

Getting Started with Tier 3: The Problem, The Why, and the Solution

@characterstrong



Elbow partners!







We need to be **Reminded** more than taught



Meet Your Presenters



Dr. Madeline Larson



Sr. Director of Product Development
School Psychologist &
Implementation Scientist

madeline.larson@characterstrong.com



Dr. Cameo Stanick

Sr. Director of Behavioral Health Implementation & Innovation Licensed Clinical Psychologist

cameo.stanick@characterstrong.com





The Problem that necessitates Tier 3



The Why that drives the work



The Solution that brings to life a Tier 3 system of support



Schools are the primary setting where children access needed mental health support.



Existing Struggles



One-size-fits-all



Reactive, Crisis Mode



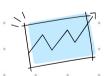
Labeling - Tier 3 students



Outsource support



Fragmented & patchwork



Limited ROI





Turn and Talk

Which of these existing struggles resonate the most with you?



What is the definition of a PROBLEM?



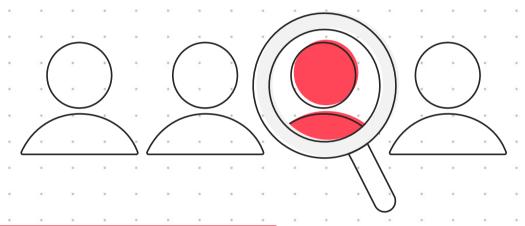
Problem = Discrepancy

What is expected?

What is happening?

Character Strong

What Research Says



1 out of 4 students struggle with mental health difficulties that impair daily functioning

Anxiety

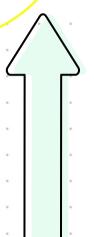
Depression

Executive Functioning

Trauma



Research: The Needs

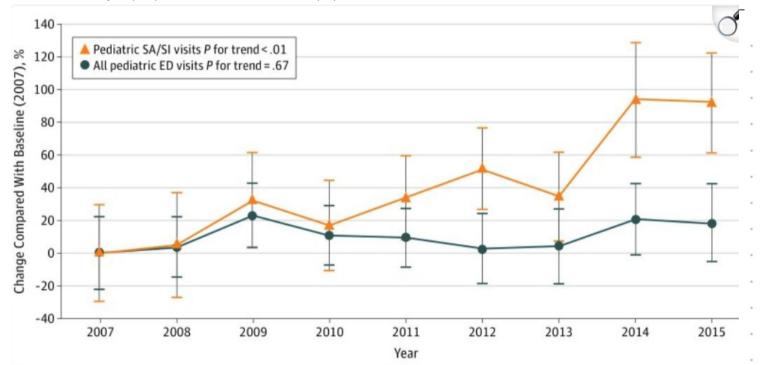


Increase in high intensity behaviors post-Covid that has not subsided

- ▶ 67% report property damaged or destroyed due to student behavior 59% have experienced verbal aggression or threats
- 49% have had to **evacuate other students** due to unsafe behavior
- 45% reported having witnessed students **elope** from class
- 40% are seriously worried about being injured by a student

Mental Health Emergency Department Visits

Figure. Associated Changes in Pediatric Emergency Department (ED) Visits for Suicide Attempts(SA) and Suicidal Ideation(SI)



Trends in Psychiatric Emergency Department Visits Among Youth and Young Adults in the US

Luther G. Kalb, PhD, ** Emma K. Stapp, PhD, * Elizabeth D. Ballard, PhD, * Calliope Holingue, MPH, * Amy Keefer, Ph Anne Riley, PhD*

BACKEROWID VIsits to the emergency department (ED) for psychiatric purposes are an indicator of chronic and acute unmet mental health needs. In the current study, we examined if psychiatric ED visits among individuals 6 to 24 years of age are increasing nationwide.

MITTORES. ED data came from the 2011-2015 National Hospital Ambulatory Medical Care Survey, a national survey of ED visits across the United States. Psychiatric ED visits were identified by using the International Classification of Diseases, Ninth Revision and reason-forwist codes. Survey-weighted logistic regression analyses were employed to examine trends in as well as correlates of psychiatric ED visits. Data from the US Census Bureau were used to examine population rates.

