

# Supporting Trauma-Informed Practices within MTSS

SPRING OSPA CONFERENCE - MARCH 8, 2019

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# Osage County Interlocal Cooperative



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**Let's Get On The Same Page...**



# Acronyms

RTI

PBIS

**ISF**

MTSS

OTISS

**What is your role in MTSS at your sites?**

# River Story?



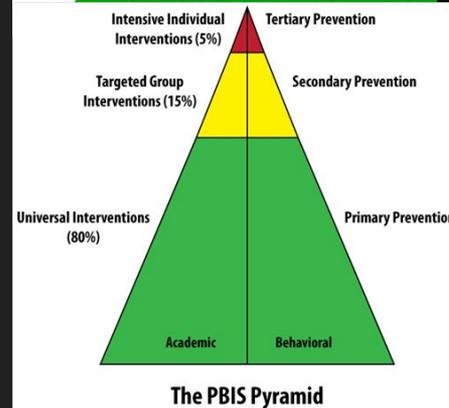
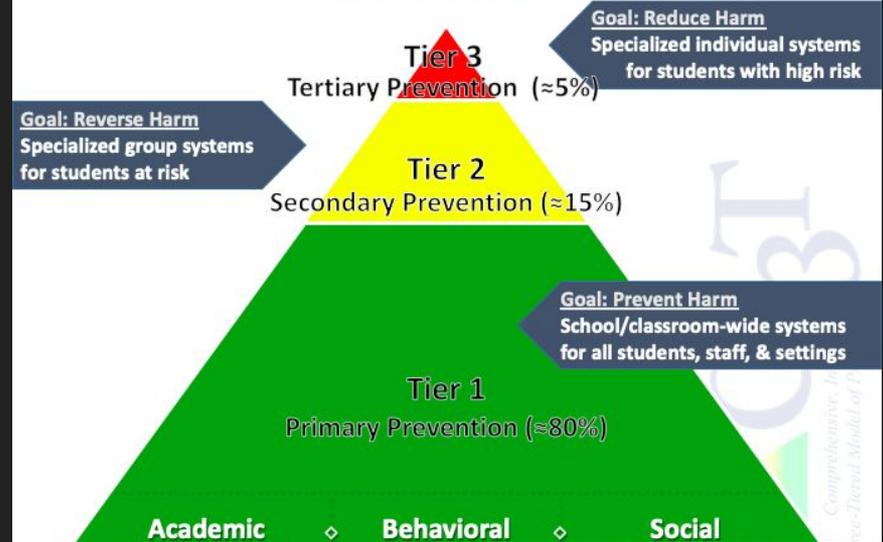
# MTSS/PBIS/RTI/OTISS in your school...

Are these “systems of support” seen as a foundational framework?

ANOTHER initiative?

## Comprehensive, Integrated, Three-Tiered Model of Prevention

(Lane, Kalberg, & Menzies, 2009)



**“One of the major variables affecting sustained implementation of effective practices is the introduction of new initiatives that either (a) **COMPETE** with resources needed for sustained implementation or (b) **CONTRADICT** existing initiatives.”**

