



**UW Medicine**  
DEPARTMENT OF PSYCHIATRY  
AND BEHAVIORAL SCIENCES

MARCH 1, 2024

SEATTLE, WA

# SCHOOL MENTAL HEALTH: What Works, and What Works to Get “What Works” Done

## CHILD/ADOLESCENT PSYCHIATRY GRAND ROUNDS

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University of Washington School of Medicine  
UW School Mental Health, Assessment, Research,  
and Training Center





**SMART**  
School Mental Health Assessment  
Research & Training Center

## UW SCHOOL MENTAL HEALTH ASSESSMENT RESEARCH, & TRAINING CENTER



<https://smartcenter.uw.edu>



### IN THE NEWS

Participate in UW College of Education's ibestt tool study to receive free training and ongoing support related to individualized behavior interventions, and free access to a collaboration app designed by educators and researchers.

[READ MORE](#)



### PROJECT HIGHLIGHTS

The Preparing Teachers and Paraeducators for the Successful Inclusion of Autistic Children project is currently underway and now recruiting school districts. Learn more about the status of this research project and others here.

[READ MORE](#)

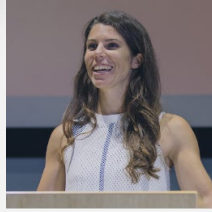
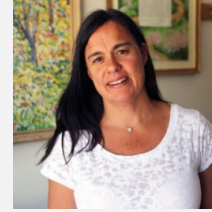


### RECENT PUBLICATIONS

SMART has confirmed via a meta-analysis that schools are where the highest rate of youth get their mental health services. Come check out this publication and others by SMART center faculty!

[READ MORE](#)

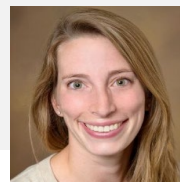
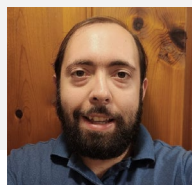
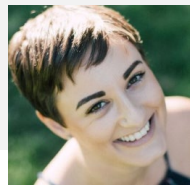
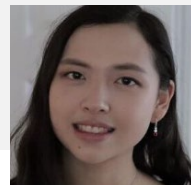
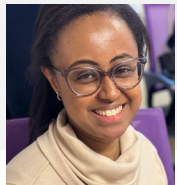
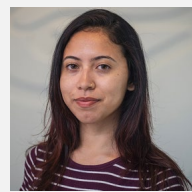
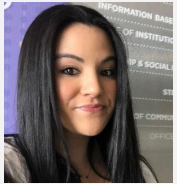
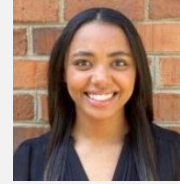
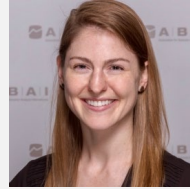
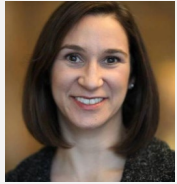
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SMART

School Mental Health Assessment  
Research & Training Center

**OUTREACH &  
PARTNERSHIPS**



**RESEARCH &  
EVALUATION**  
Set the Context & Generate Evidence



**WORKFORCE DEVELOPMENT**



**POLICY**  
Build Political Will



**TRAINING & TECHNICAL ASSISTANCE**  
Mobilize Evidence



## THE UW SMART CENTER'S MISSION

To promote high-quality, culturally-responsive programs, practices, and policies to meet the full range of social, emotional, and behavioral (SEB) needs of students in both general and special education contexts.



# LEARNING OBJECTIVES

---



1

Learn characteristics of a fully functioning and interconnected school/community mental health system of care.

2

Understand that data and systems are needed in effective, comprehensive school MH (not just programs).

3

Learn how a local UW/SCH/ Center focused on SMH conducts its work.

4

Know what type of role you may be able to play as an effective partner in an effective, comprehensive SMH system.

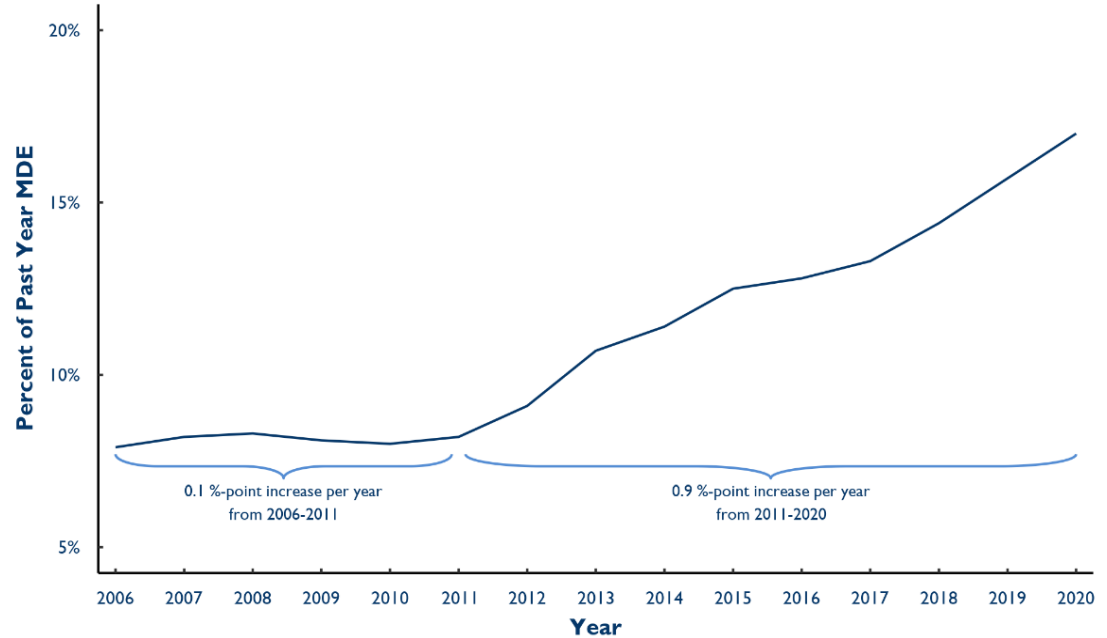


**WHY SCHOOL MENTAL HEALTH?**



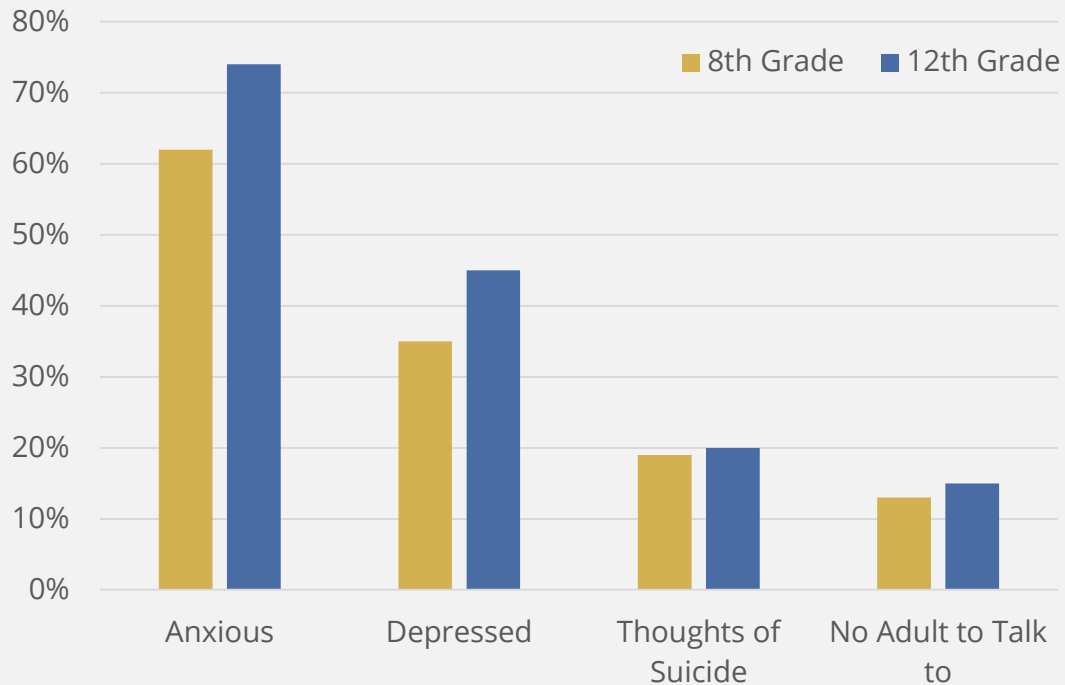
**ADOLESCENT  
DEPRESSION**  
Rates have more  
than doubled  
since 2011.

**Figure I. Adolescent Past Year Major Depressive Episode, 2006-2020**



Based on data from the NSDUH Detailed Tables.  
Percent of adolescents 12-17 who reported symptoms of a past-year major depressive episode (MDE).

**HEALTHY YOUTH SURVEY  
(2021) WASHINGTON STATE**  
*Students Experiencing Significant  
Behavioral Health Issues:*



## NEED IS INCREASING. ACCESS CONTINUES TO BE SEVERELY LACKING. —



- Few trained clinicians
- Scarce appointments
- Long wait lists
- Inadequate insurance coverage
- Lack of transportation
- Limited information among families
- Insufficient time for appointments
- Social stigma & medical racism
- Distrust of clinical settings
- Low availability of effective treatments

**80%**

of youth lack access to care

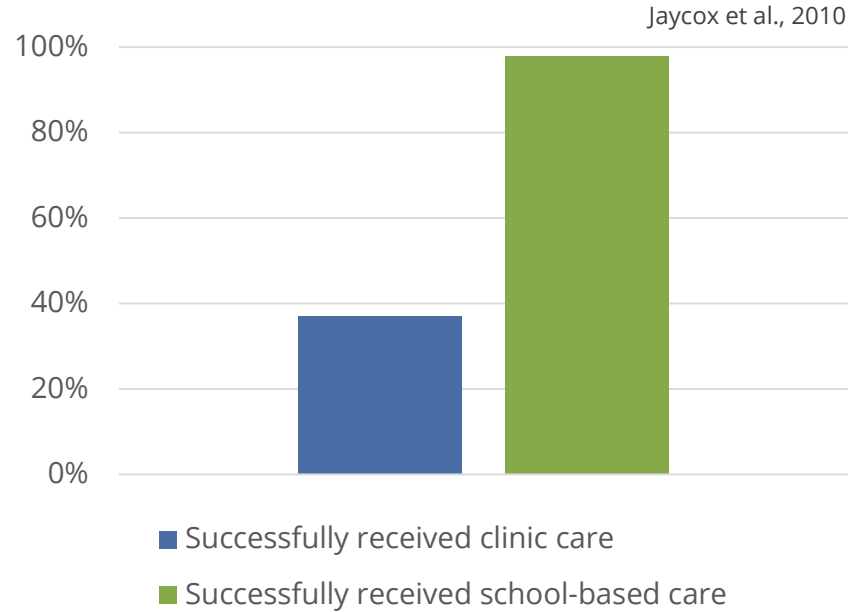
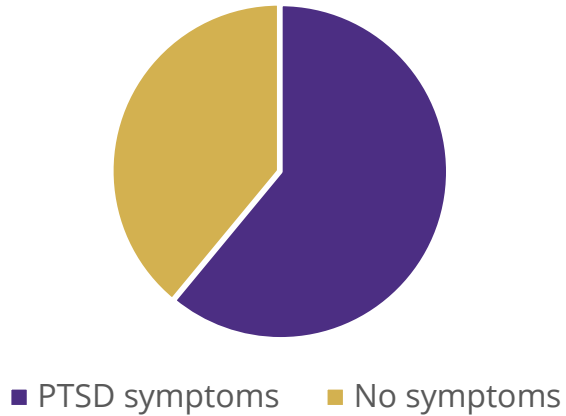
# WHEN ADULTS NEED TO ACT

How do we get youth  
the Mental Health  
help they need?



# TRAUMA-FOCUSED INTERVENTIONS POST-KATRINA: *Schools Got Kids the Help they Needed.*

Rate of PTSD Symptoms Among Screened Children





UNIVERSITY of  
WASHINGTON

# Rates of Mental Health Service Utilization by Children and Youth Across Service Settings: A Meta-Analysis

Mylien T. Duong  
*Committee for Children*

Eric J. Bruns  
Kristine Lee  
Shanon Cox  
Jessica Coifman  
Aaron R. Lyon  
*University of Washington School  
of Medicine*

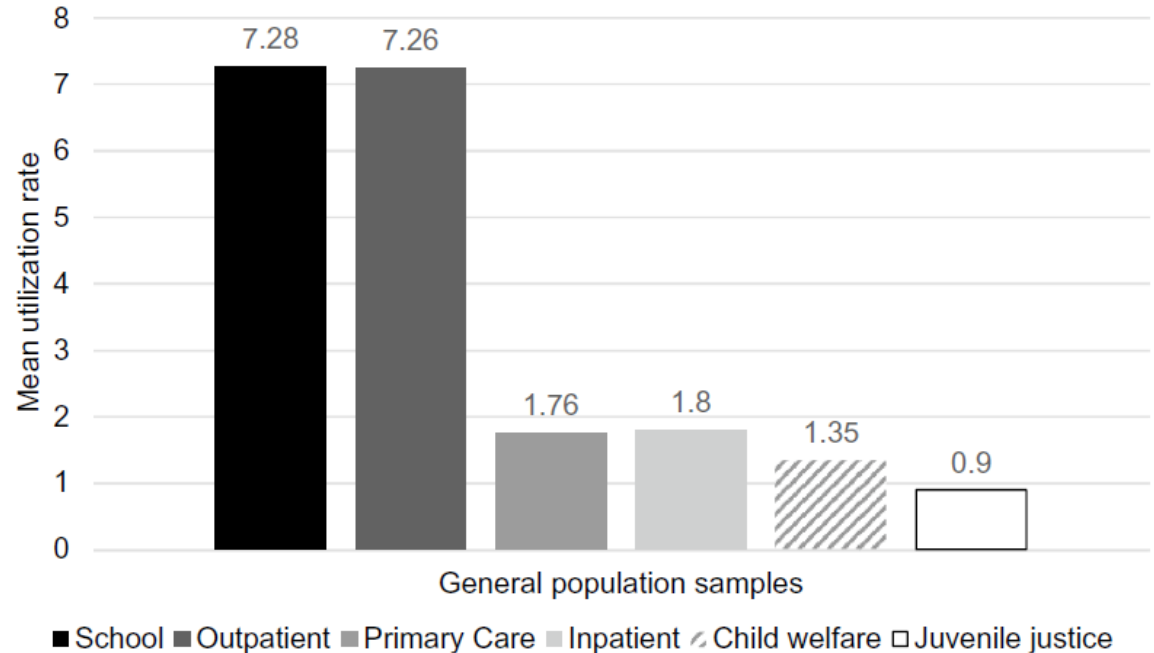


# RESULTS: General Population Youth Receive MH Care in Both School and Outpatient Settings

Proportions of youth receiving MH services across care settings from 9 general population samples.