Between 2011 and 2015, there was a 28% overall increase (from 31.3 to 40.2) in psychiatric ED visits per 1000 youth in the United States. The largest increases in psychiatric ED visits per 1000 US youth were observed among adolescents (54%) and African American (53%) and Hispanic patients (91%). A large increase in suicide-related visits (by 25-fold) was observed among adolescents (4-fi-17 visits per 1000 US youth). Although psychiatric ED visits were long (51% were >3 hours in length), few (16%) patients were seen by a mental health professional durine their visits.

CONCLUSIONS: Visits to the ED for psychiatric purposes among youth are rising across the United States. Psychiatric expertise and effective mental health treatment options, particular those used to address the rising suicide evidenic among adolescents, are needed in the ED.



Separtments of "Mental Health and "Population, Family, and Reproductive Health, Johns Hopkins Bloomberg School of Public Health, Bostimere, Maryland: "Department of Population and Bindervice Stimenes, School of Health (Section), School (Health) Eulerschild, Solition, Maryland; "Exemply Kinger Institute Saltimore, Maryland and Benetic Epidemiology Research Bronch and "Experimental Therapeutics and Pathophysiology Branch, Robonal Sections of Mental Health (Benetics), Maryland, Maryland (Health (Heal

In Kall designed the study, drafted the initial manuscript, and conducted the analyses on the solubility available date. Are Drs. Stape, Blaider, Keders and Right and Michildings reviewed and evised the manuscript and provided important intellectual content, including conceptualization of ne study design, it of the current study within the literature, and approach to the analyses; and all authors approved the final manuscript as submitted and agree to be accommissible for all

DOI: https://doi.org/10.1542/peds.2018-219

Accepted for publication Jan 11 2019

Address correspondence to Luther G. Kalb, PhD, Kennedy Krieger Institute, Creamer Family Buildii 3901 Greenspring Ave, Baltimore, MD 21211. E-mail: Ikalb2®jhu.edu

PEDIATRICS (ISSN Numbers: Print, 0031-4005; Online, 1098-4275)
Copyright © 2019 by the American Academy of Pediatrics

WHAT'S KNOWN ON THIS SUBJECT: The emergency department (ED) is the national safety net for individuals with chronic and scute mental health issues. Monitoring trends in ED visits is critical because they can signal important changes in population health.

WHAT THIS STUDY ADDS: Between 2011 and 2015, psychiatric ED visits among youth in the United States increased. This trend was largely driven by adolescents, and youth of color. An increase in wisits related to self-injury and suicide was observed among

To cite: Kalb LG, Stapp EK, Ballard ED, et al. Trends in Psychiatric Emergency Department Visits Among Youth and Young Adults in the US. Pediatrics. 2019;143(4):e20182192

PEDIATRICS Volume 143, number 4, April 2019:e2018219

ARTI

100% increase from 2007-2015 (8 year span) Additional 10% increase from 2015-2020

Additional 51% increase since outset of COVID



Use Existing Data to Show Problems that Warrant Tier 3

Academic data

- ► Achievement scores
- ► Formative assessments

Behavior data

- Attendance
- ▶ Discipline
- Screening data

Mental health data

- ► Screening data
- ► Climate data



The Why



The Needs

Majority of youth experiencing mental health difficulties will not receive quality mental health services

Character Strong

The Needs

External Locus of Control

Paying Attention to Factors Beyond One's Immediate Control

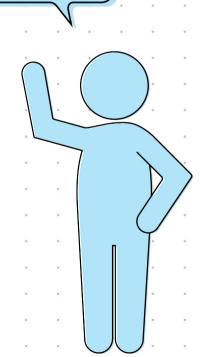


Fatigue

Frustration

Lack of Efficacy

Defeated



Lack of competent & confident workforce leads to...