**- McIntosh (2015)**

# Initiative Overload...

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

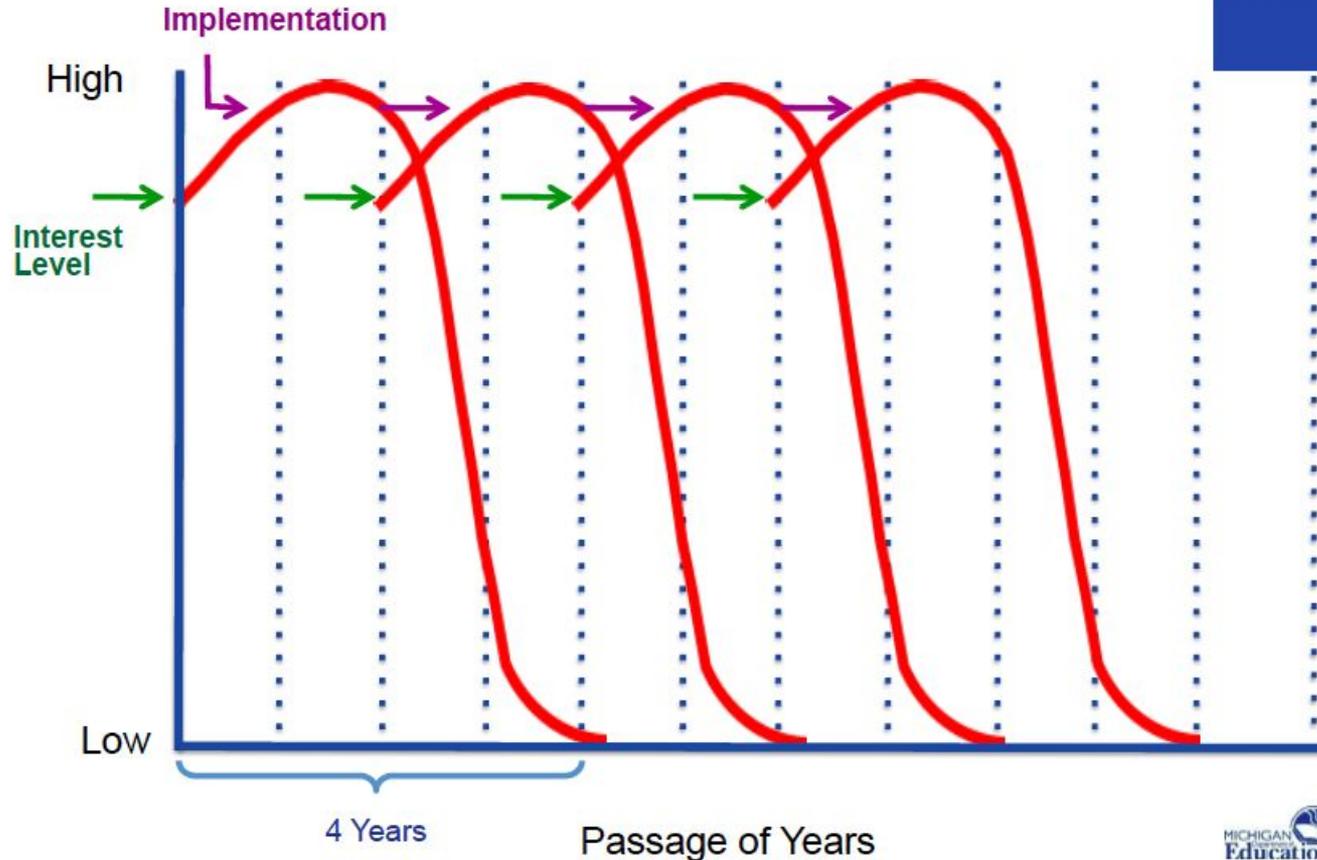
(Gottfredson et al., 2000)