**(151,360 YOUTH TOTAL)**

Duong, Bruns, et al., 2020

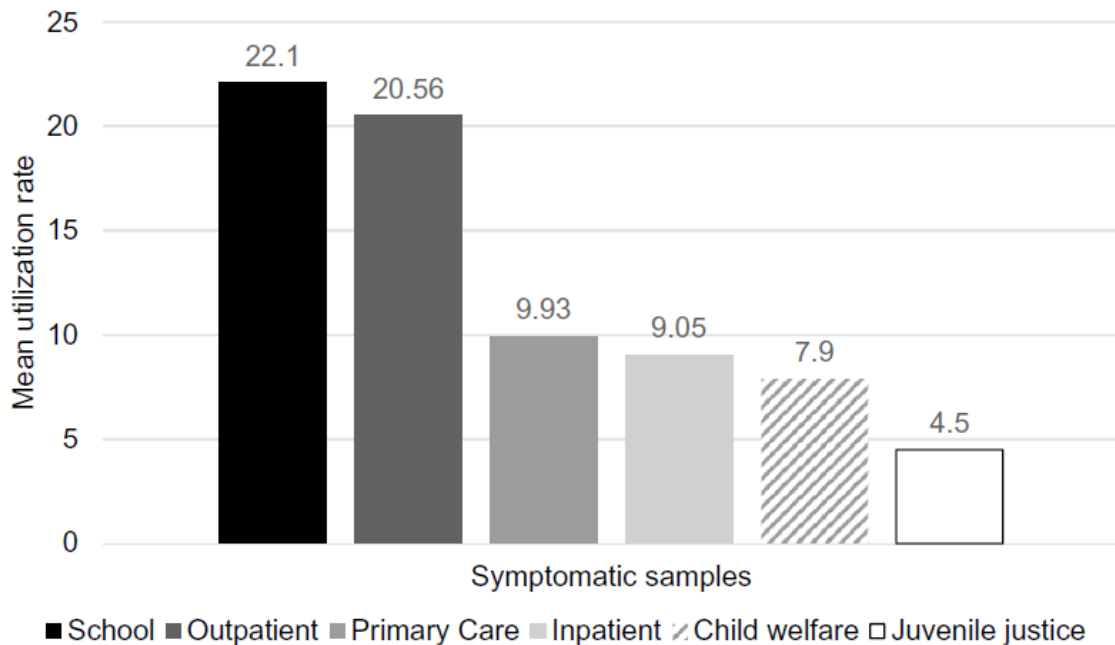


# Symptomatic Youth Are Also Most Likely to Receive Care in Schools (followed closely by Outpatient Settings).

Proportions of youth receiving MH services across care settings from 14 samples of symptomatic youth.

**(18,614 YOUTH TOTAL)**

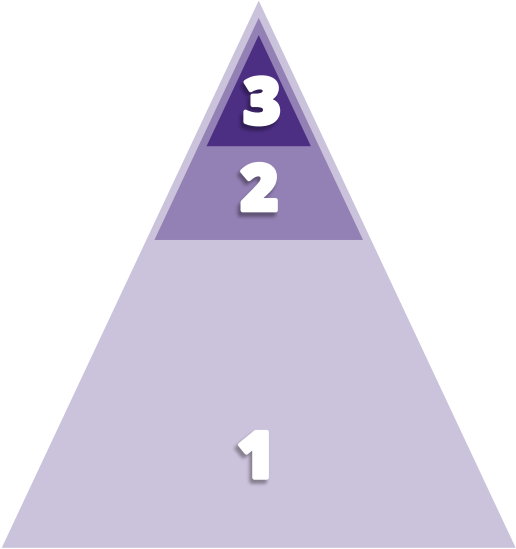
Duong, Bruns, et al., 2020



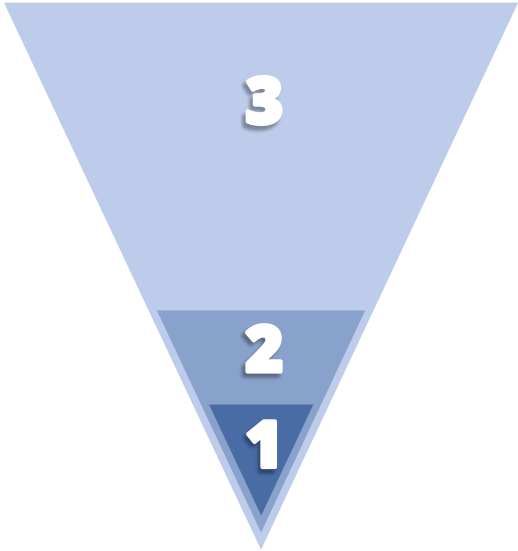


*High-Quality, Multi-Tiered SMH is more likely to happen when schools and communities are in partnership.*

SCHOOL PROVIDERS



COMMUNITY PROVIDERS





**RESPONDING TO THE NEED VIA EFFECTIVE,  
MULTI-TIERED SCHOOL MENTAL HEALTH**

# Effective Response Requires Identifying and Intervening Early... So Stress Does Not Become Distress.

## STRESS AND DYSREGULATION

## ANXIETY, DEPRESSION, BIG BEHAVIORS

## SUICIDALITY

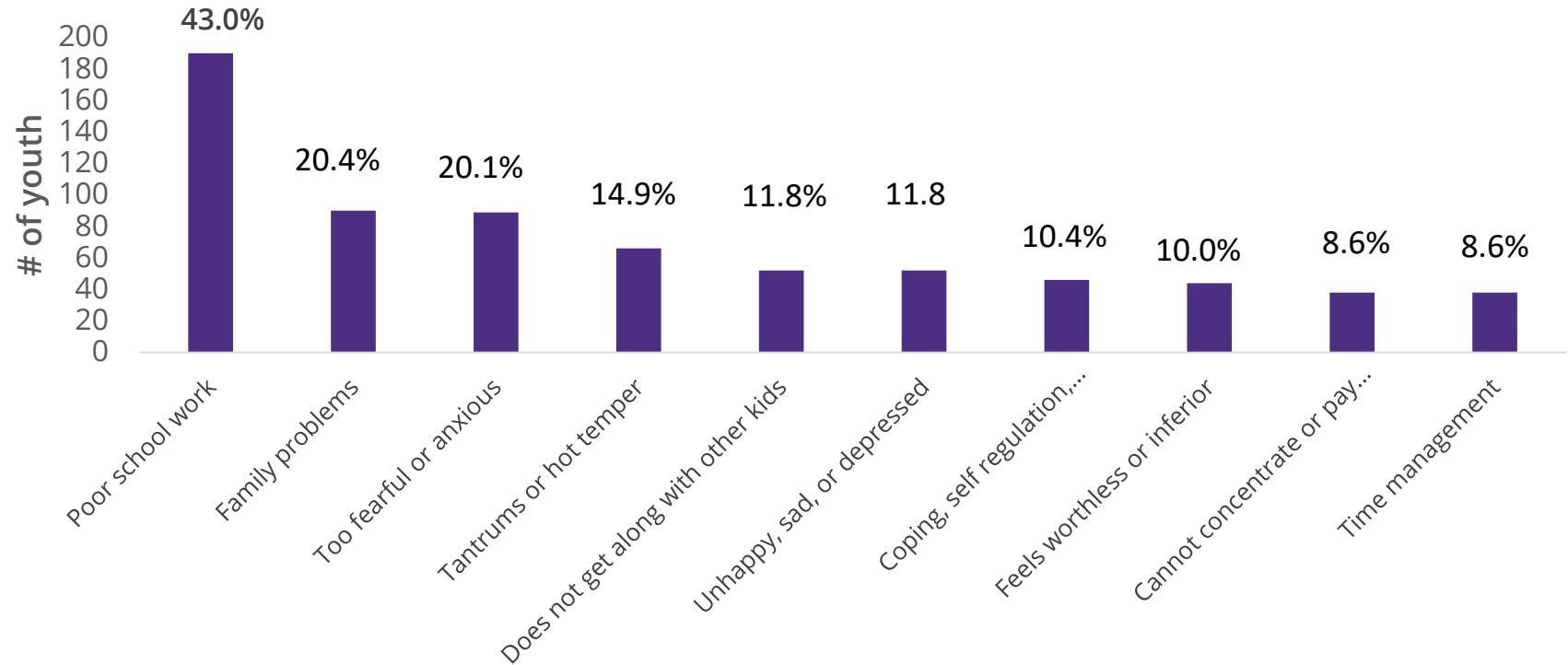
## UNCLEAR NAVIGATION

- Academic stress
  - Family problems
  - Political & climate stress
  - Social media-driven loneliness, social comparison, body dissatisfaction
- 80% of youth lack access to care and are left to cope on their own
  - Those who help may not use effective practices
  - Schools are not MH providers – not their job to develop comprehensive treatment plans
- Suicide is second leading cause of death among teens.
  - Adults (parents, family) and peers are not well-equipped to talk about and prevent suicide
- Students and parents must navigate a costly and complex maze of treatment, medication, hospitalization, outpatient providers, crisis services.



# High School Students (N=451) Seeking SMH Services: Top Problems (N=1,214) Are School and Family Issues

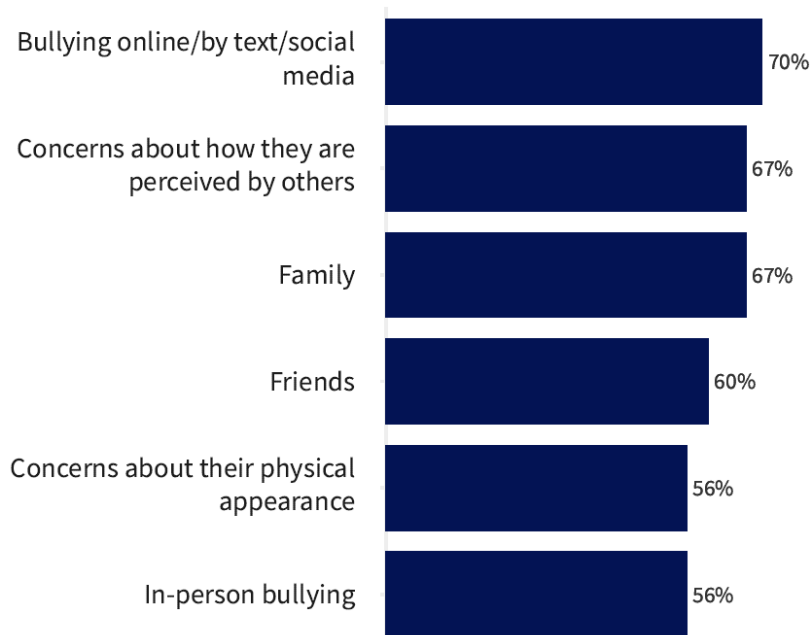
Bruns, Lee, Pullmann,  
Liu, Reyes, Chandler, Jones,  
& McCauley (in revision)



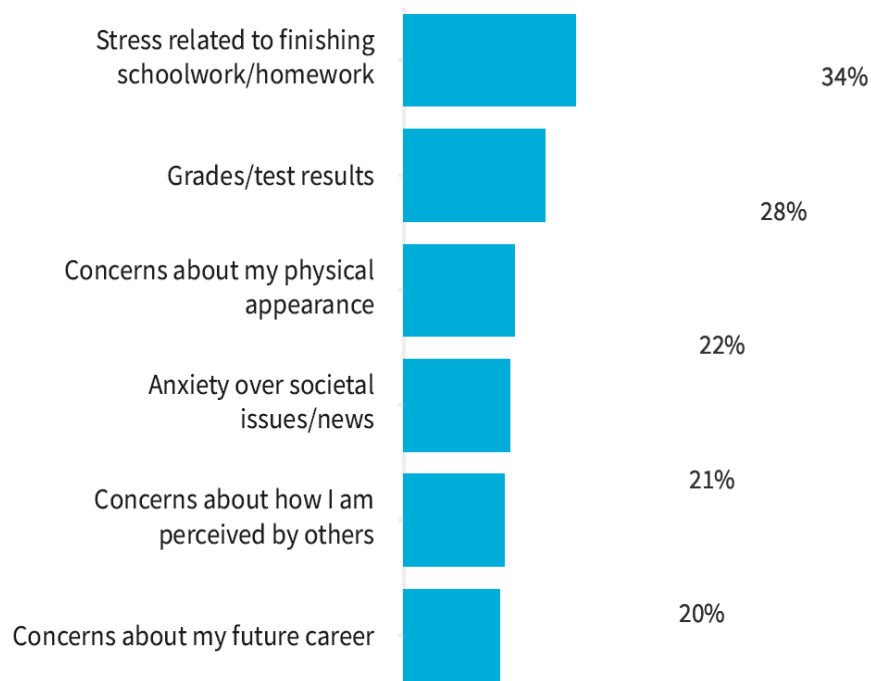
# WHAT IS CAUSING STRESS AND DYSREGULATION?