Kick the Can

Some qualified staff get the feeling its not part of their scope of practice

Reliance on Contracted MH

Fragmented solutions that stop gap the workforce issue, that are often the best available option

Overloaded Special Education

Overburdened SPED services that can reduce the quality with which these students can be served



The Solution

Internal Locus of Control

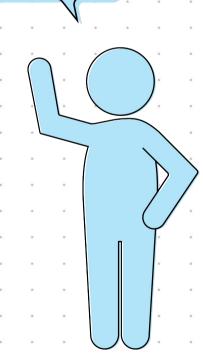
Paying Attention to Factors One Has Control Over

Hopeful

Efficacious

Energy/Vitality

Empowered



AGREE or DISAGREE

Educators have control over effective processes and interventions to support students with the greatest need for support

AGREE or DISAGREE

Schools get stuck in crisis, reactionary mode when Tier 3 is weak

AGREE or DISAGREE

Tier 3 is stronger when schools continuously improve Tier 1 and Tier 2

Character Strong

Do you believe in

PREVENTON?

Tier 1 is Prevention

Tier 3

Few Students

Tier 2

Some Students

Tier 1

Every Student Receiving Foundational Support

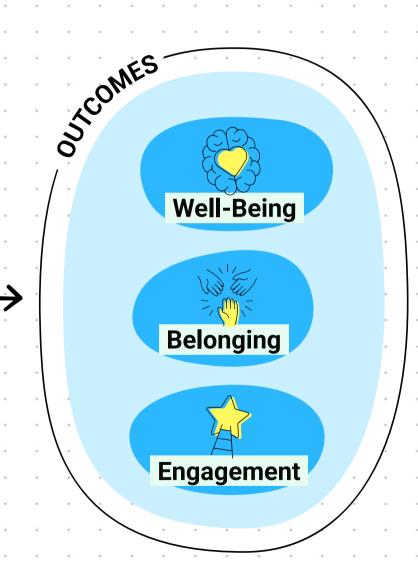
What happens when students do not consistently receive high-quality Tier 1 supports?



What are the foundations of PREVENTION?



- 1. Environment
- 2. Relationships
- 3. Teaching & Learning



Daily Workflow / Routine

Desired Students Outcomes: Well-being, belonging, and engagement in academics



Setting Up Class (Teaching)

- Routines
- Community Agreements/ **Expectations**
- Social and emotional skills













Ending





After

Transition into Class

Greeting at the

Precorrection

Positive

Door

- Class
- Start of
- Classroom **Meeting with** Community **Building &** Neutralizing Routine
- Visual Schedule with First-Then Sequences

 Interspersing Choice

During

Class

- Opportunities to Respond
- Opportunities for Voice
- Banking Time

Class

• Exit '1 Thing'

- Positive Farewells at the Door
- Precorrection

- Class Indirect
- compliments through other adults

Responding to Behavior: Behavior-Specific; Proximity, Redirections, Effective Prompts; Teaching to Behavior with Empathy; Restorative Practices

Praising Effort and Behavior: Genuine, specific, and timely recognition to strengthen academic effort and behavior to create a safe, productive, and positive classroom environment

WTF

Wait-to-Fail Two Levels

Students do not access the foundational experiences to be well, belong, and engage in learning experiences

Tier 1

Students with needs for additional support are unable to access early intervention

Tier 2



What happens when

EARLY INTERVENTION

is weak or non-existent?



Proactive is anticipating that some students need targeted Tier 2

Tier 3

Few Students

Tier 2

Some Students Receiving
Targeted Support

Tier 2 is all about activating early intervention as close to the time when a student's need emerges