Aligning Academic  
& Behavior  
Systems

*Goodman & Nash*

2015 National PBIS  
Leadership Forum

# Birth and Death Cycles of Educational Innovations (Latham, 1988)



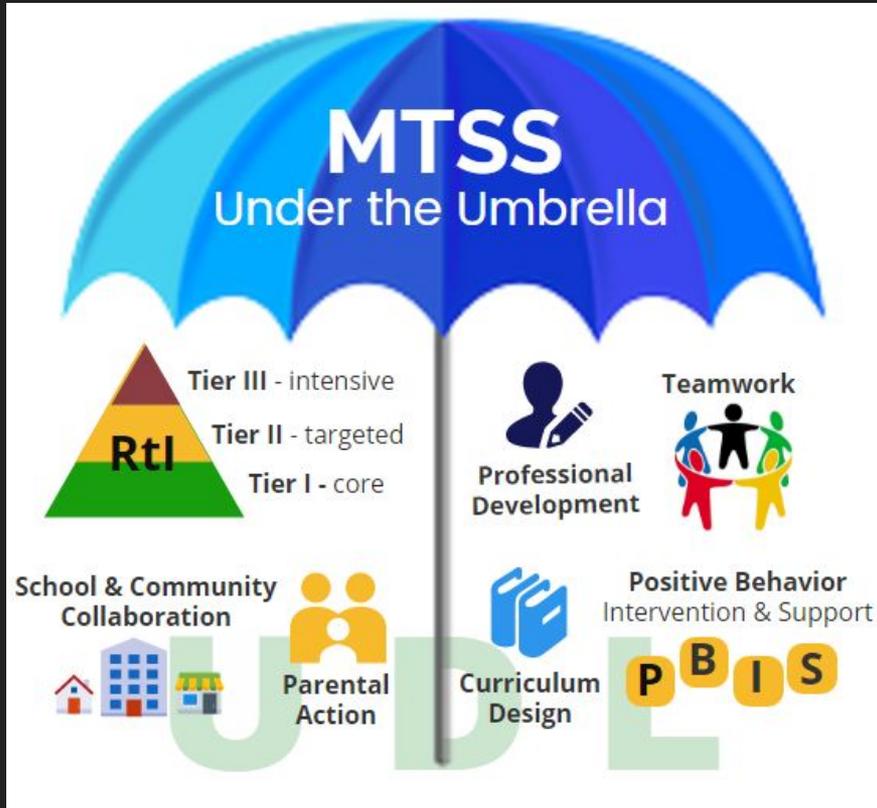
Aligning Academic  
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# Core Defining Features of MTSS



1. Team based leadership and coordination
2. Evaluation of implementation fidelity
3. Continuum of evidence-based practices
4. Continuous data-based progress monitoring and decision-making
5. Comprehensive universal screening
6. Ongoing professional development including coaching with local content expertise

**“The fundamental purpose of PBIS is to make schools more effective and equitable learning environments.”**

**- Rob Horner**

**But where do  
trauma-informed  
practices and mental  
health fit in?**

**MTSS**

**+**

**Mental Health (MH)**

**=**

**Interconnected Systems  
Framework (ISF)**

# ISF Definition

Structure & process for education & mental health systems to interact in most effective & efficient way ...

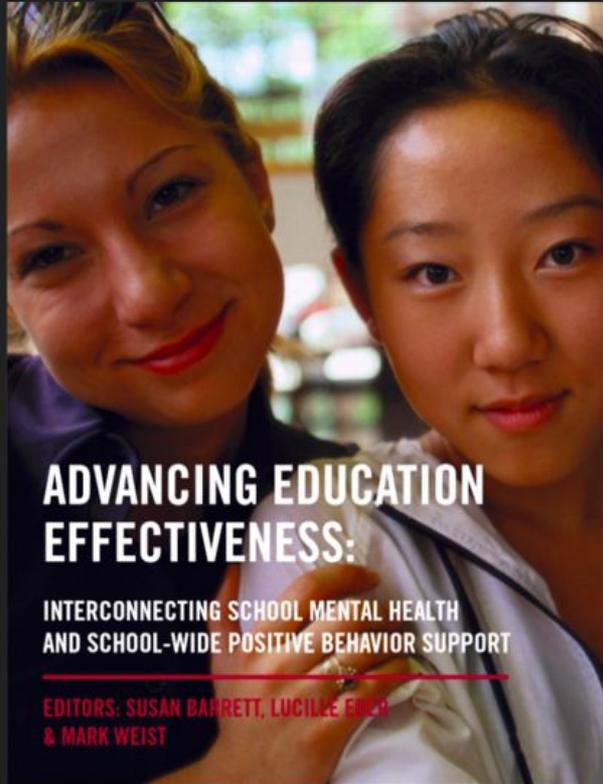
... guided by key stakeholders in education & community mental health systems ...

