**SCHOOL BEHAVIORAL HEALTH NEEDS ASSESSMENT**

Instructions: Based on the *Colorado Framework for School Behavioral Health Services*, this survey is designed to identify the strengths and areas of improvement for your school in managing the social, emotional, and behavioral health needs of your students. **This needs assessment will be piloted with our school behavioral health grantee schools beginning in January of 2014. Because the survey is in its pilot phase, if your team uses the needs assessment, we would like your feedback about the survey. Please send feedback to eelder@coloradoedinitiative.org.**

As the school-level team guiding the school behavioral health services work, please answer each question to the best of your knowledge, and select the response you feel most accurately represents your school. Be sure you include input from multiple people with varying roles in your school. Then, as the school-level planning team, analyze your results to select your priority areas for improvement and create your next steps.

Refer to the accompanying *Framework* for definitions of words you may not be familiar with.

**This survey format was adapted from Boston Public Schools and Boston Children’s Hospital.**

**Your School:**

**Including this school year, how many years have you been at this district and/or school?**

0-2  3-5 6-9 10+

**Which best describes your role?**

Administrator

Teacher

School Behavioral Health Professional, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paraprofessional

Nurse

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not at all** | **A little bit** | **To some degree** | **To a great degree** | **Not**  **sure** |
| 1.) A school-level team is in place that guides the comprehensive school behavioral health work. |  |  |  |  |  |
| FOUNDATION |  |  |  |  |  |
| 2.) School-wide support exists to focus on the positive social and emotional development of students. |  |  |  |  |  |
| 3.) The school’s mission, philosophy, and policies reflect an explicit focus on the social and emotional development of students. |  |  |  |  |  |
| 4.) Our school culture focuses on building strong family-school-community partnerships that support students’ social, emotional, and behavioral health needs. |  |  |  |  |  |
| 5.) The school uses data to guide its social, emotional, and behavioral health initiatives. |  |  |  |  |  |
| 6.) Professional development for all school staff includes how to reduce mental health stigma. |  |  |  |  |  |
| 7.) Professional development for all school staff includes how to identify students in need of social, emotional, and behavioral health supports. |  |  |  |  |  |
| 8.) Professional development for all educators includes how to create culturally-responsive and trauma-sensitive classrooms. |  |  |  |  |  |
| 9.) Staff members are encouraged to be proactive in their self-care. |  |  |  |  |  |
| 10.) School leaders ensure there are positive school climate strategies that are used frequently and consistently throughout the school. |  |  |  |  |  |
| TIER 1 – UNIVERSAL SUPPORTS FOR ALL STUDENTS |  |  |  |  |  |
| 11.) Consistent and clear positive behavior supports are the norm throughout the school. |  |  |  |  |  |
| 12.) Positive behavior supports lead to clear school-wide expectations. |  |  |  |  |  |
| 13.) Universal social and emotional learning opportunities are included across grade levels and curriculum. |  |  |  |  |  |
| 14). School activities or programs focus on building students’ strengths and resilience. |  |  |  |  |  |
| 15.) The school uses universal screening for students to determine students’ social, emotional, and behavioral health needs. |  |  |  |  |  |
| 16.) School staff has been trained in a universal screening system to identify students who need extra social, emotional, or behavioral health support. |  |  |  |  |  |
| 17.) School-wide universal screening allows us to target resources and support for student who need it most, especially internalizing students. |  |  |  |  |  |
| 18.) Staff has the resources and training to effectively communicate with families about a student’s behavioral health concerns. |  |  |  |  |  |
| 19.) When there is a concern about a student’s behavioral health, there are efforts to communicate with the family. |  |  |  |  |  |
| 20.) A clear and consistent referral process is in place for students with behavioral health needs. |  |  |  |  |  |
| 21.) School staff has the knowledge, training, and resources about how to refer students for Tier 2 and Tier 3 services. |  |  |  |  |  |
| TIER 2 – TARGETED SUPPORTS FOR SOME STUDENTS |  |  |  |  |  |
| 22.) A school-wide system is in place to take action on referrals for students with behavioral health concerns. |  |  |  |  |  |
| 23.) Follow-up information is provided to necessary staff about the status or outcome of student behavioral health referrals. |  |  |  |  |  |
| 24.) A professional is available to perform an assessment for students who have been referred for behavioral health concerns. |  |  |  |  |  |
| 25.) School behavioral health professionals use evidence-based interventions. |  |  |  |  |  |
| 26.) School behavioral health professionals monitor students’ progress in school settings. |  |  |  |  |  |
| 27.) To ensure students’ progress continues across the school setting, adequate information is shared between:  a. educators,  b. school leaders,  c. families, and  d. school behavioral health professionals |  |  |  |  |  |
| 28.) The school has a designated person for families to contact when they have a concern about their child’s behavioral health. |  |  |  |  |  |
| 29.) When a group of students begins exhibiting similar problems, staff intervenes to try to stop the root causes. |  |  |  |  |  |
| 30.) Families are part of efforts to prevent future behavioral health problems. |  |  |  |  |  |
| 31.) Behavioral health services are culturally appropriate. |  |  |  |  |  |
| 32.) Behavioral health services are linguistically relevant. |  |  |  |  |  |
| 33.) School staff is knowledgeable about how to do a “warm hand off” across the secondary and tertiary levels of the pyramid. |  |  |  |  |  |
| TIER 3 – INTENSIVE SUPPORTS FOR FEW STUDENTS |  |  |  |  |  |
| 34.) Individual and group counseling or therapy opportunities are available for students throughout the school day. |  |  |  |  |  |
| 35.) Resources or services are available for students who may be experiencing the negative consequences of specific problems, such as depression or loss. |  |  |  |  |  |
| 36.) All students know where to go for resources when they may experience negative consequences of specific problems, such as depression or loss. |  |  |  |  |  |
| 37.) When a behavioral health emergency arises, it causes minimal interruption to overall operations of the school. |  |  |  |  |  |
| 38.) Staff members have a clear and consistent understanding about a crisis response plan. |  |  |  |  |  |
| 39.) Staff has been trained in ways to appropriately respond to students who experience urgent behavioral health problems. |  |  |  |  |  |
| 40.) The people responsible for specific tasks or duties in a behavioral health emergency are clearly defined. |  |  |  |  |  |
| 41.) There are clear channels of communication to share information about behavioral health emergencies with staff. |  |  |  |  |  |
| 42.) Information about behavioral health emergencies is appropriately shared with staff. |  |  |  |  |  |
| 43.) Information about behavioral health emergencies is appropriately shared with families. |  |  |  |  |  |
| 44.) Follow-up services are available for students who experience behavioral health emergencies. |  |  |  |  |  |
| 45.) The school has proactive plans in place for students transitioning back to school from residential or hospitalization treatment. |  |  |  |  |  |
| SYSTEMS OF CARE |  |  |  |  |  |
| 46.) A behavioral health professional has contracted with the school for service delivery. |  |  |  |  |  |
| 47.) School counselors, school psychologists, and/or school social workers have a protocol in place for care coordination and wraparound services for students with high behavioral health needs. |  |  |  |  |  |
| 48.) School leaders ensure that HIPAA and FERPA policies are followed. |  |  |  |  |  |
| 49.) The school-level team guiding this work frequently communicates with the behavioral health professionals who are contracted with the school. |  |  |  |  |  |
| 50.) The school-level team guiding this work frequently communicates with the school behavioral health professionals, such as school counselors, school psychologists, and school social workers. |  |  |  |  |  |