Tier 1

Every Student



Formula for Tier 2

Some Students (who) +

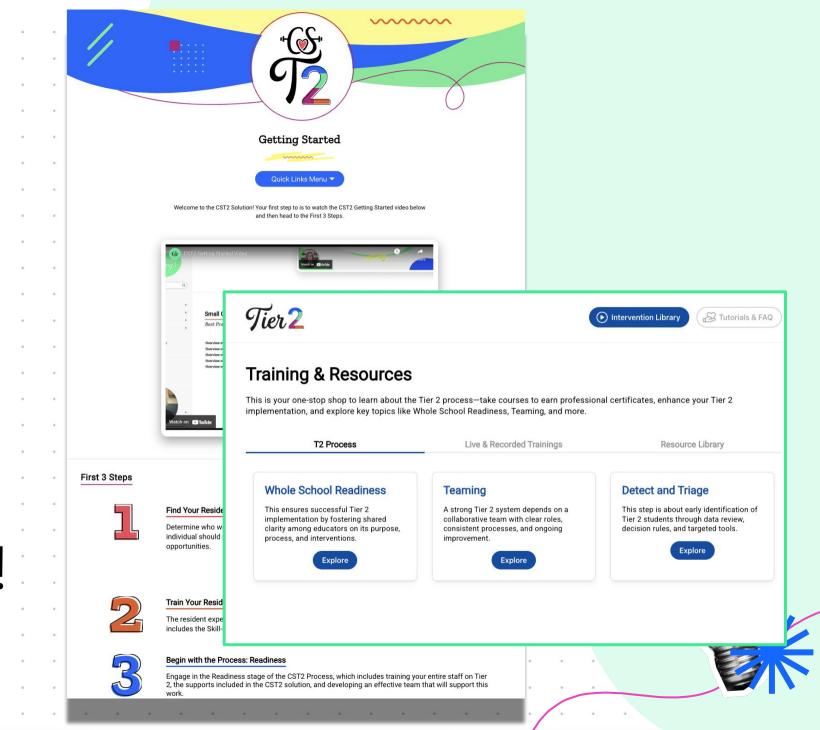
Targeted Early Intervention (what) +

Team-Driven Problem-Solving (how) =





Upcoming Changes to the CS T2 platform!





Why Tier 3 in Schools?



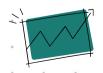
There are students with intense needs who are most at-risk of negative life-course outcomes.



Students need relational supports to change their behaviors.



Families and caregivers struggle to connect with referral agencies.



Schools can provide the necessary supports to drive system change and positive student outcomes.

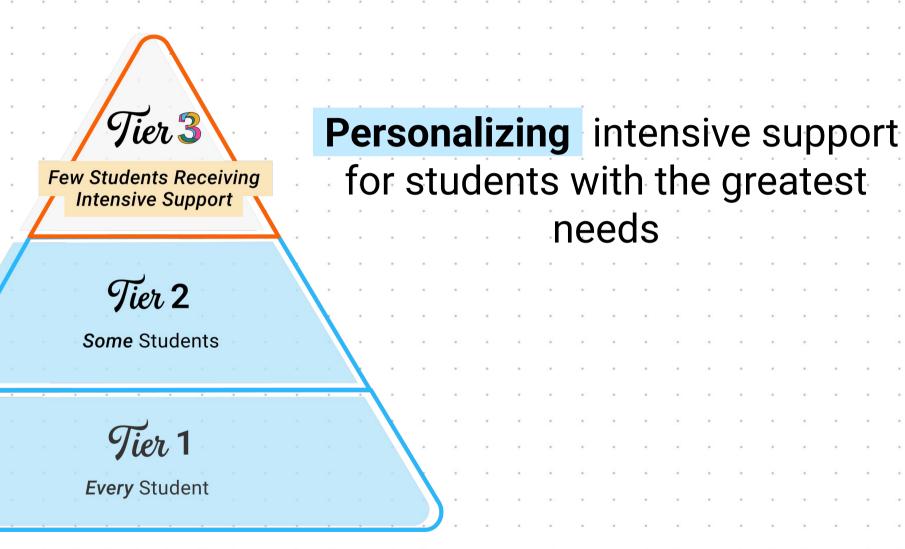


The Solution



What does successful Tier 3 support look like?