... who have the authority to reallocate resources, change role and function of staff, & change policy

# Key Messages

1. Single system of delivery
2. Access is not enough
3. Mental health is for ALL
4. MTSS essential to install school mental health services

# Core Defining Features of ISF



1. Effective teams that include community mental health providers
2. Formal processes for the selection and implementation of evidence-based practices (EBP)
3. Tiered prevention logic using data-based decision-making
4. Rigorous progress monitoring for both fidelity & effectiveness
5. Early access through the use of comprehensive screening
6. On-going PD including coaching at both systems & practices level

# Recommendations for Alignment



# Establish your multidisciplinary leadership team

- Educate on MTSS as a framework
- Develop a shared language and common goal



# Inventory current initiatives

- School and district-level
- Programs, interventions, access to community partners and resources
- Evaluate effectiveness



# Identify new initiatives

- Evaluate effectiveness
- Consider context
- Identify existing conflicting initiatives



**Embrace your role!**

**YOU GET RESEARCH!**

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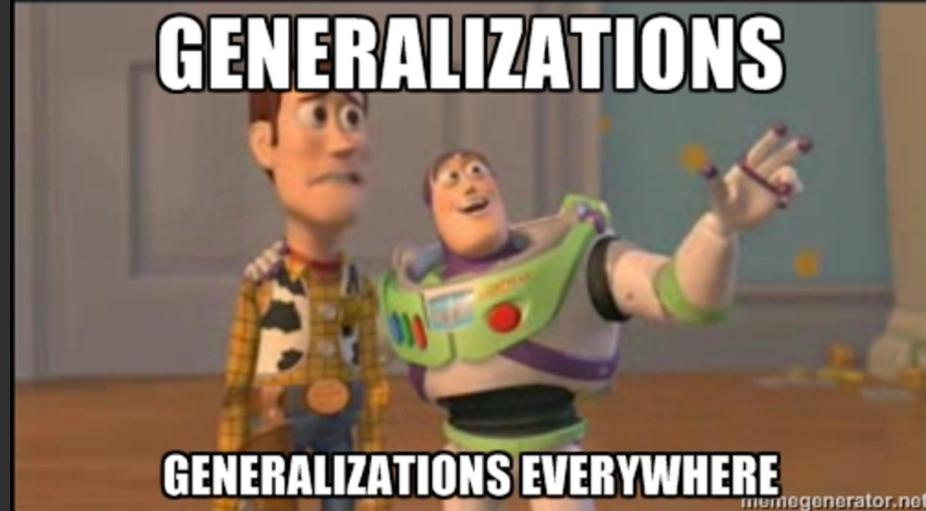
**EVERYONE GETS RESEARCH!!**



School psychologists should be  
critical **CONSUMERS**,  
**DISTRIBUTORS**, and **CONDUCTORS**  
of research.

- Keith (2008)

**Generalize your  
training to  
implementing  
trauma-informed  
practices**



# Universal Screening

**Always begin with questioning  
treatment utility!**

**“a common reaction to the whole-staff presentation is the notion that trauma sensitivity requires screening and identifying all children who have had traumatic experiences. In fact, this is not recommended and could be quite harmful. In addition to stigmatizing some children, this approach also reinforces the idea that trauma sensitivity is solely about applying interventions to particular children instead of creating a safe whole-school environment for all children.” (p. 54).**

**- Cole, Eisner, Gregory, and Ristuccia (2013)**

**Focus on the INDIVIDUAL RESPONSE  
and not the experienced sources of  
stress.**

**Developmentally appropriate measures**

**Consider short-term alternatives**

**OBTAIN PARENTAL CONSENT**

# **Title IV 21st Century Schools**

## **Part A, Sec 4001 [20 U.S.C. 7101] General Provisions**

“Shall obtain prior written, informed consent from the parent of each child who is under 18 years of age to participate in any mental-health assessment or service that is funded under this title...

...describing in detail... purpose for such assessment or service, the provider of such assessment or service, when such assessment or service will begin, and how long such assessment or service will last.”