Teachers and Students Don't Agree...  
*(Prothero, 2023; EdWeek)*

## Teachers and School Staff



## High School Students



What does the SMART Center do  
to **disrupt the cycle**...and promote  
**student wellness?**





How do we address the youth MH crisis?

Where do youth receive MH support?

What practices should we select and use?

What School Mental Health (SMH) programs “work”?

What data and instruments do we need?

How can we best “do prevention” and promote wellness?

What does it take to get SMH EBP implemented?

How can we prevent crises (suicide, violence)?

**Efforts to advance knowledge**

How do we motivate and train the workforce?

What systems, teams, and partners do we need?

How can we increase SMH equity?

How do we do it all in alignment with our mission?

How do we improve usability of SMH interventions?



# RESPONDING to the Need Via Effective, Integrated School-Community Mental Health

## STRESS AND DYSREGULATION

## ANXIETY, DEPRESSION, BIG BEHAVIORS

## SUICIDALITY

## UNCLEAR NAVIGATION

- School-wide Positive Behavior Supports
- Effective Social-emotional learning programs
- Skills to bolster teacher-student connection, empathic listening
- Organizing Family-School-Community Teams to “own” the problem (& solutions)

- Universal Screening
- Tiered strategies based on need
- School and community helpers working together

- Suicide prevention
- Safety planning provided in schools
- Clear pathways to help for those who need it
- Communication and collaboration between schools and health/ MH care providers.

Schools and local providers must work in integrated fashion to support students



# RESPONDING to the Need Via Effective, Integrated School-Community Mental Health

STRESS AND  
DYSREGULATION

ANXIETY, DEPRESSION,  
BIG BEHAVIORS

SUICIDALITY

UNCLEAR  
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- School-wide Positive Behavior Supports
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- School and community

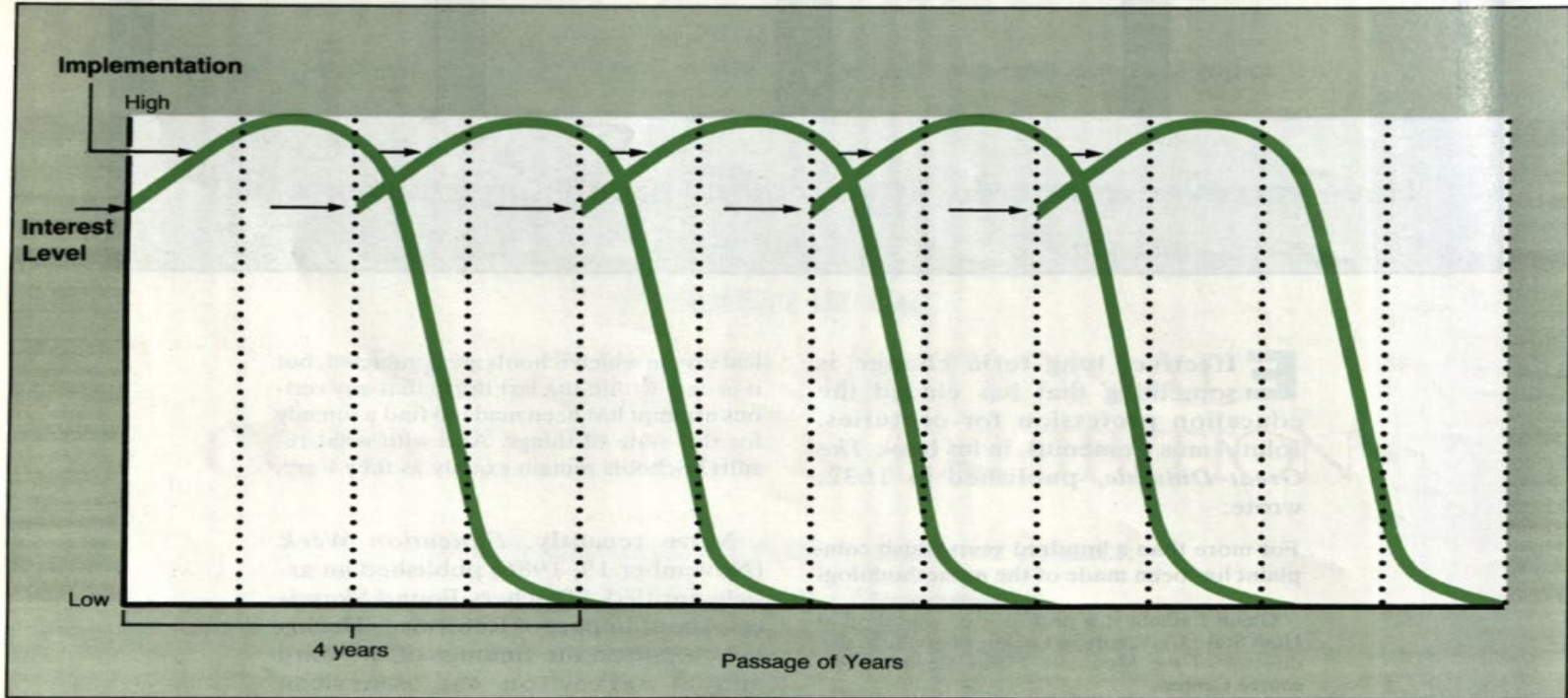
- Suicide prevention
- Safety planning provided in schools
- Clear pathways to help
- Communication and collaboration between schools and health/ MH care providers.

- Schools and local providers must work in integrated fashion to support

**PLAN AND ORGANIZE USING A SYSTEMS APPROACH**

# AVOID the impulse to “Add More Programs.”

Figure 1. Birth and Death Cycles of Educational Innovations



# Initiative Overload is REAL

The typical school operates 14 different prevention activities concurrently, and the typical activity is implemented with poor quality.

(Gottfredson et al., 2010)



## As an Alternative, Interconnected School Mental Health Focuses on Teamwork, Data, and Systems:

- Establish District & School-community teams
- Inventory and strategically de-implement current initiatives
- Select, implement EBP across tiers
- Comprehensive screening of youth MH
- Data-based decision making
- Ongoing coaching at systems and practice level for school and community employed professionals

### Advancing Education Effectiveness: **Interconnecting School Mental Health and School-Wide PBIS**

Volume 2: An Implementation Guide



By: Lucille Eber  
Susan Barrett  
Kelly Perales  
Jennifer Jeffrey-Pearsall  
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# Interconnected School Mental Health Schools Show Better Team Functioning

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## GREATER TEAM PARTICIPATION

BY principals, school  
counselors, school  
psychologists, and school  
mental health clinicians



## MORE TIER 1 PROBLEM- SOLVING DISCUSSIONS

Using data to address  
issues discussed

## GREATER COMMITMENT TO TEAM MEETINGS

3.7 times more team  
meetings per quarter  
(w/more productivity!);  
25 minutes longer

# Greater Percentage of Students Receive Needed Treatment

## Advancing Education Effectiveness: **Interconnecting School Mental Health and School-Wide PBIS**

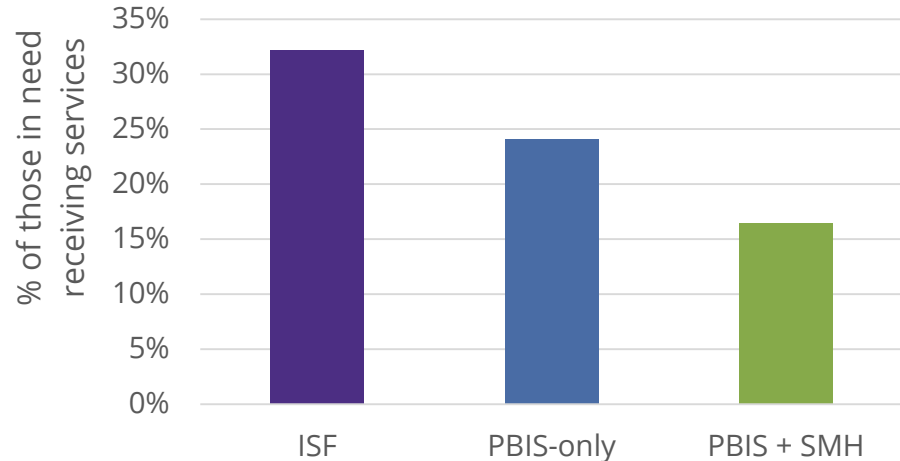
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Students at risk for or presenting MH *problems* (as rated by teachers) received more services in the ISF condition.



Source: Splett, Perales, Miller, Halliday-Boykins, & Weist, 2019

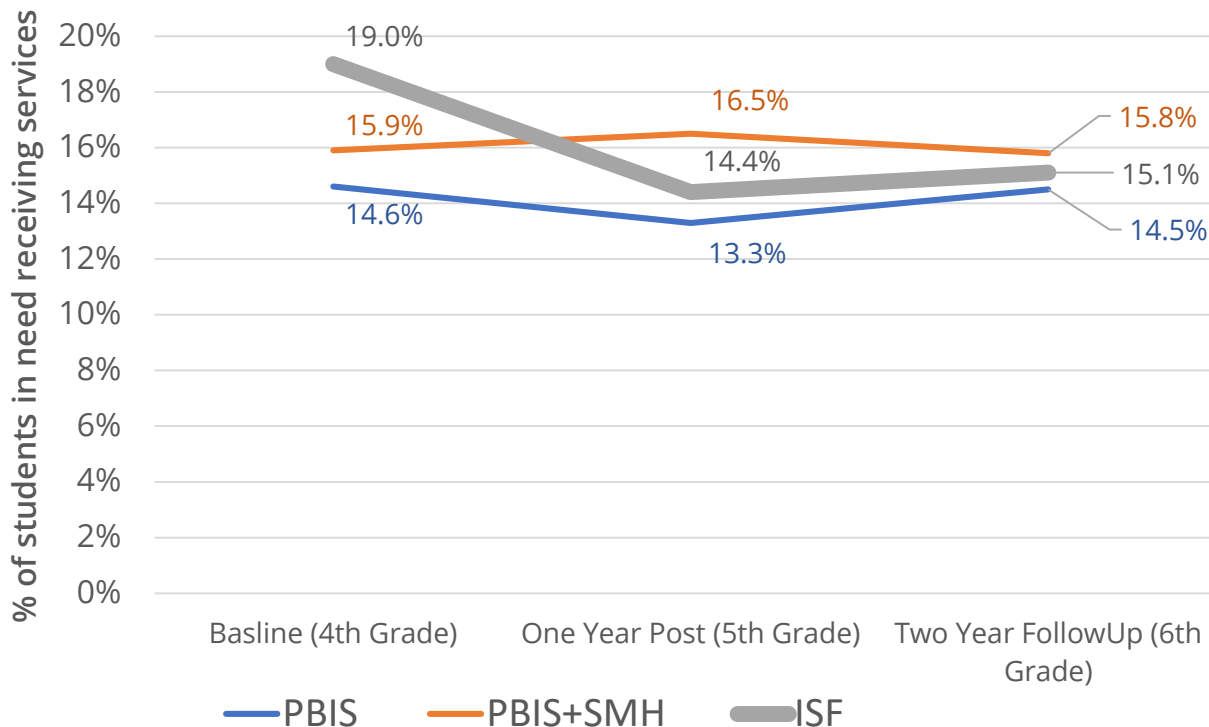
# Greater Reduction in Symptoms Among Students in Need

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# SMART-TAC Takes Cohorts of School Building Staff Through A Professional Learning Series Focused on Comprehensive SMH Systems

**SEPTEMBER 29, 2023**

Building Team Orientation  
to ISF & Assessing  
Current Status



Task Completion, Fluency  
Building & Coaching Support



**NOVEMBER 13, 2023**

Fortifying Tier 1:  
Strengthening the  
Foundation for School  
Mental Health and MTSS



Task Completion, Fluency  
Building & Coaching Support



**JANUARY 30, 2024**

Establishing Tier 2 & 3  
Systems Part 1:  
Universal Screening



Task Completion, Fluency  
Building & Coaching Support



**MARCH 26, 2024**

Establishing Tier 2 & 3  
Systems Part 2:  
Systems and Structures

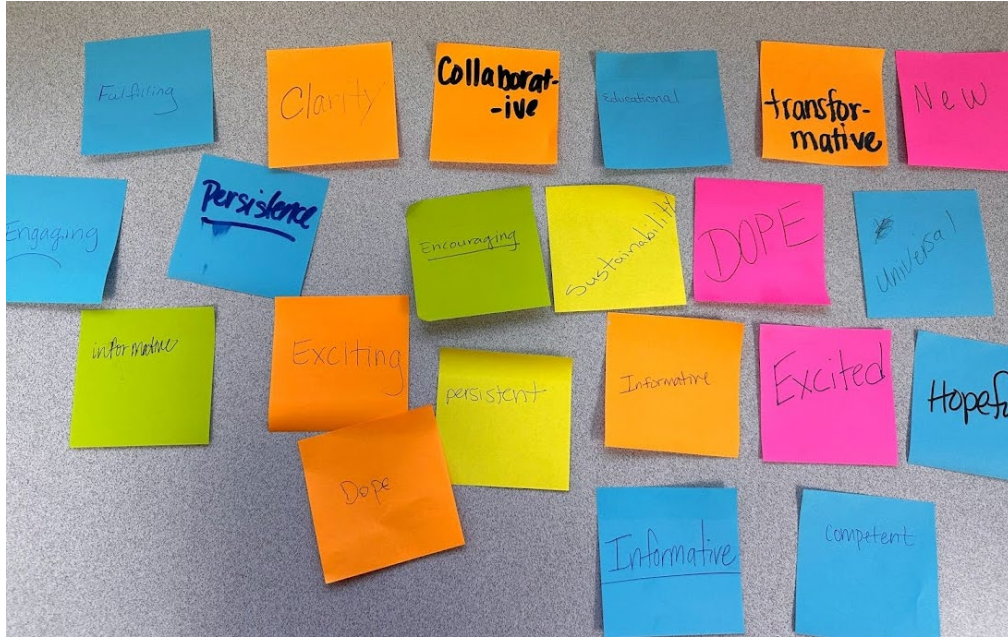








# What "sticks" with training participants?



I feel excited to move forward with this work and strengthen our system.