needs

Character Strong

Formula for Tier 3

Few Students (who) +

Intensive, Personalized Support (what) +

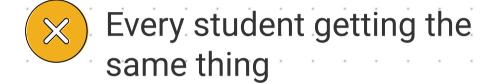
Team-Driven Problem-Solving (how) =





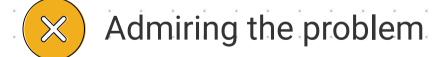
What Tier 3 is NOT





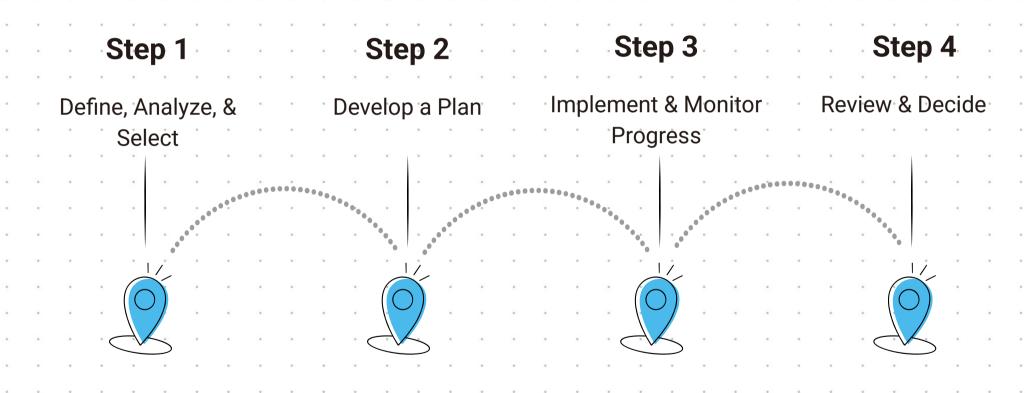


Guesswork



Getting stuck in reactive, crisis

CS Tier 3 Process



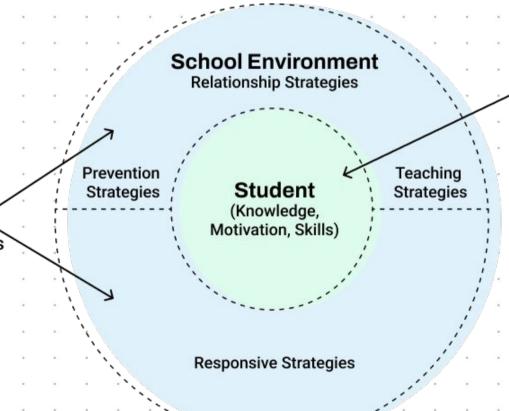
Character Strong

Solution #1:

Identified Root Cause

Tier 3 Model

Person by Environment Approach to Tier 3



Skill Support Pathway

Students with mental health needs

- Knowledge
- Motivation
- Skills

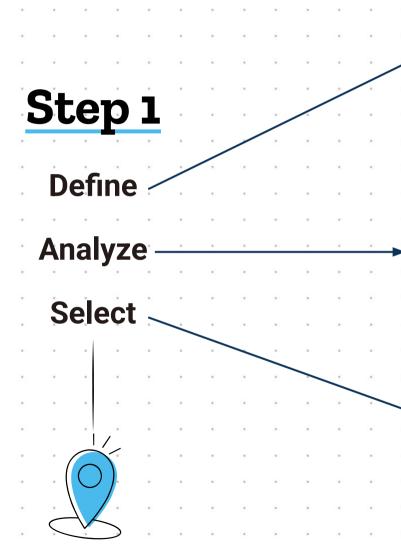
*informed by a practical approach to CBT

Environment Support Pathway

Students with challenging behaviors

- Relate
- Prevent
- Teach
- Respond

*informed by a practical approach to FBA



Define the Need:

- Behaviors to decrease that have a negative impact on self, others, environment
- Behaviors to increase that will facilitate / enable better success in school

Analyze Why the Need Exists:

Intense Behavior that Requires Environment Support

or

Mental Health Need that Requires Skills and Supportive Relationships

Select a Personalized Support Pathway

- Environment Support Pathway
- Skill Support Pathway



Evidence-Based Tier 3 Supports



Environment Support Pathway Function-based behavior intervention planning for students with challenging behaviors that result in safety concerns, negatively impact learning environments, or harm relationships with others. This Pathway guides educators to gather and use data from a practical functional behavioral assessment to develop an effective Intervention Blueprint.