**Ensuring that caregivers are fully informed about the rationale for the questions, have a clear sense of the potential benefit, and believe their information will be handled safely increases the likelihood of consent**

**- Blodgett (2012)**

**Interventions/Supports/Services**

**Always start with building solid Tier I supports!**

## **MO SW-PBS Eight Effective Classroom Practices**

- Classroom Expectations
- Classroom Procedures & Routines
- Encouraging Expected Behavior
- Discouraging Inappropriate Behavior
- Active Supervision
- Opportunities to Respond
- Activity Sequencing & Choice
- Task Difficulty

*Figure 8.1*

# **Consistency & Teaching**

### WHAT IS TRAUMA?

Trauma is the “psychological, emotional response to an event or an experience that is deeply distressing or disturbing” (Center for Treatment of Anxiety and Mood Disorders). These traumatic events can be any “frightening, dangerous, or violent event that poses a threat to a child’s life or bodily integrity” or the witnessing of an event that threatens the safety of a loved one (National Childhood Trauma Stress Network). Exposure to these traumatic events alters a child’s brain development and can have lasting impact on a child’s well-being.

#### Examples of traumatic events include:

- Physical, sexual, or psychological abuse or neglect
- Natural and technological disasters or terrorism
- Family or community violence
- Loss of a loved one
- Family substance abuse
- Refugee and war experiences
- Serious accidents or life-threatening illness
- Military family-related stressors

#### Reactions to trauma can include:

- Intense and ongoing emotional upset
- Depressive symptoms or anxiety
- Behavioral changes
- Difficulties with self-regulation
- Problems relating to others/forming attachments
- Loss of previously acquired skills
- Attention and academic difficulties
- Nightmares
- Problems sleeping or eating
- Physical symptoms, such as aches and pains

#### Prevalence:

- Twenty-six percent of children in the United States will witness or experience a traumatic event before they turn four years old (National

Center for Mental Health Promotion and Youth Violence Prevention, “Childhood Trauma and Its Effect on Healthy Development,” July 2012).

- More than 10% of youth age 17 and younger reported five or more exposures to violence (Bell, C.C. & Jenkins E.J. (1993). “Community Violence and Children on Chicago’s Southside.” *Psychiatry*, 56 (1): 46-54)
- Young children exposed to five or more significant adverse experiences in the first three years of childhood face a 76% likelihood of having one or more delays in their language, emotional or brain development (Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, [Resources for Child Trauma-Informed Care](https://www.samhsa.gov/children/awareness-day/2018/resource-list-traumatic-stress): [samhsa.gov/children/awareness-day/2018/resource-list-traumatic-stress](https://www.samhsa.gov/children/awareness-day/2018/resource-list-traumatic-stress))
- [National Childhood Trauma Stress Network](https://www.nctsn.org)  
[nctsn.org](https://www.nctsn.org)
- [Child Trauma Academy](https://www.childtrauma.org)  
[childtrauma.org](https://www.childtrauma.org)
- [Trauma Statistics](https://www.recognizetrauma.org)  
[recognizetrauma.org](https://www.recognizetrauma.org)

### TRAUMA-INFORMED SCHOOLS

Trauma-informed schools understand the educational impacts of trauma, and are safe, supportive environments, where students form positive connections with adults and peers and learn to regulate their emotions.

Core attributes of a trauma-informed or trauma sensitive school can include the following:

- A shared understanding among all staff.
- The school supports ALL children to feel safe physically, socially, emotionally and academically.
- The school addresses students’ needs in holistic ways, taking into account their relationships, self-regulation, academic competence, and physical and emotional well-being.

# Help with Information Integration

# SDE Trauma-Informed Schools Brief

“Teach students coping skills”

“Discipline is to teach, not to punish”

“Allow the student to de-escalate and regulate before solving the issue at hand”

“Think about what is really driving the student’s behavior... remember that it was developed as a way to keep the student safe”

“Have I set clear expectations for my classroom?”

“Have I greeted all my students by name today?”