We have to quit focusing on what we can't control and focus on systems we can control

New thought  
Our mtss  $\Delta$  needs to be academics, behavior and Family school connection.

I FEEL HOPEFUL + EMPOWERED, THAT CHANGE CAN HAPPEN IF WE WORK TOGETHER AS A TEAM w/ SCHOOL STAFF, FAMILIES + STUDENTS

What does the SMART Center do to disrupt the cycle...and promote student wellness?

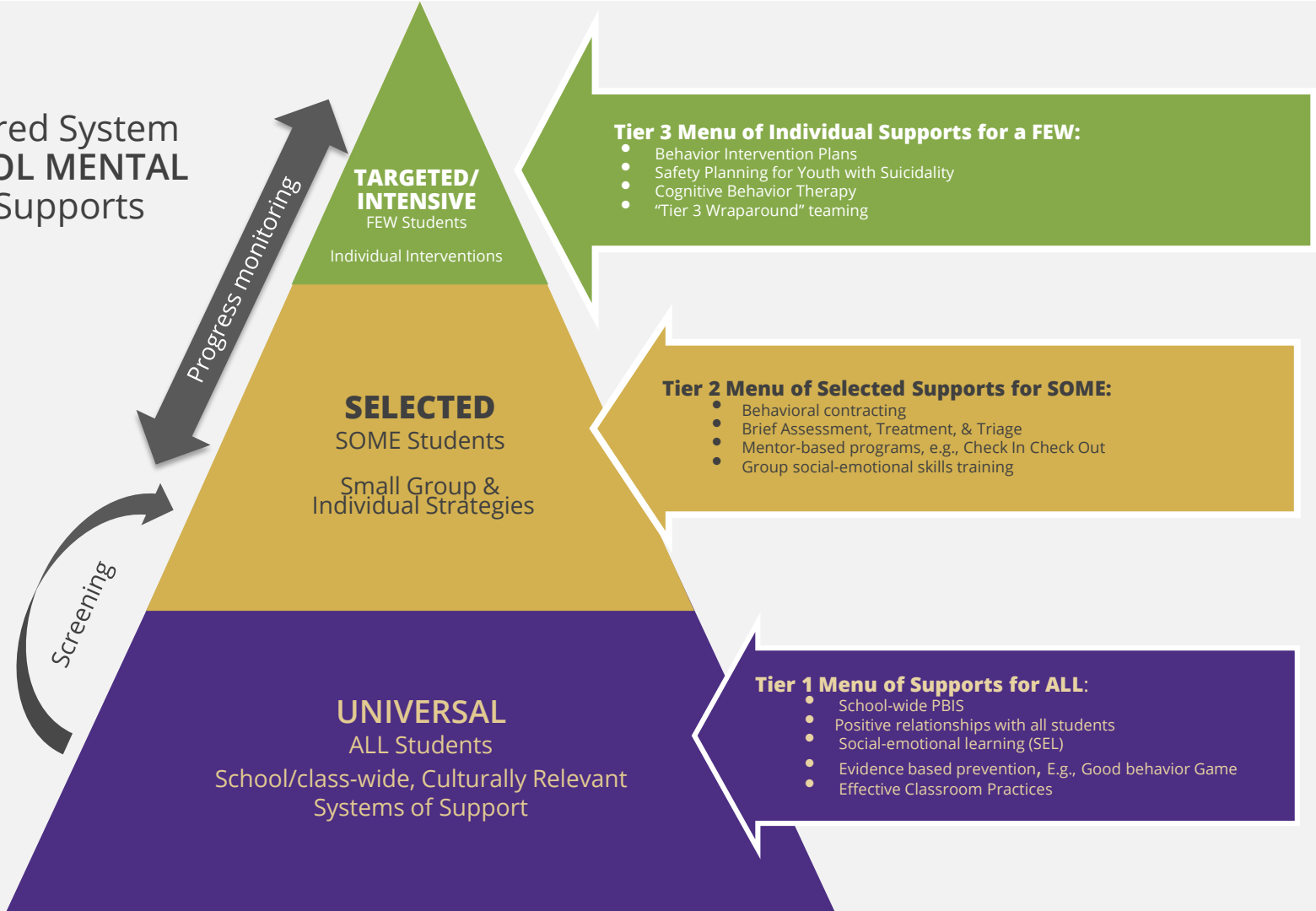
STRESS AND  
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BIG BEHAVIORS

SUICIDALITY



# Multi-Tiered System of SCHOOL MENTAL HEALTH Supports (MTSS)





## SMART Center Training & TA Spans the Multi-tiered supports needed for Comprehensive School MH

- Screening, identification, and referral
- Select and implement Social-emotional learning programs
- School-wide Positive Behavior Supports to reduce negative discipline
- Building Teachers' listening skills, empathic connectedness to students
- Tier 2 school-based mental health interventions
- Suicide prevention and safety planning
- Leadership training for principals and other school leaders

# SEBMH Screening in Washington | A TIMELINE

2014

Authorizing State  
Legislation for  
recognition, screening  
and response to  
emotional or  
behavioral distress  
RCW 28A.320.127

2014

State Legislation for  
Model District Plan  
RCW 28A.320.1271

2021

K-12 Behavioral Health  
Audit & Findings and  
Recs for SEBMH  
Screening

2022

OSPI Model District  
Template for Installing  
Universal SEBMH  
Screening

# WASHINGTON STATE Model District Screening Template:

## Student Social, Emotional, Behavioral, and Mental Health (SEBMH) Recognition, Screening and Response



Washington Office of Superintendent of  
**PUBLIC INSTRUCTION**

*Model District Template:  
Student Social, Emotional  
and Behavioral, and Mental  
Health Recognition,  
Screening, and Response.*



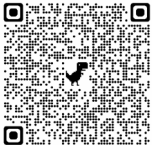
Washington Office of Superintendent of  
**PUBLIC INSTRUCTION**

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### MODEL DISTRICT TEMPLATE

MODEL DISTRICT TEMPLATE	
<b>1. Team-Driven Shared Leadership Section</b>	
Requirements:	
<ul style="list-style-type: none"><li>Identify the district leadership team responsible for this plan</li><li>Identify how to use expertise of staff trained in recognition, screening, and referral</li></ul>	
Recommendations:	
<ul style="list-style-type: none"><li>The team responsible for this plan can be an existing group rather than creating a new team</li></ul>	
Resources:	
<ul style="list-style-type: none"><li>National Center for School Mental Health (NCSMH) <a href="#">School Mental Health Quality Guide</a>.</li></ul>	
<b>Teaming</b>	
<b>a. What district leadership team is responsible for adopting and leading this plan?</b>	
<input type="checkbox"/> An existing team: <ul style="list-style-type: none"><li><input type="checkbox"/> Crisis Response Team</li><li><input type="checkbox"/> ISF, MTSS, or PBIS Team</li><li><input type="checkbox"/> Restorative Practices Team</li><li><input type="checkbox"/> Section 504 Team</li><li><input type="checkbox"/> Special Education Team</li><li><input type="checkbox"/> Other:</li></ul>	<input type="checkbox"/> A new multidisciplinary team: <ul style="list-style-type: none"><li>• [Name and/or Position]</li><li>• [Name and/or Position]</li><li>• [Name and/or Position]</li><li>• [Name and/or Position]</li><li>• [Name and/or Position]</li></ul>
<b>b. What district departments must be involved in approving and implementing this plan?</b>	
<input type="checkbox"/> Assessments and Testing	<input type="checkbox"/> Risk Management/Legal
<input type="checkbox"/> Behavioral Health/Mental Health Services	<input type="checkbox"/> School Administrators
<input type="checkbox"/> Business and Finance	<input type="checkbox"/> School Counseling and Guidance
<input type="checkbox"/> Career and Technical Education	<input type="checkbox"/> School Psychologists
<input type="checkbox"/> Communications	<input type="checkbox"/> School Safety and Security
<input type="checkbox"/> Discipline	<input type="checkbox"/> School Social Workers
<input type="checkbox"/> Diversity, Equity, and Inclusion	<input type="checkbox"/> Student or Youth Representative
<input type="checkbox"/> Enrollment	<input type="checkbox"/> Special Education
<input type="checkbox"/> Health Services and School Nurses	<input type="checkbox"/> Superintendent and Cabinet
<input type="checkbox"/> Human Resources	<input type="checkbox"/> Teachers Union
<input type="checkbox"/> Information and Technology	<input type="checkbox"/> Other(s):
<input type="checkbox"/> Parent/Family Representatives	
<b>c. What is the district's capacity of Education Staff Associates (ESAs) with knowledge, experience, or training related to SEBMH screening, recognition, and response?</b>	
Requirements:	



<https://www.k12.wa.us/student-success/health-safety/mental-social-behavioral-health/youth-suicide-prevention-intervention-postvention>





## Exploration

## Installation



### Plan

1

- 1) Assemble a team (district & school levels)
- 2) Get clear on purpose and ensure everyone is aware
- 3) Determine resources
- 4) Create a plan for communicating process with all stakeholders (e.g. District Community Leadership Team, Families, School Personnel, etc.)



### Select

2

- 1) Explore and select a screening tool



### Schedule

3

- 1) Establish screening windows for all timepoints
- 2) Create assessment schedule or add screening dates to existing assessment schedule



### Prepare

4

- 1) Ensure data security, consent and assent procedures and address privacy and confidentiality
- 2) Develop clear procedures and protocols
- 3) Establish data decision rules
- 4) Create intervention menus (description, entry/exit criteria, progress monitoring) and process for rapid access to supports.



### Administer

5

- 1) Provide professional learning
- 2) Implement screening tool in common space with all teachers or provide assistance for teachers to complete on their own
- 3) Provide resources if completing the tool creates emotional responses



### Score & Interpret

6

- 1) Graph & Share results
- 2) Examine data at school, class, and student levels
- 3) Adjust tier 1 as needed



### Connect to Supports

7

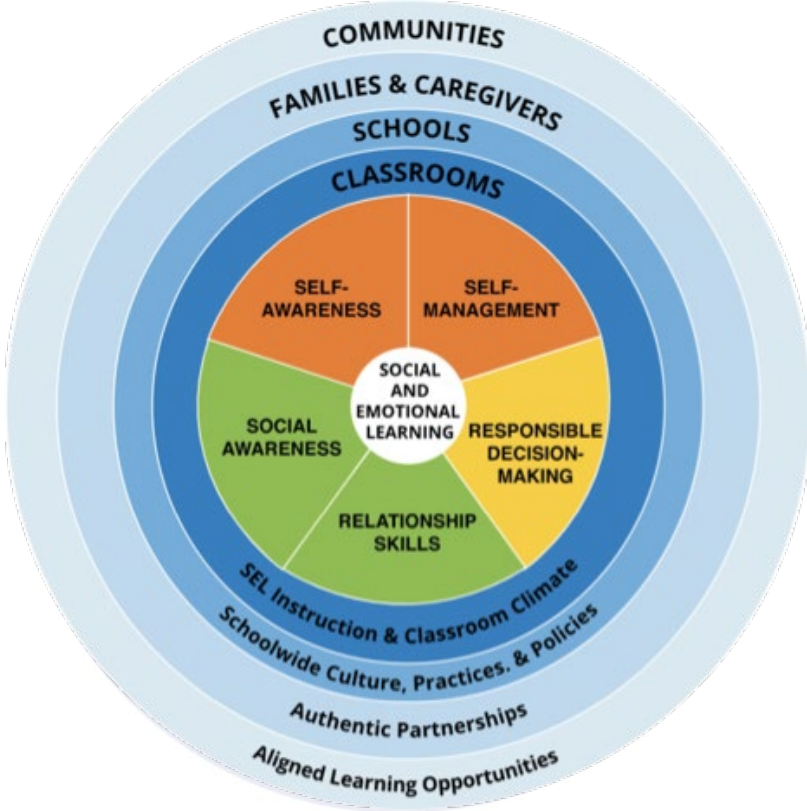
- 1) Use multiple data sources and menu of interventions to connect students to supports

WHAT AND WHERE?

