problems.

1. How many unduplicated* students in your district received mental health promotion services and supports (Tier 1)? **Optional

* If a student received more than one Tier 1 service, the student should only be counted once.
[NUMERIC RESPONSE]_____

2. Among the students who received mental health promotion services and supports (Tier 1), how many students received evidence-based services and supports (i.e., recognized in national evidence-based registries): **Optional

[NUMERIC RESPONSE]_____

3. What was the reach of mental health promotion services and supports (Tier 1) in your district? **Optional

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|--------|-----------|-------|---------------|--------|
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

4. To what extent were all of your mental health promotion services and supports (Tier 1) evidence-based (as recognized in national registries) in your district? **Optional

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|-------|--------|--------|--------|------|
| Not in place | 1-25% | 26-50% | 51-75% | 76-99% | 100% |

Selective Services and Supports (Tier 2)

Selective services and supports (Tier 2) to address mental health concerns are provided for groups of students who have been identified through needs assessments and school teaming processes as being at risk for a given concern or problem. When problems are identified early and supports put in place, positive youth development is promoted and problems can be eliminated or reduced. Sometimes these are referred to as mental health “prevention” or “secondary” services. Please include services provided by school-employed and community-employed, school-based professionals.

Examples include small group interventions for students identified with similar risk profiles or problem areas for developing mental health problems.

1. How many unduplicated* students in your district received selective mental health services and supports (Tier 2)? **Optional

* If a student received more than one Tier 2 service, the student should only be counted once.
[NUMERIC RESPONSE]_____

2. Among the students who received selective mental health services and supports (Tier 2), how many students received evidence-based services and supports? **Optional

[NUMERIC RESPONSE]_____

3. What was the reach of selective mental health services and supports (Tier 2) in your district?

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|-------|--------|--------|--------|------|
| Not in place | 1-25% | 26-50% | 51-75% | 76-99% | 100% |

4. To what extent were all of your selective mental health services and supports evidence-based (as recognized in national registries) in your district?

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|-------|--------|--------|--------|------|
| Not in place | 1-25% | 26-50% | 51-75% | 76-99% | 100% |

Indicated Services & Supports (Tier 3)

Indicated services and supports (Tier 3) to address mental health concerns are individualized to meet the unique needs of each student who is already displaying a particular concern or problem. Sometimes these are referred to as mental health “intervention” or “tertiary” or “intensive” services. Please include services provided by school-employed and community-employed, school-based professionals.

Examples include individual, group or family therapy for general or special education students who likely meet criteria for a DSM 5 diagnosis.

1. How many students in your district received indicated mental health services and supports (Tier 3)?

* If a student received more than one Tier 3 service, the student should only be counted once.

[NUMERIC RESPONSE]_____

2. Among the students who received indicated mental health services and supports (Tier 3), how many received evidence-based services and supports (i.e., recognized in national evidence-based registries: e.g., Blueprints, NREPP, What Works Clearinghouse)?

[NUMERIC RESPONSE]_____

3. What was the reach of indicated mental health services and supports (Tier 3) in your district?

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|-------|--------|--------|--------|------|
| Not in place | 1-25% | 26-50% | 51-75% | 76-99% | 100% |

4. To what extent were all of your indicated mental health services and supports (Tier 3) evidence-based (as recognized in national registries) in your district?

| 1 | 2 | 3 | 4 | 5 | 6 |
|--------------|-------|--------|--------|--------|------|
| Not in place | 1-25% | 26-50% | 51-75% | 76-99% | 100% |

Evidence-Based Implementation

Evidence-based implementation is the integration of research findings from implementation science to school mental health care policy, practice, and operations.

1. To what extent did your district have a system in place for determining whether a school mental health service or support under consideration was evidence-based?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

2. To what extent did your district's evidence-based mental health services and supports fit the unique strengths, needs and cultural/linguistic considerations of students and families in your district?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

3. To what extent did your district utilize best practices to support training and implementation of evidence-based practices?

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

School Outcomes and Data Systems

Student Outcomes and Data Systems captures information about school mental health services, outcomes and data systems.

1. For how many unduplicated* students in your district who received mental health promotion services and supports (Tier 1) in the past year do you have documented improvement in academic functioning?

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 1 service, the student should only be counted once.