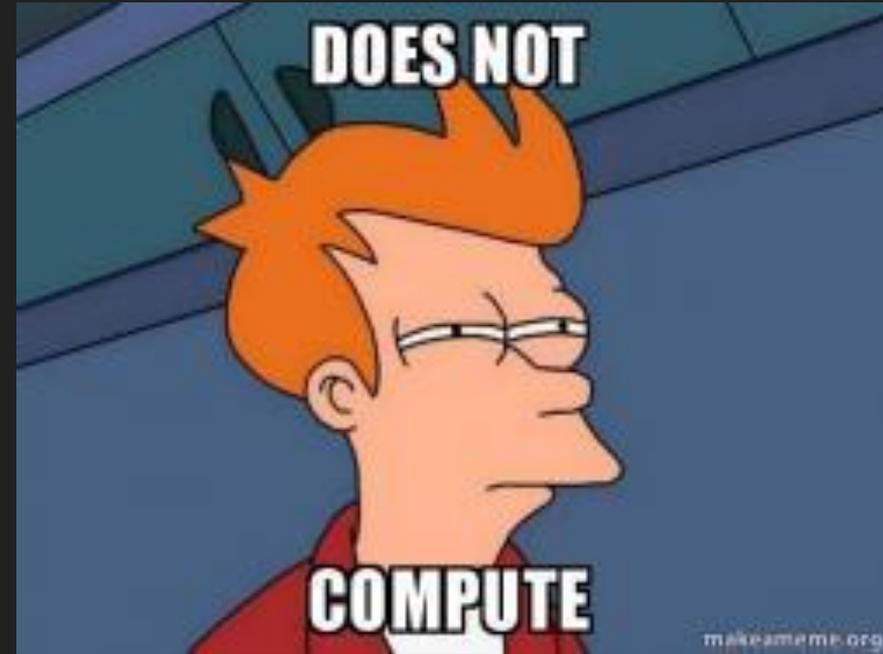
## PBIS Steps

1. Establish school-wide clear expectations
2. Explicitly teach the expectations
3. Acknowledge appropriate behaviors
4. Appropriately and consistently respond to inappropriate behaviors
5. Use data to drive system-wide and individual decision-making

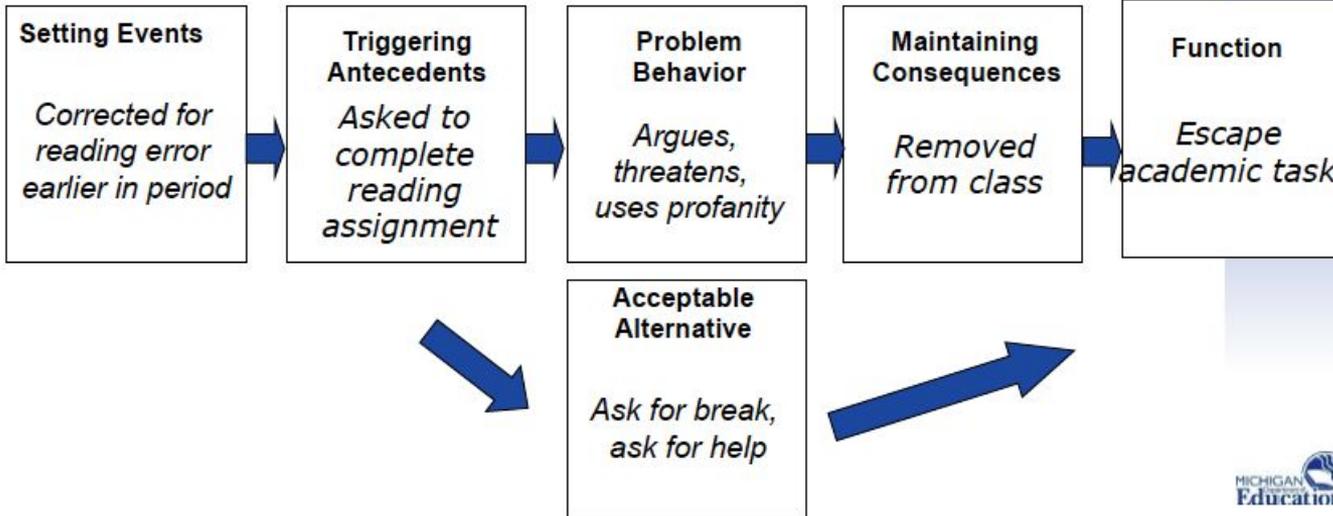
**Effectively use information regarding  
trauma history to PROBLEM-SOLVE  
versus PROBLEM-ADMIRE**