The Intervention Blueprint includes:

- Teaching strategies to support the acquisition and use of skillful replacement behaviors
- · Proactive strategies to prevent unskillful behaviors from occurring
- Responsive strategies to reinforce replacement behaviors and address unskillful behaviors



Skill Support Pathway Delivery of common elements of evidence-based practice to address the student's underlying mental health need. This Pathway supports students to acquire and apply knowledge and skills that enable them to overcome challenging situations in school and outside of school and achieve important goals.

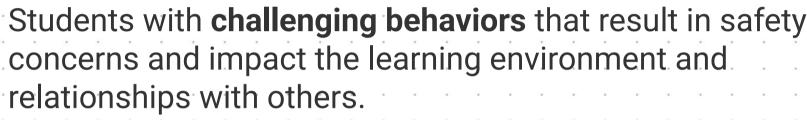
Precise skill support is provided by the following:

- Identify the top mental health need (e.g., anxiety, depression, executive functioning, trauma)
- Access to resources (session content, student workbooks, family resources) to deliver tailored skill support that addresses the identified mental health need



Environment Support

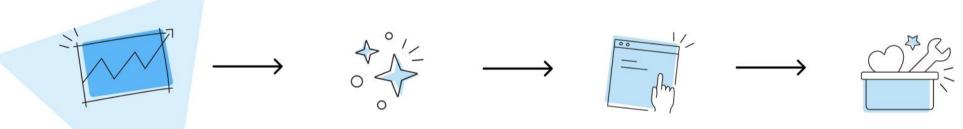
Who is it for?



- Decrease in behaviors that are getting in the way
- Increase in behaviors and skills that improve daily functioning in school



Function-based Behavior Support Plans



Gather FBA Data

Use FBA to Develop a Hypothesis

Create a Pathway Chart

Develop a Behavior Support Plan



Skill Support

Who is it for?

Students with underlying mental health needs who need a supportive relationship to learn skills and strategies to improve self-regulation to respond effectively to challenging situations and more consistently meet expectations in school and outside of school

- Decrease in behaviors that impair aspects of daily life functioning in school and outside of school
- Increase in knowledge and skills that result in improved mental health and daily life functioning

Skill Supports

Personalized to Specific Mental Health Needs

Courageous & Confident (Worry, Fear, & Anxiety)

Skills and gradual practice to face situations that cause worry, fear, or anxiety to show up to gain courage and confidence to engage more fully in experiences that lead to long-term goals.

Purposeful & Proud (Depressed, Irritated)

Skills to change thinking patterns and improve coping skills to feel and function better by engaging more fully in life instead feeling down and irritable.

Regulated & Rising

(Trauma, Adversity)

Skills, supportive relationships, and gradual practice to better regulate emotions and demonstrate resilience in response to situations that are reminders of adverse experiences.

Focused & Successful (Executive Functioning)

Self-management tools and reminders to improve executive functioning through keeping time and materials organized, regulating attention to stay focused and managing impulses.





Turn and Talk

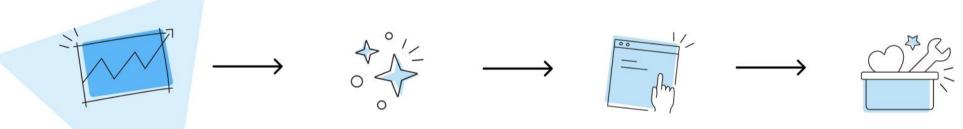
What interventions do you use for Tier 3?