2. For how many unduplicated* students in your district who received mental health promotion services and supports (Tier 1) in the past year do you have documented improvement in psychosocial functioning?

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 1 service, the student should only be counted once.

3. For how many unduplicated* students in your district who received selective mental health services and supports (Tier 2) in the past year do you have documented improvement in academic functioning?

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 2 service, the student should only be counted once.

4. For how many unduplicated* students in your district who received selective mental health services and supports (Tier 2) in the past year do you have documented improvement in psychosocial functioning?

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 2 service, the student should only be counted once.

5. **For how many unduplicated* students in your district who received indicated mental health services and supports (Tier 3) in the past year do you have documented improvement in academic functioning?**

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 3 service, the student should only be counted once.

6. **For how many unduplicated* students in your district who received indicated mental health services and supports (Tier 3) in the past year do you have documented improvement in psychosocial functioning?**

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 3 service, the student should only be counted once.

7. **What was the total number of unduplicated* students in your district who received at least one Tier 2 or Tier 3 school mental health service last year?**

[NUMERIC RESPONSE] _____

* If a student received more than one Tier 2 or Tier 3 service, the student should only be counted once.

Other student outcomes:

1. What was the total number of mental health service referrals in your district made for students to receive mental health services *inside* of the school building?

[NUMERIC RESPONSE] _____

2. What was the total number of mental health service referrals in your district which resulted in students receiving mental health services *inside* of the school building?

[NUMERIC RESPONSE] _____

3. Number of unduplicated students in your district who had a school mental health service (in-person contact with school-employed or community-partnered mental health professional) within seven (7) days of being referred for mental health services *inside* of the school building.

[NUMERIC RESPONSE] _____

4. What was the total number of mental health service referrals in your district made for students to receive mental health services *outside* of the school building?

[NUMERIC RESPONSE] _____

5. What was the total number of mental health service referrals in your district which resulted in students receiving mental health services *outside* of the school building?

[NUMERIC RESPONSE] _____

6. Number of unduplicated students in your district who had a school mental health service (in-person contact with school-employed or community-partnered mental health professional) within seven (7) days of being referred for mental health services *outside* of the school building.

[NUMERIC RESPONSE] _____

7. Number of students placed out of district (including treatment center, alternative school placement, etc.) related to their mental health. This includes students placed out-of-district based on a special education classification, such as Emotional Disturbance.

[NUMERIC RESPONSE] _____

8. Number of students in your district admitted for inpatient psychiatric hospitalization (actual admissions, not to include Emergency Room visit only).

[NUMERIC RESPONSE] _____

9. If your district does not have data sources or systems in place to track one or more of the above questions, please indicate your primary barrier(s):

- *Inability to share data across systems (such as school system and community mental health provider)*
 - *Lack of staffing capacity*
 - *Lack of technological options/infrastructure*
 - *Lack of knowledge, training, time to create a data collection system*
 - *Other, please describe:*
-

Data-Driven Decision Making

Data-Driven Decision Making (DDDM) is the process of using observations and other relevant data/information to make decisions that are fair and objective. DDDM can help inform decisions related to appropriate student supports and be used to monitor progress and outcomes across multiple tiers (mental health promotion to selective and indicated intervention).

1. **To what extent did your district use data (through screening or another process) to determine what mental health interventions were needed by students?**

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

2. **To what extent did your district have a system for school teams to monitor individual student progress across tiers?**

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

3. **To what extent did your district have a system to monitor fidelity of intervention implementation across tiers?**

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

4. **To what extent did your district have a system in place for aggregating student mental health service and support data to share with stakeholders (e.g., school board, local and state education authority, funders, service providers) and make decisions about mental health service planning and implementation?**

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

5. **To what extent did your district have a system in place for disaggregating student mental health service and support data to examine district level outcomes based on sub population characteristics?**

| | | | | | |
|--------------|--------|-----------|-------|---------------|--------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| Not in place | Rarely | Sometimes | Often | Almost always | Always |

Thank you for completing the Quality Self-Assessment!

Standardized performance measurement is very new to the field of behavioral health, particularly school mental health. We would like to follow-up with some districts about their responses to understand how these indicators are working. May we contact you with follow-up questions about your answers to this self-assessment?

If yes, what is your preferred method of contact?

Phone: _____

Email: _____