# SOCIAL-EMOTIONAL LEARNING

based on Research-Based Frameworks

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# BOOSTING Student-Teacher Relationships



Social, Emotional &  
Behavioral Health



School Engagement



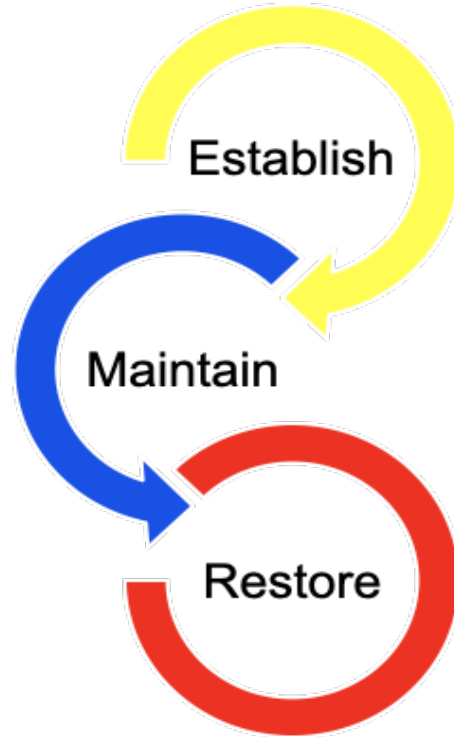
Academic Achievement



School Belonging

# ESTABLISH - MAINTAIN - RESTORE (EMR) Classroom Intervention

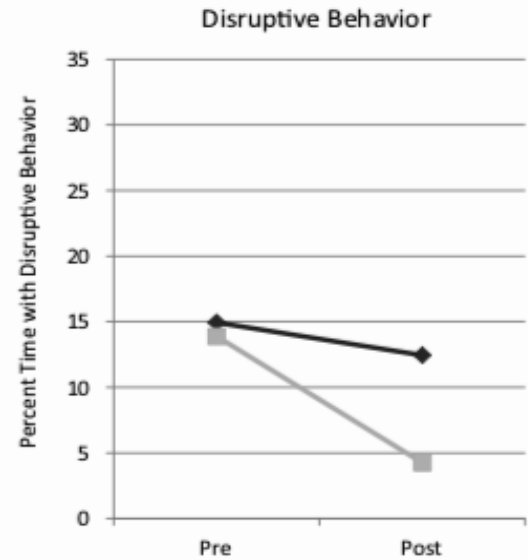
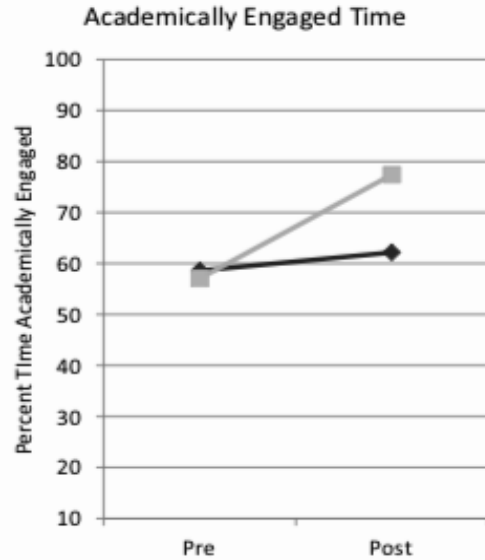
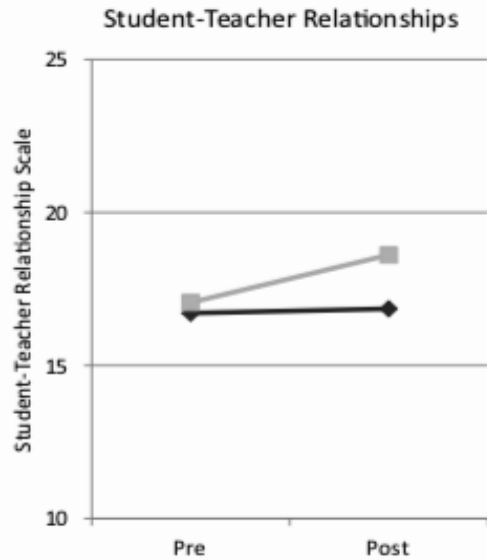
ONGOING efforts to keep positive relationships intact.



MAKE SURE no child falls through the relational cracks.

REPAIR relationships following negative interactions.

# EMR improves relationships, Academic engagement, and Behavior



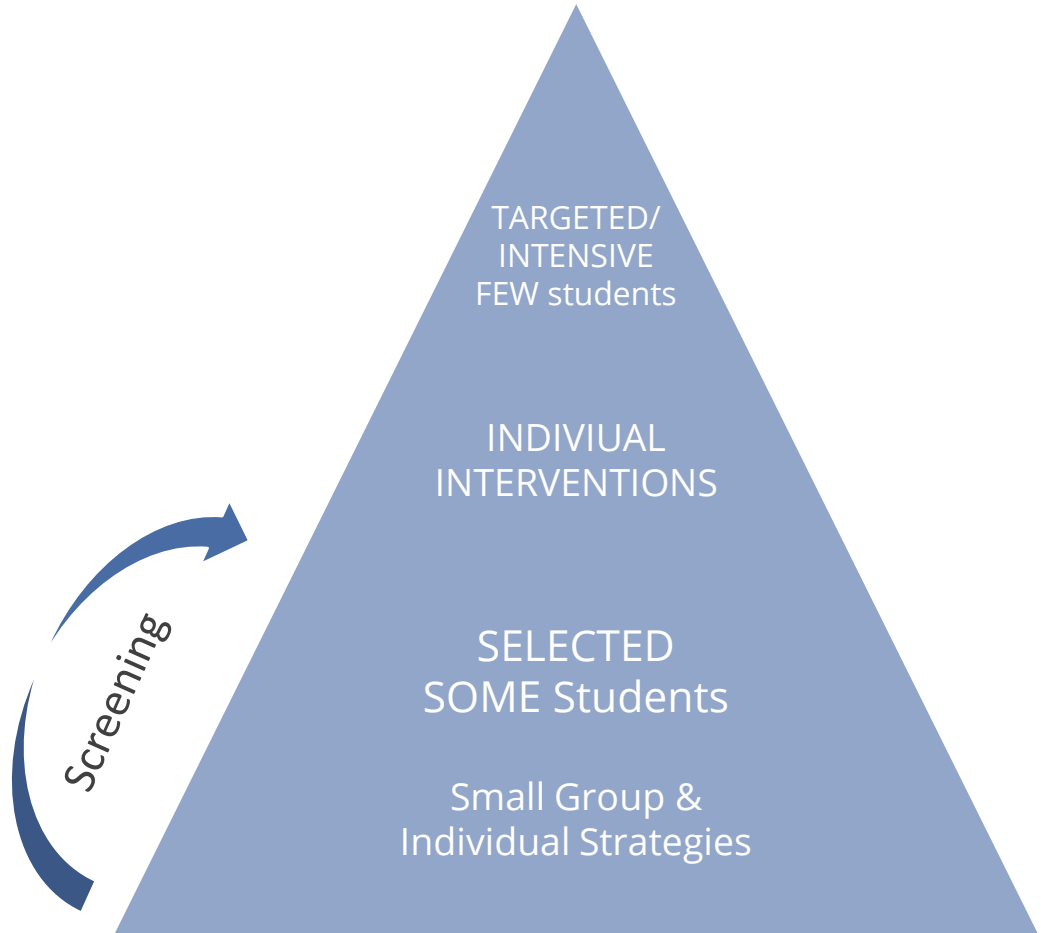
◆—◆ Control

■—■ Intervention

ANXIETY, DEPRESSION,  
BIG BEHAVIORS

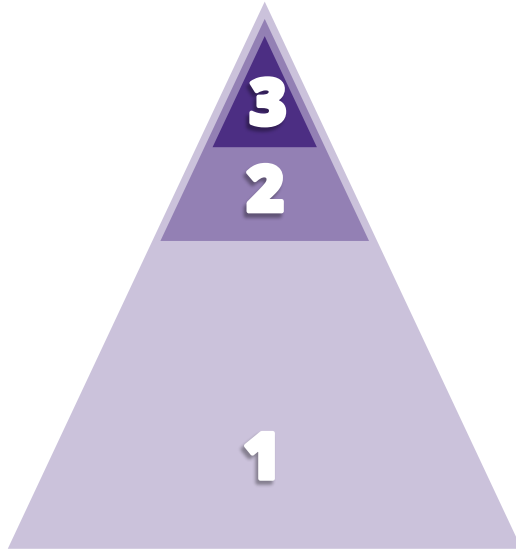
## MOVING UP THE TIERS –

How do we meet needs of the increasing number of youth with identified problems?

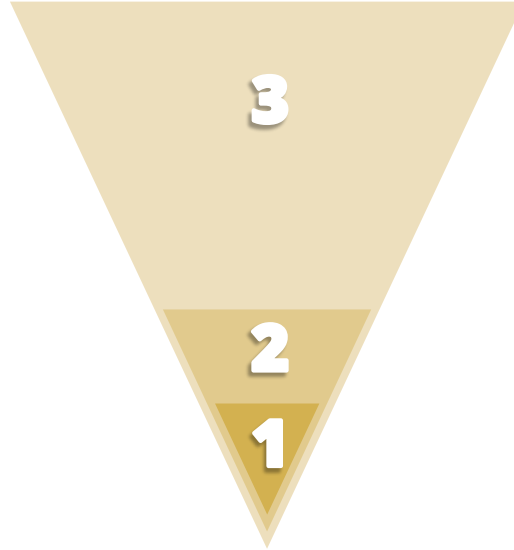


# High-Quality, Multi-Tiered SMH is More Likely to Happen When Schools and Communities are in Partnership.

## SCHOOL PROVIDERS



## COMMUNITY PROVIDERS





## **SESSION 1**

Engagement, Informal Assessment and Problem Identification

## **SESSION 2**

Problem Solving

## **Session 3**

Continued problem solving – teaching skills as needed:

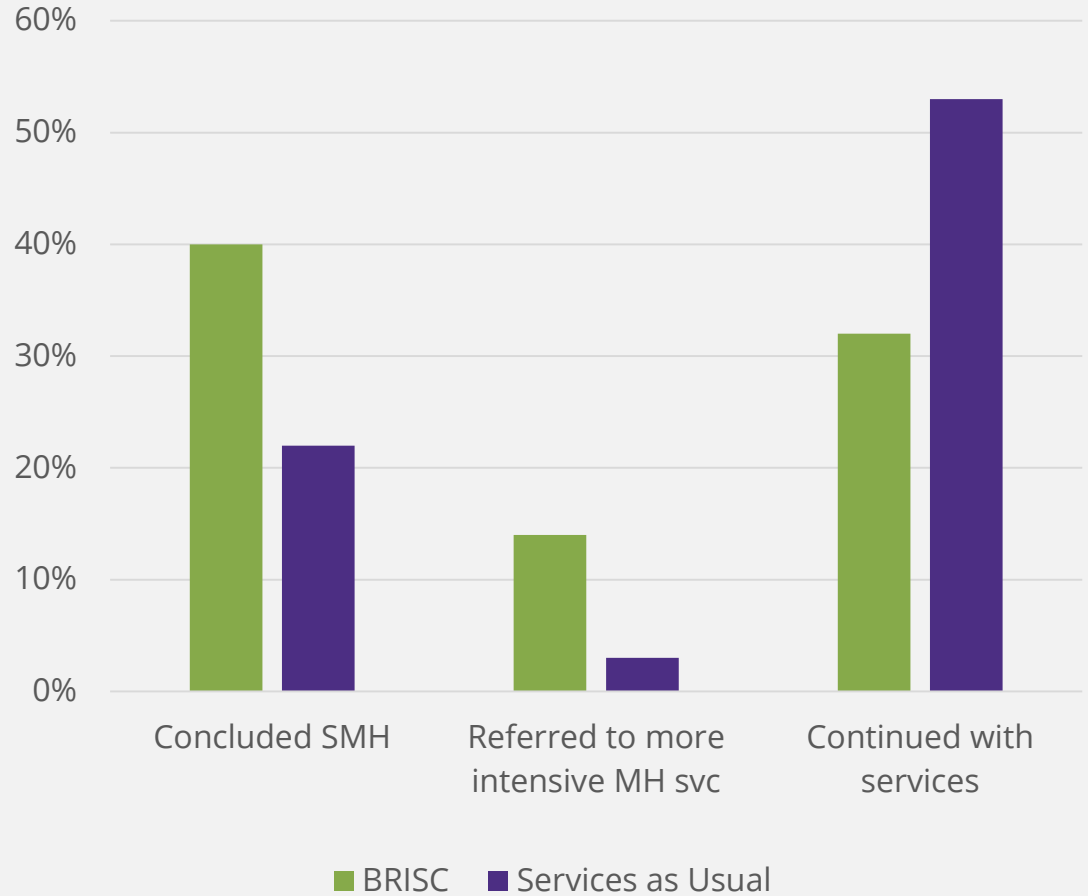
- Stress and Mood Management
- Realistic Thinking
- Communication Skills