Solution #2:

Personalized Supports Matched to Identified Root Cause

Function-based Behavior Support Plans



Gather FBA Data

Use FBA to Develop a Hypothesis

Create a Pathway Chart

Develop a Behavior Support Plan



Definition of FBA

An information gathering process to identify the environmental factors that reliably predict and maintain specific unskillful behaviors to inform the development of a personalized behavior support plan



An FBA takes us from....

Form: the observable behavior we see.

to

Function: the reason why the behavior we see is happening.





Share out...

What do you think is the importance of a FBA?





Importance of FBA

- Personalized Interventions
- Effectiveness
- Positive Approach
- Data-Driven Decisions
- Prevention of Escalation





Outcome of FBA: Generate the Hypothesis

When [activating event] occurs [student's name] exhibits [unskillful behavior] in order to [function of behavior]. This is more likely to take place on day when [setting event description].

How confident is the team that the hypothesis statement is accurate and defensible?







Turn and Talk
What might happen if
the hypothesis
statement is NOT
accurate and
defensible?

Definition of Behavior Support Plan

A document that outlines the specific teaching, proactive, and replacement strategies informed by the Pathway Chart that educators will implement to provide effective environmental support.

Teaching Strategies

Proactive Strategies

+ : :

Responsive Strategies



Behavior Support Plan



Teaching Strategies



Proactive Strategies



Responsive Strategies

Desired Skillful Behavior

Functionally Equivalent Replacement Behavior (FERB) **Prevention Strategies**

Setting Event Strategies

Reinforcement Strategies

Progressive Response

De-Escalation



Skill Support Identifying the Top Needs

Gather input from the family,
educators, and the student about the
top mental health need in order to
select a precise skill support

	EDUCATOR TOP NEED	FAMILY TOP NEED	STUDENT TOP NEED
Courageous and Confidence (overcome worry, fear, anxiety) Learn skills to manage anxious feelings Get better at facing fears to not miss out on important experiences Manage uncomfortable thoughts about something bad happening		A	
Purposeful and Proud Skill Support (address feeling depressed and irritable) • Learn skills to feel better and more hopeful • Get better at managing feelings of sadness and frustration • Engage more positively in meaningful activities	A		
Focused and Successful (improve executive functioning) • Learn strategies to stay focused, motivated, and organized • Get better at completing responsibilities independently • Improve on-task behavior in class or at home when completing work		A	
Regulated and Resilient (overcome adverse experiences in life) • Learn skills to overcome adverse experience encountered in life • Get better at managing situations that cause big emotions • Stay more engaged in situations instead of get upset and withdrawal or escape			

Top Needs Tool

Select the Skill Support that best addresses the student's top need. 1 5 Courageous & Confident Purposeful & Proud (Worry, Fear, & Anxiety) (Depressed, Irritated) O Select O Select ~~~~~~ 5 5 Focused & Successful Regulated & Resilient (Executive Functioning) (Trauma, Adversity) Select O Select ~~~~~~

What does the student need to improve functioning?



Overcome worry, fear, and anxiety to feel more courage and confidence



Address **feeling depressed and irritable** to feel more purposeful and proud and engage in enjoyable experiences



Improve executive functioning and self-management to be more focused and successful with completing daily responsibilities



Overcome adverse experiences (trauma) by learning skills and accessing supportive relationships to improve regulation and resilience



Courageous and Confidence (Worry, Fear, Anxiety) Common Elements of Evidence-Based Practice

Alliance & Relationship

Psychoeducation and Normalize

Teach Skills (cognitive, emotion, and behavior regulation)

Gradual Exposure

Generalization Practices to Apply Outside of Sessions

Increased knowledge

Acquisition of skills

Increased Self-Awareness

Application of skills

Reductions in fear and anxiety

Decreased avoidance

Increased engagement

Character Strong

Solution #3:

Data to Make Decisions





Share out...

What tools do you use to monitor progress?