# WHOLE SCHOOL, **WHOLE COMMUNITY**, WHOLE CHILD

*A collaborative approach to learning and health*



# Behavior Support Planning for Eddie



Aligning Academic & Behavior Systems

*Goodman & Nash*

2015 National PBIS Leadership Forum

# Setting Event Strategies

## WHAT WE CAN CONTROL

- Engaging families
- Structure / schedule
- Classroom accommodations and modifications
- Home/school communication

## WHAT WE CANNOT

- History of trauma
- Medical / physical conditions
- Temperament
- Sensory profile
- Carry-in issues

VTPBiS Leadership  
Team Training at  
the Intensive Level  
within a  
Multi-Tiered  
System of Support

*VTPBiS Trainers*

March 2016- Day 2

# PREVENT

Setting Event &  
Antecedent Strategies

# TEACH

Skill Strategies

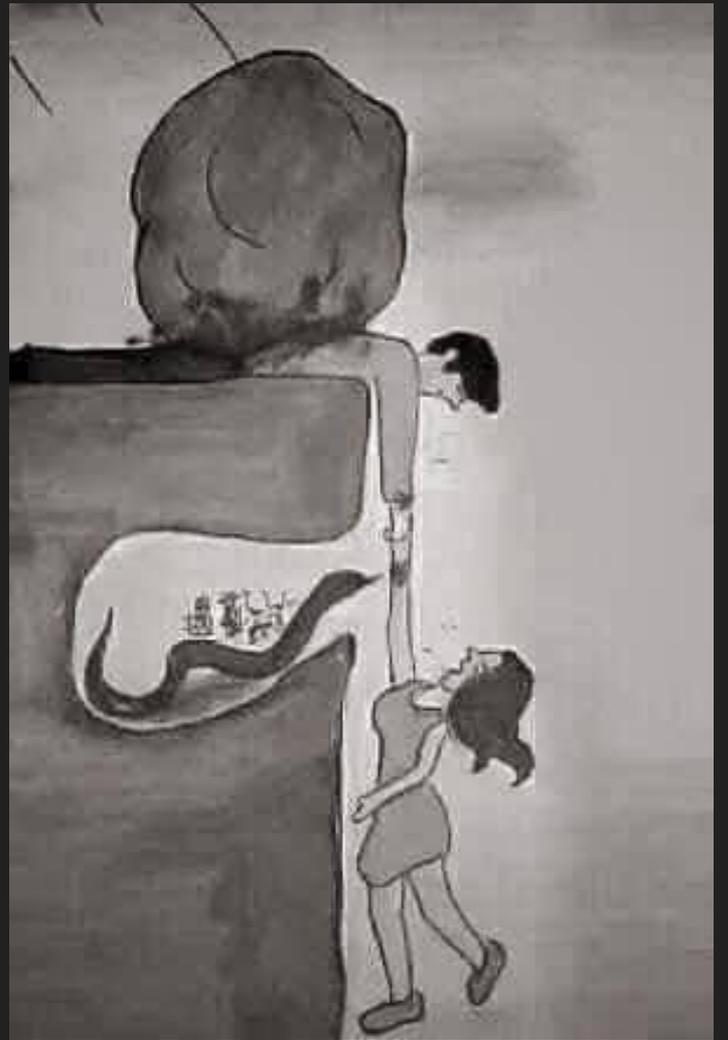
# REINFORCE

Appropriate Behaviors

# RESPOND

To Inappropriate  
Behaviors

Just  
Remember...



## For Further Information:

The National Center for Mental Health and Juvenile Justice (2016). *Guidance for trauma screening in schools*. Delmar, NY.

National Technical Assistance Center on Positive Behavior Interventions and Support. (2017). Technical guide for alignment of initiatives, programs, practices in school districts. Eugene, OR.

<https://www.pbis.org/school/school-mental-health/interconnected-systems>

# Thank you!

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