## **Session 4**

Review student's needs & progress to triage to next steps

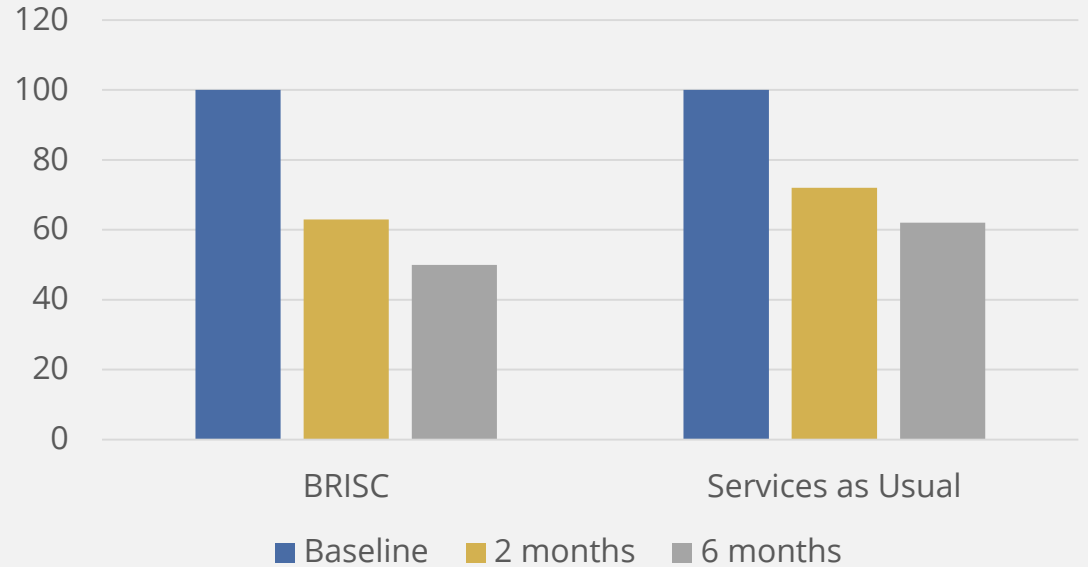


**BRISC PROMOTES**  
efficiency, data-  
informed triage.

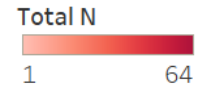
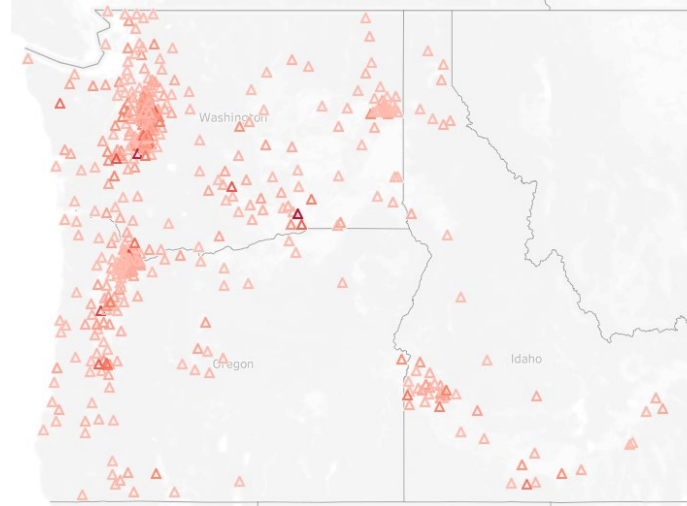
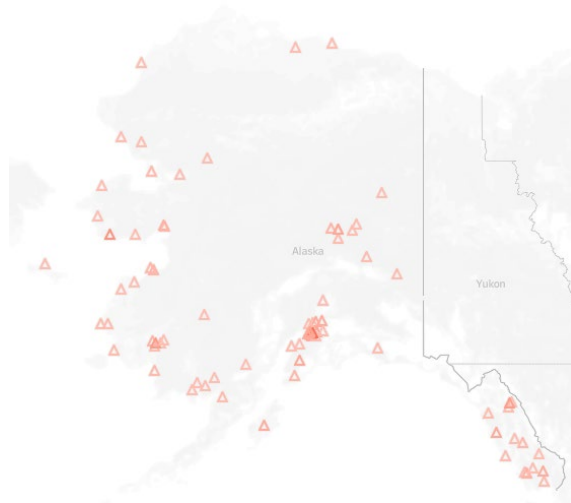


Among students with clinical levels of impairment, **FEWER BRISC STUDENTS IN CLINICAL RANGE.**

% students in clinical range on Columbia Impairment Scale:



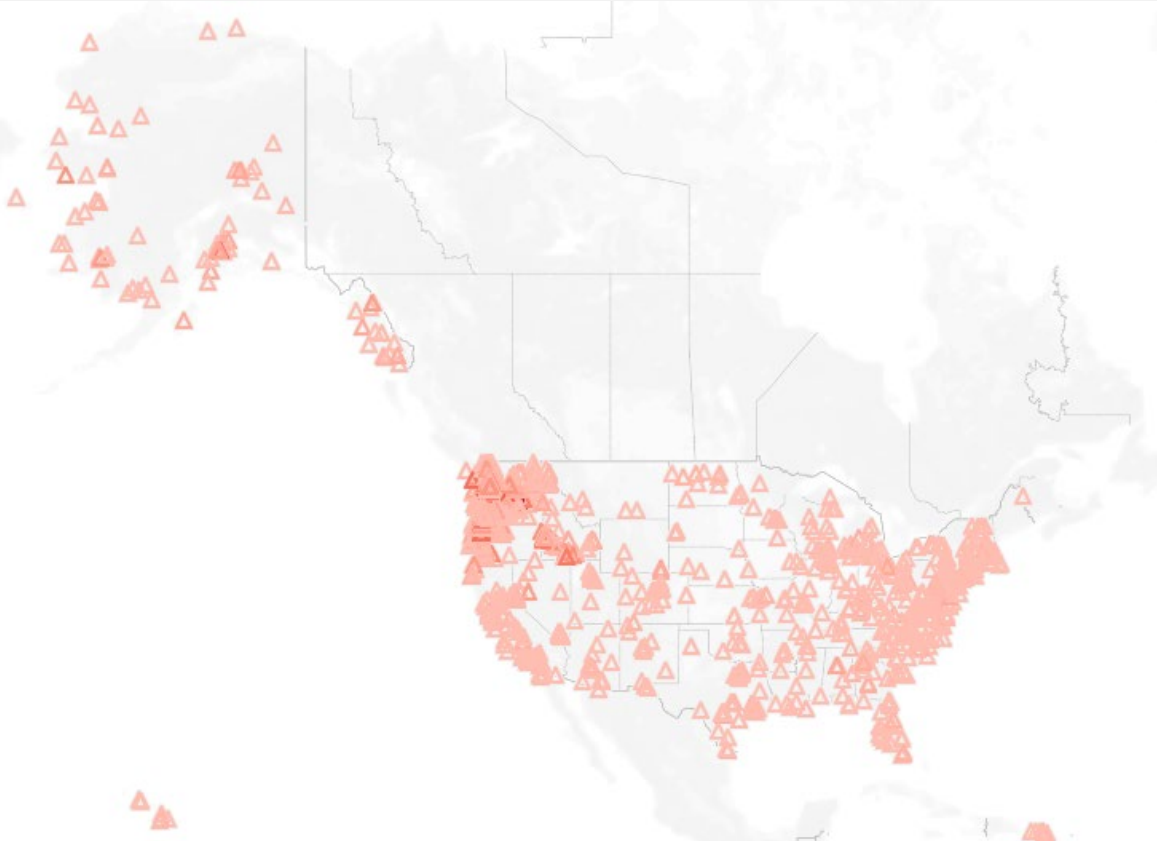
# SMART-TAC's NW-School MH Tech Transfer Center Does this Work in SAMHSA Region 10



STATES	AK	ID	OR	WA	REGION 10 TOTAL	OTHER STATES
ZIP CODES	83	52	140	301	576	848
PARTICIPANTS	305	320	687	2,266	3,578	1,356

# SMART-TAC's NW-School MH Tech Transfer Center

## Engages Schools and Districts Across the U.S.



### OUR GOALS

- Provide direct training and TA on the implementation of mental health services in schools
- Build infrastructure and create learning communities
- Support educational leaders to promote mental health for ALL
- Foster regional alliances

2019-2024

# SAMHSA-FUNDED REGIONAL SCHOOL MENTAL HEALTH INITIATIVE



## SCHOOL MENTAL HEALTH SUPPLEMENT OVERVIEW YEARS 1-5 2019-2023

- 1 School Mental Health Training & Technical Assistance in schools & school systems.
- 2 Build infrastructure and create learning communities.
- 3 Support educational leaders to promote mental health for ALL.
- 4 Foster regional alliances and collaboration efforts.



**23,620**  
Participants



**235**  
Events



**175**  
Products



**94%**  
Satisfaction  
Rating



**35,191**  
Website  
Page Views



**8,639**  
Subscribers

Check out the Years 1- 5 Infographic [here](#)

# NWMHTTC YEAR 5: By the Numbers (August 2022-September 2023)

**8,432**



WEBSITE PAGE VIEWS

**37**



EVENTS

**17**



ANNOUNCEMENTS

**5**



PRODUCTS



**2,186**  
Participants



**94%**  
Were satisfied  
with the trainings



**94%**  
Would recommend  
trainings to others



**91%**  
Intent to use  
what was learned

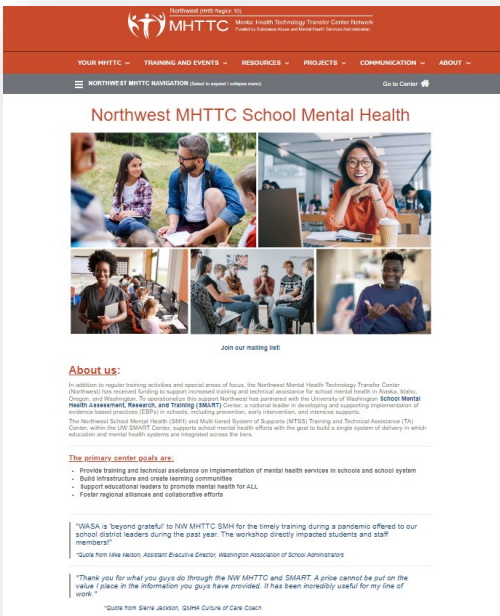


**88%**  
Had shared what they  
learned with others



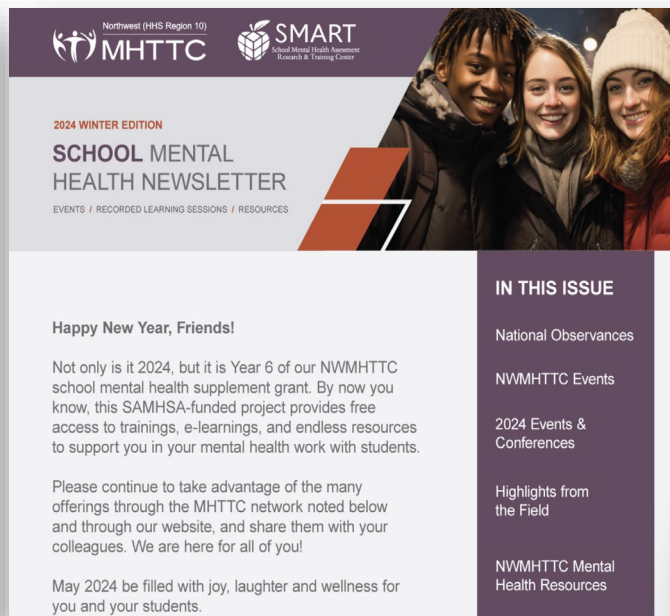
Check out the Year 5 Infographic [here](#).

# GET CONNECTED WITH OUR CENTER



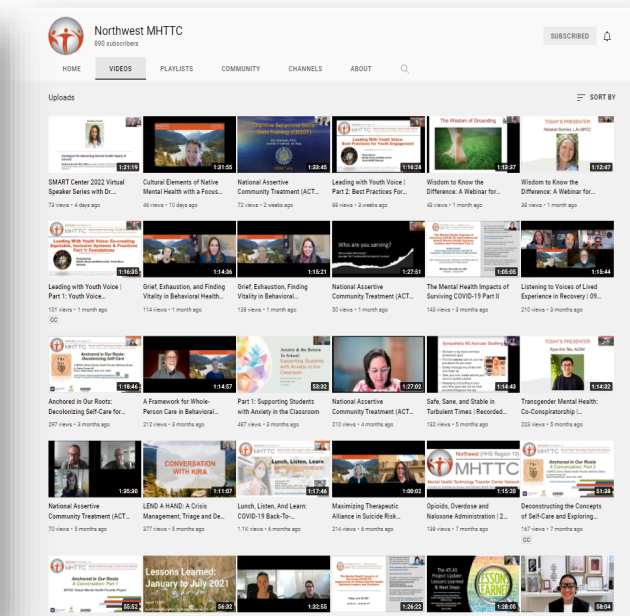
Website

<https://bit.ly/NWSMH>



Newsletters, Training and Resource Announcements

<https://bit.ly/NWSMHsignup>



Northwest MHTTC YouTube Channel

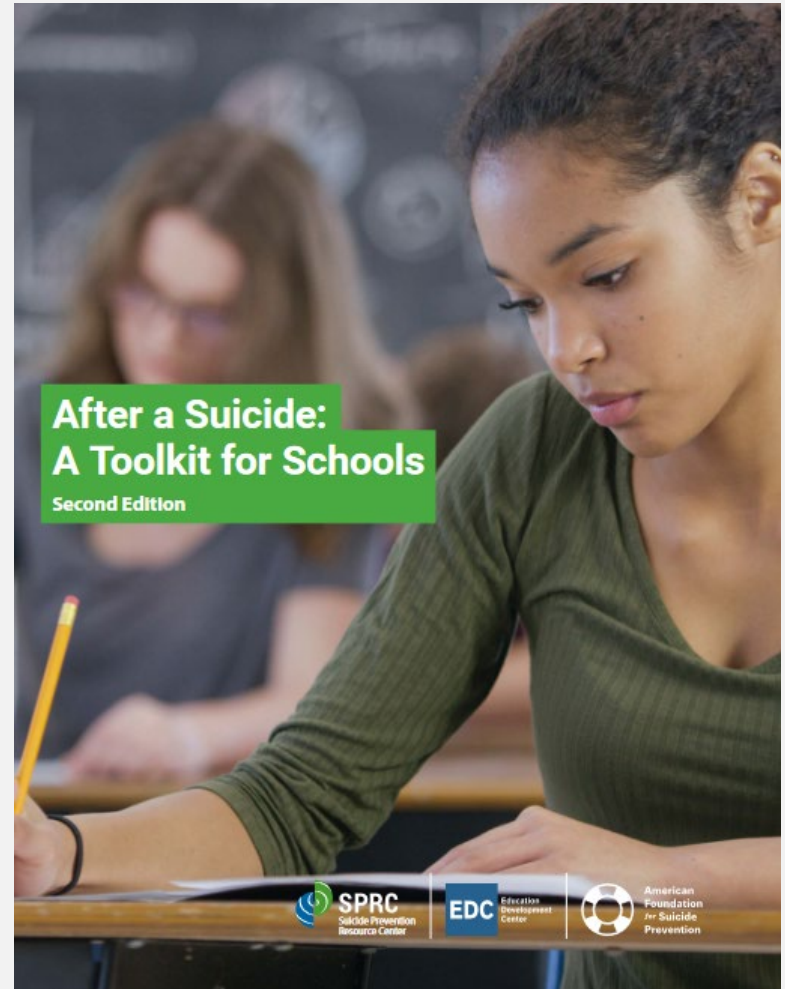
<https://bit.ly/NWMHTTC-YouTube>



# Youth Suicide Must be on Every District's Radar.

- Approximately **2000 high schools nationwide** experience the death of a student by suicide
- **Youth are vulnerable** to suicide contagion following peer, staff, and celebrity suicide deaths
- An **unknown number of schools** experience suicide attempts of youth
- Peers, teachers, staff bring concerns about students to ESA staff and far too frequently the **response is to send students to the emergency room**