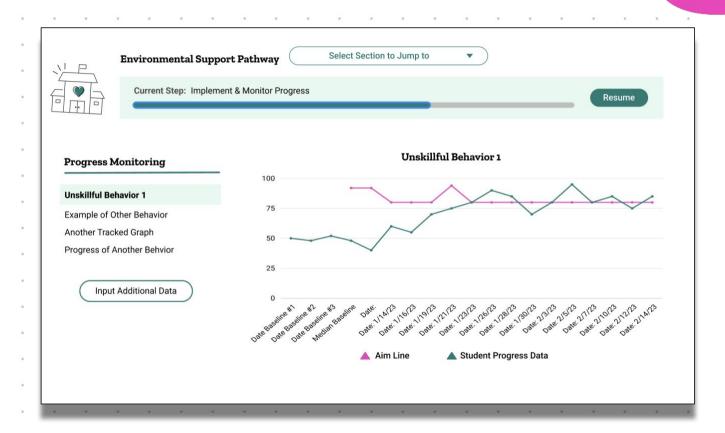




Progress Monitoring

If the support is appropriate, we should see:

- Reductions in unskillful behavior
- ☐ Improvements in skillful behaviors and use of skills



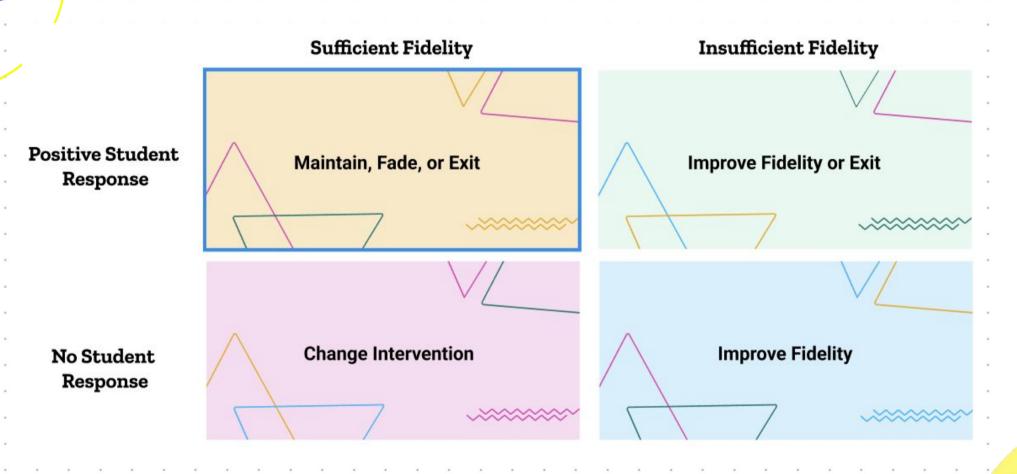


Tracking Intervention Fidelity

Core Components	Week 1	Week 2	Week 3	Week 4	Week 5	Wee	Component % Fidelity
Teaching : Taught Desired Skillful Behavior	Yes 🗸	~	~	~	~		100%
Teaching: Taught FERBs	Yes 🗸	~	~	~	~		100%
Prevention : Changed the Environment	Yes 🗸	~	~	~	~		100%
Prevention : Precorrected Before the Activating Event	No v	~	~	~	~		0%
Prevention : Prompted Close to the Activating Event	~	~	~	~	~		
Prevention: Elimination and Neutralized Strategies Implemented	<u> </u>	~	~	~	~		
Responsive: Reinforced Desired Skillful Behavior(s)	~	<u> </u>	~	~	<u> </u>		
Responsive: Reinforced the FERBs	~	•	~				
Responsive: Progressively Responded to Unskillful Behavior (PROMPT)	•	~	~	~	~		
Responsive: Effective Discipline (Behavior Response Protocol)	~	~	~	~	~		
Responsive: De-Escalation Plan Followed	~	~	~	~	~		
Weekly % Fidelity	75%						BSP Total Fidelity: 75



Review Data and Decide







Turn and Talk

What is resonating with you the most about working toward being more proactive than reactive to get Tier 3 right?





60 Second Feedback