51.) How satisfied are you with

a. the amount of resources available to address students’ behavioral health in your school?

|  |  |  |  |
| --- | --- | --- | --- |
| Not at all satisfied | Somewhat satisfied | Satisfied | Very satisfied |

b. the quality of behavioral health services in your school?

|  |  |  |  |
| --- | --- | --- | --- |
| Not at all satisfied | Somewhat satisfied | Satisfied | Very satisfied |

52.) How confident do you feel in your own ability to address behavioral health issues in your work?

|  |  |  |  |
| --- | --- | --- | --- |
| Not at all confident | Somewhat confident | Confident | Very confident |

53.) How familiar are you with the behavioral health services in your school?

|  |  |  |  |
| --- | --- | --- | --- |
| Not at all familiar | Somewhat familiar | Familiar | Very familiar |

**Planning Matrix**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Goals | Objectives | Method(s)  How will you measure this objective? | Timeline | Responsible Person(s)  Who will be involved in carrying out this assessment? | Resources Needed  What resources will you need to implement the plan? (stipend, reassigned time, training support) |
| Goal #1 | Objective #1 |  |  |  |  |
|  | Objective #2 |  |  |  |  |
| Goal #2 | Objective #1 |  |  |  |  |
|  | Objective #2 |  |  |  |  |
| Goal #3 | Objective #1 |  |  |  |  |
|  | Objective #2 |  |  |  |  |

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