**What can we do better???**





# Schools Have an Important Role to Play in PREVENTING YOUTH SUICIDE.



Tier 1 and 2 SEL supports that prevent and mitigate suicide ideation

# Comprehensive School- and Community Based Suicide Prevention

## PROGRAMS AND PRACTICES

RE-ENTRY,  
POSTVENTION

**Strategies to support students at high risk**  
Individualized student interventions and supports  
Crisis response and community partnerships  
Re-entry and postvention planning

INTERVENTION

**Strategies to support students at risk**  
Targeted training for mental health staff to:  
offer small group interventions for students  
who are at risk and to do suicide  
risk assessment, and safety planning  
intervention

PREVENTION

**Strategies to create emotionally supported and physically safe environments for students & identify students at-risk**  
Training for staff, students and families  
SEL interventions to enhance healthy coping & help-seeking  
School-wide initiatives to increase protective factors to reduce risk factors (e.g., bullying prevention, trauma-informed practices)  
Means safety at the building level  
Universal screening

# asc asking is caring



## look

many youth are in pain. We need to know what to look for.



## listen

Remember you don't have to fix things, just listen and try not to pass judgment.



## ask

Asking about suicide doesn't put the idea in their head; ask directly, and stay calm.



## act

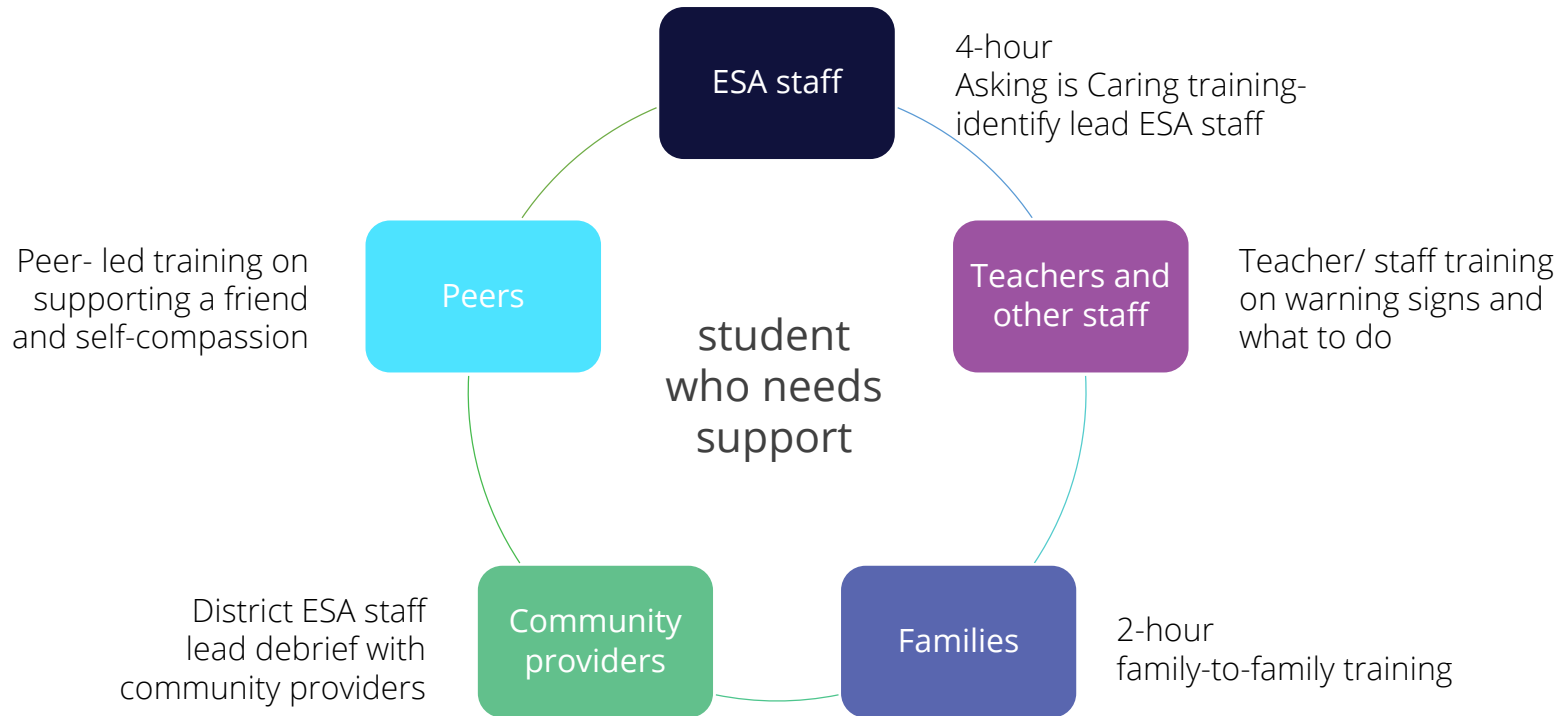
Follow protocols. Offer brief interventions. Support families.



## connect

Activate protective factors. Connect with community resources.

# Everyone has a role to play in suicide prevention...





---

A Community Conversation about Youth Mental Health and Suicide Prevention led by Parents and Caregivers.

- **Tier 1 strategy** delivered by trained parents/caregivers in partnership with the school district.
- **Two-hour program** focused on identifying warning signs how to ask about suicide empathic listening, safety practices (medications, firearms), awareness of district and community resources.
- **Trained to share** their unique stories in the context of a highly collaborative curriculum.
- **Cover critical topics** such as how to recognize when youth are struggling, how to build greater protection and safety in your home.

In partnership with:





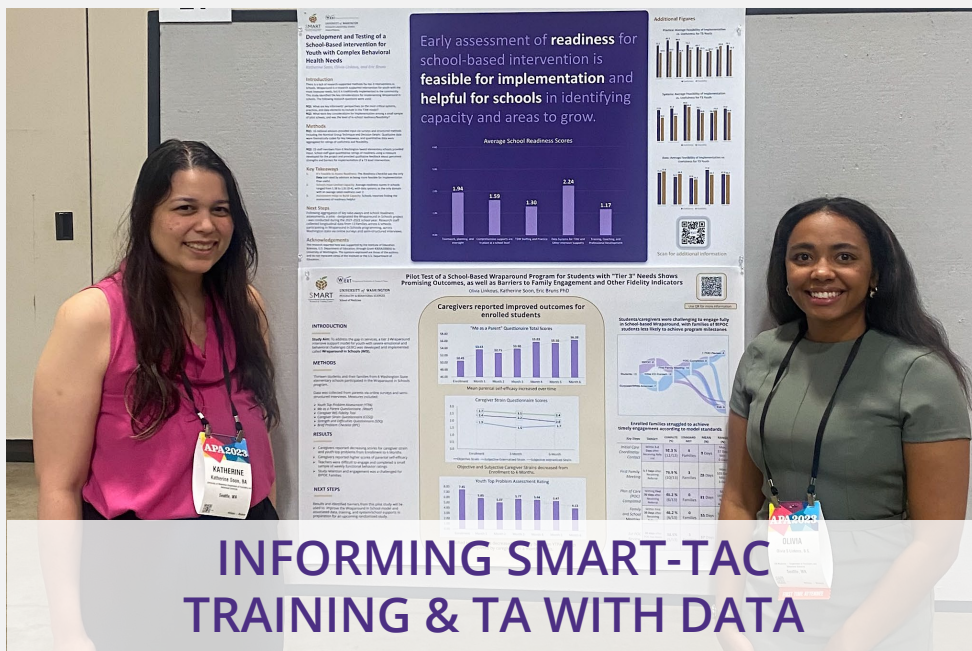
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A Training on Suicide Risk Screening and Brief Interventions to Mitigate Risk and Build Protective Factors.

- **Three-hour training for ESA professionals** inclusive of customized protocols, forms for use by staff, and resource guide for parents.
- **Covers critical topics** including, how to recognize students who are struggling, how to build connection and ask about suicide.
- **Trains** ESA staff in the brief CSSR-S and in the safety planning intervention inclusive of follow-up strategies.
- **Helps** ESA staff know how to work collaboratively with administrators, school staff, families and community-based providers.
- **Supports** ESAs in supporting students who are returning to school after a mental health leave of absence.

In partnership with:





## INFORMING SMART-TAC TRAINING & TA WITH DATA

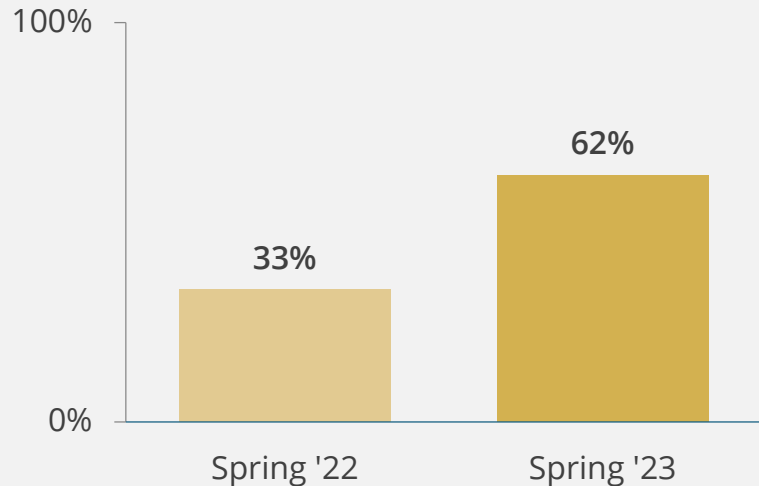
## SCHOOL DISTRICT IMPACT

Standardized Assessment Shows Overall Improvement in System Capacity to Implement School Mental Health.

**Nearly doubled their fidelity score,**  
District MTSS practices in place.

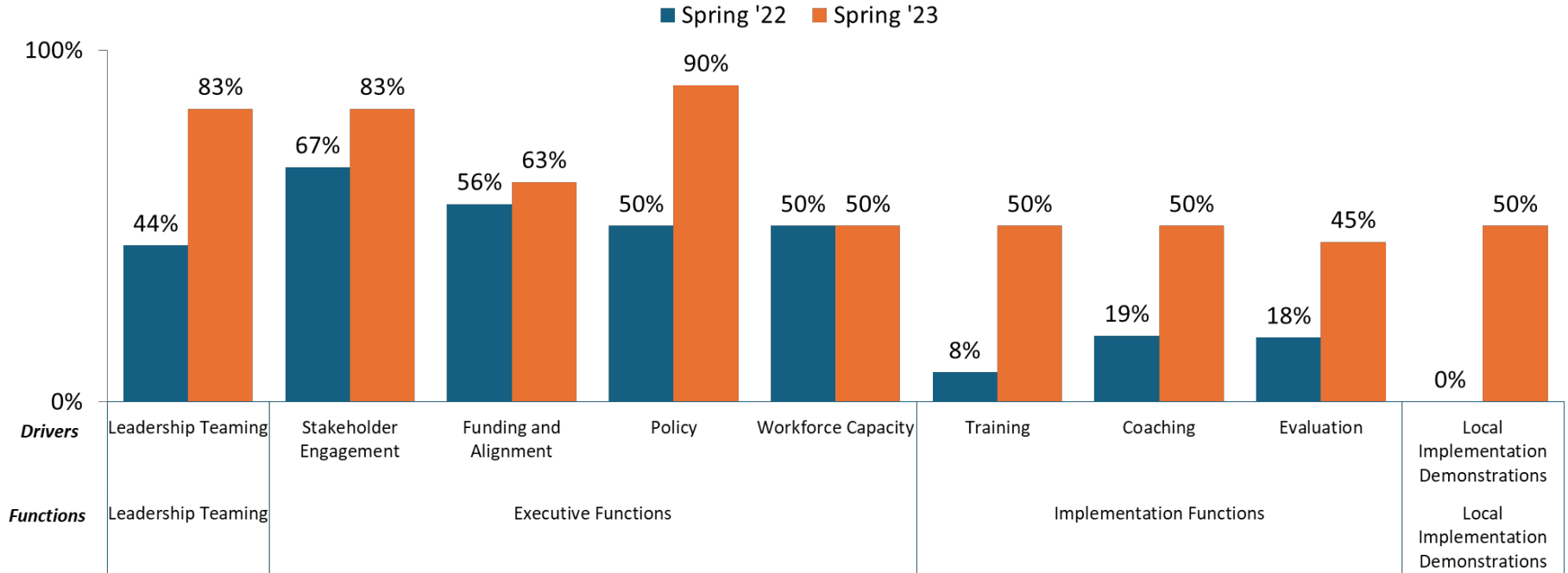


Total District-System Fidelity Inventory (DSFI) Change





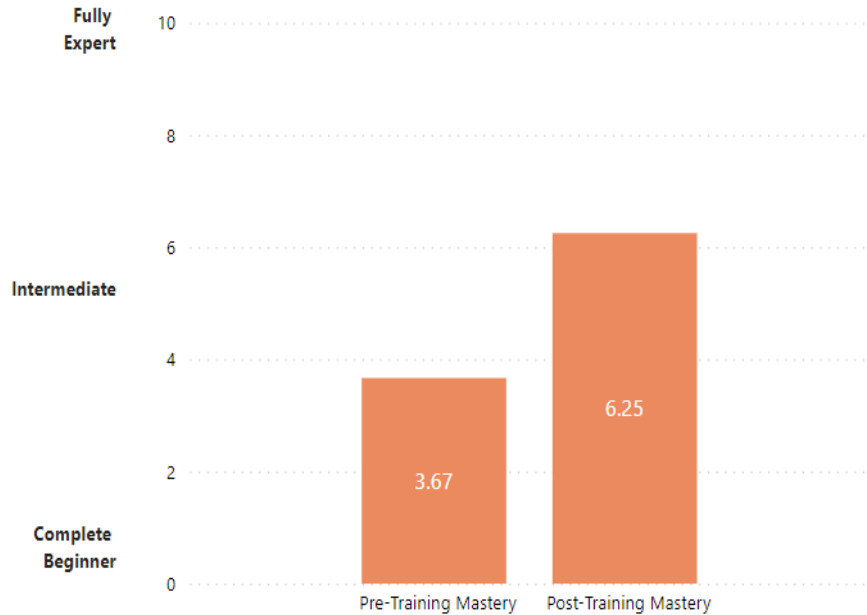
## Changes to DSFI Implementation Drivers and Functions



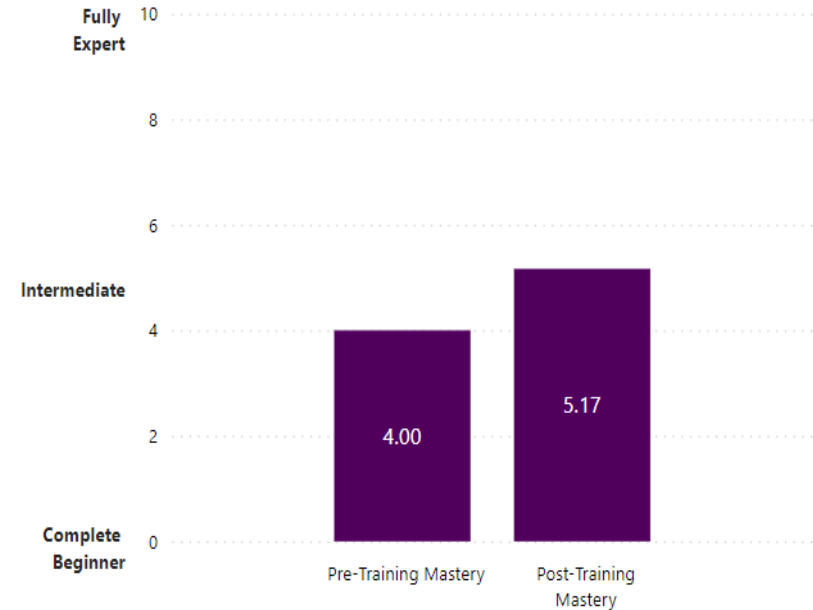
# WORKFORCE IMPACT

Documented Using a Standardized Measure (the IOTTA)

Brief Intervention for School Clinicians –  
Full Day Training + Follow-Up Consult

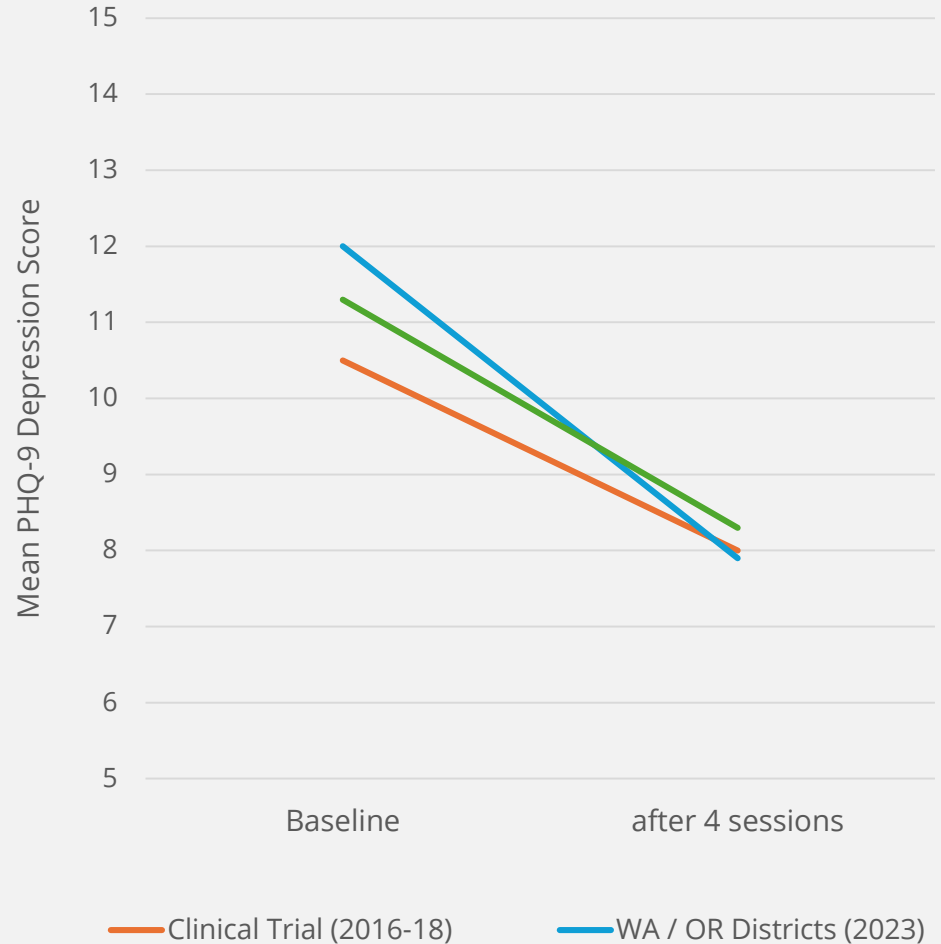


Motivational Interviewing –  
One Hour Web-based Training



## STUDENT IMPACT

Symptom Improvement  
Greater than for our  
Clinical Trial after Training  
and TA Provided via  
SMART-TAC.



# The SMART Center Promotes Overhauls of District Priorities.

## Richland Ready

A Strategic Plan for the Richland School District



### Vision

We aspire to be a center of academic excellence that empowers graduates to be engaged and powerful learners, effective communicators, creative and critical thinkers, resilient individuals and compassionate citizens.

### Mission

Richland School District will educate and develop students who learn from the past, foster in the present and lead our future, meet all students' individual needs, and cultivate knowledge, skills and abilities in order to maximize student potential to they meet their goals.

### Core Values

- Students learn best when they know we believe in their success.
- Students learn best with high-quality and effective instruction aligned with their goals.
- Students learn best through relationships built on compassion, empathy, and respect in a supportive learning environment.
- Students learn best when school and staff partner with families & communities.
- Students learn best when they feel safe and secure.

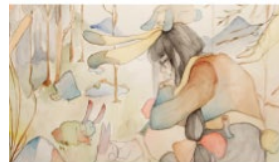


All artwork featured in the Strategic Plan was created by Richland School District students.

## Well-Being

Students learn best when compassion, empathy and respect are central to relationships. Everyone faces barriers and struggles. What's important is how students use adversity to find themselves, become well-rounded and support each other. Schools must sustain nurturing environments, provide opportunities for students to build relationships and offer resources that support student mental health.

Students learn best when surrounded by supportive and supported staff. Guiding youth through a transformative part of their life is a rewarding and challenging role. Providing staff the tools and the support they need to be there for students is critical.



## Progress Benchmarks

- ✓ Percentage of staff feeling supported and satisfied as an employee.
- ✓ Percentage of students that report a sense of belonging.
- ✓ Percentage of students avoiding chronic absenteeism.
- ✓ Percentage of students engaged in at least one extracurricular activity or sport.

➔ Coming Spring 2023, RSD's Data Dashboard

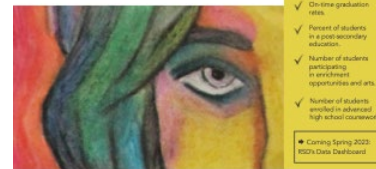
## Focus Areas

- Mental Health Supports**
  - Addition of mental health support staff at schools.
  - Implementation of universal self-therapy services for students.
  - Continued offering of parent support opportunities.
- Extracurricular Activities & Athletics**
  - Expand opportunities for student participation in activities and athletics to promote belonging.
  - Identify additional student activities that meet the needs of students.
- Staff Supports**
  - Enhancement and promotion of staff support and mental health resources.
  - Implementation of staff training focused on supporting social-emotional learning and addressing adverse student experiences.

## Academic Success

Students learn best when they know we believe in their success. Graduation is our goal for every student. It is so critical that schools support and guide each student along their path so the student realizes their potential and determines their own future.

Students learn best with high-quality and effective instruction aligned with their goals. Providing a challenging and supportive academic environment to students from the moment they enter kindergarten all the way through high school prepares students for whatever they want to pursue.



## Progress Benchmarks

- ✓ Increase student achievement on standardized assessments.
- ✓ Percent of 6-12 student meeting district grade-specific literacy benchmarks.
- ✓ On-time graduation rates.
- ✓ Percent of students in a post-secondary education.
- ✓ Number of students participating in enrichment opportunities and arts.
- ✓ Number of students enrolled in advanced high school coursework.

➔ Coming Spring 2023, RSD's Data Dashboard

## Focus Areas

- Inclusive Teaching & Classrooms**
  - Ongoing implementation of instructional strategies & philosophies so teaching staff can support students of all abilities in their classrooms.
- Academically Challenging Pathways**
  - Promotion and enhancement of advanced course options at the high school level.
- Enriching Experiences**
  - Continued support to make high-quality performing, musical and visual arts learning and able to all RSD students.
  - Enhancement of school-based Highly Capable opportunities and other enrichment options.
- Academic Student Supports**
  - Development and support of school-based learning interventions (study assistance).
  - Development of programs supporting English language learners.
  - Support of alternative learning experiences that meet the unique needs of students and families.
- Career & Technical Education (CTE)**
  - Development of enhanced and new CTE dual credit courses and pathways at middle and high schools.
- Early Reading Instruction**
  - Implementation of evidence-based program literacy practices to ensure student literacy K-3, developing a strong foundation in reading.

# Well-Being

Students learn best when empathy is central to relationships. Everyone faces barriers and struggles. What's important is how students use adversity to find themselves, become well-rounded and support each other.

Students learn best when surrounded by supported staff. Guiding youth through a transformative part of their life is also challenging for our school-based staff.

Ensuring students and staff have the support and resources they need sets everyone up for success.

## Focus Areas

### Mental Health Supports

Addition of mental health support staff at schools

Implementation of universal tele-therapy services for students and staff

Ongoing support for Asking Is Caring parent program



“

We had a meeting with another school district about the work we're doing. Their Principal asked, **"since you've implemented this program, what has that changed for you as a principal?"**

Our principal replied, **"Before we implemented this comprehensive system, I was everything to everybody- my office was full, I had 20 kid always in my office, and I didn't really have time to be a principal- I was the mental health counselor, I was the psychologist, I was the other parent. I didn't have time to look at being a leader in the building."**

It was awesome to hear this principal say to the other, this is how this system has changed work, what I can focus on, and change the system overall.

*~ Eastern Washington District Model Demonstration Partner*

”

# Working Smarter, Not Harder...

“I’d say one of the biggest strengths that I see out of the ISF work is a common framework for new initiatives. I think we’ve talked about it a lot when new initiatives or new projects come into our district, our go-to has been to create different committees which naturally lends itself to the siloed work. So we had a lot of different committees going on, and often times, a lot of people going to several different meetings with different committees, talking about similar work. To me, it’s efficiency in how we work together. We are working smarter, not harder, truly.”

- District Community Leadership Team Member

“

Partnering and sharing strategies with a like-minded district under the UW SMART Center leadership was extremely useful- it helps us work smarter, not harder.

*~ District-level ISF Learning Series Participant*

I've been teaching for 32 years, and this is the best training I've ever been to.

”



“

The ISF book study was a deep dive into vulnerability, a boost of optimism, an easy to lean into how-to-model, an incredible burst of community creation, and a dash of magic (because why not add that to every experience?). Before the ISF book study we were siloed and chirping. Post book study we are a collective ROAR.

*~ Piper Sangston, School Social Worker, Bellevue School District*

The UW SMART Center people are magical, they are wonderful, talented educators and leaders in the field, and I cannot say enough positive things about the group that you have. The SMART Center has a lot of credibility. So, we are bought into them, too. So, that's been a really wonderful piece as well.

”

“

I don't want to live in a world without the SMART Center.

*~District Leader*

”

# Helping Students and Families Navigate Systems

## *Perspectives from SCH Partners*

STRESS AND  
DYSREGULATION

ANXIETY, DEPRESSION,  
BIG BEHAVIORS

SUICIDALITY

UNCLEAR NAVIGATION

Schools and local providers must work in integrated fashion to support students.





**SMART**

School Mental Health Assessment  
Research & Training Center



Thank you!

CONNECT WITH US  
VIA OUR WEBSITE, EMAIL OR SOCIAL



[uwsmart@uw.edu](mailto:uwsmart@uw.edu)



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