



3F- Establishing Tier 2 Systems and Practices in Setting for Youth with High Needs

Presenters:

Emily Spurlock, Nevada Positive Behavior Support Technical Assistance Center

Dr. Melissa Depa, Summit View Youth Center

Ashleigh Edwards, Summit View Youth Center

- **Topic:** Tier 2
- **Keywords:** Tier 2, Juvenile Justice, Alternative Settings, High Need





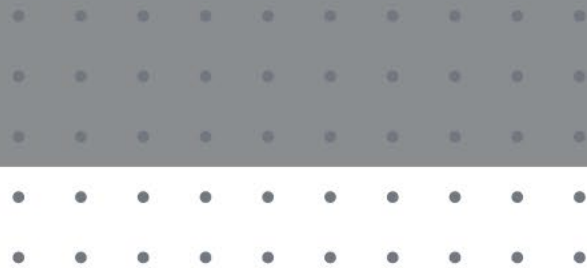
Learning Objectives

1. *Define the core features of Tier 2 practices*
2. *Identify essential systems and data needed for effective Tier 2 implementation*
3. *Describe processes for identifying and matching youth need to Tier 2 interventions.*





Tier 1



Meet Summit View

- Summit View Youth Center (SVYC) youth:
 - Only maximum-security youth facility in Nevada
 - Other youth state facilities are staff-secured
 - Population
 - High school aged males between 14 and 19 years
 - Census Maximum
 - 46 youth with an average of 40
 - How youth get to the facility
 - Committed by various juvenile courts throughout Nevada
 - Average length of stay
 - 6-9 months
 - Programs based



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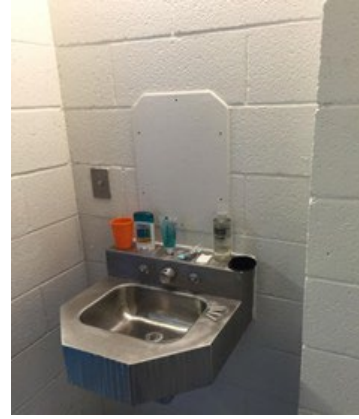
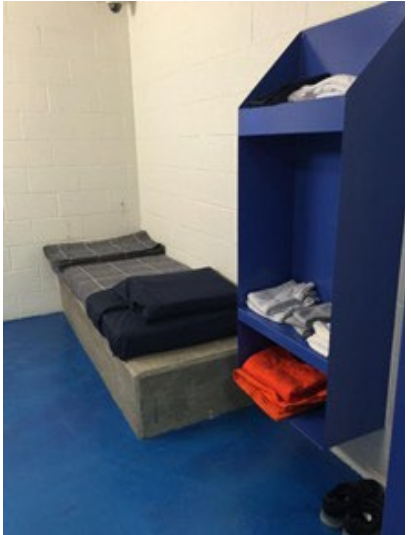
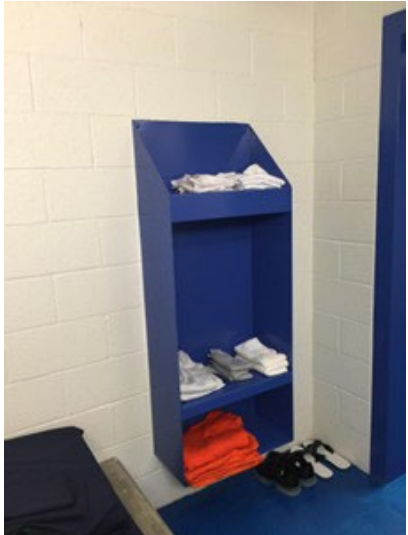
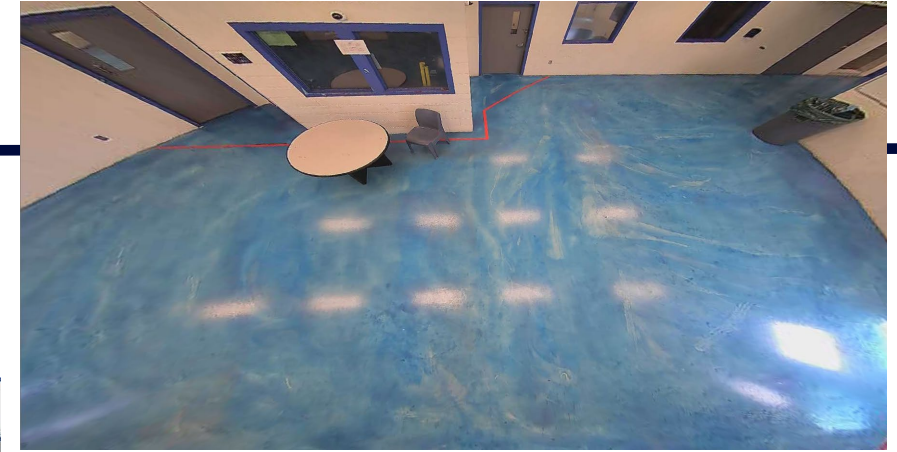
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Tier 1 Context

- Youth at Summit View vary greatly when compared to K-12 school PBIS
 - Criminogenic needs factors
 - Persistent and ongoing problematic/aggressive behaviors
 - Moderate to high mental health acuity
 - Cognitive and intellectual differences
 - Transient living environments, sometimes continuous
 - Experience disproportionate cycles of trauma
 - School related problems
 - Tier 1 looks different
 - CICO
 - Social skills group twice weekly
 - Levels



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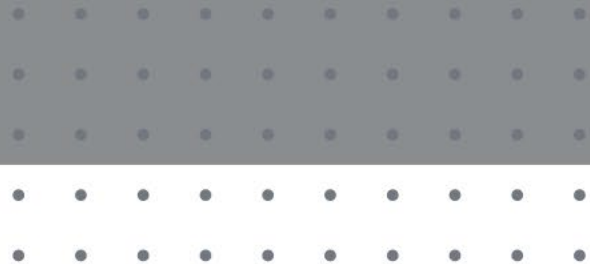
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Tier 2 Overview

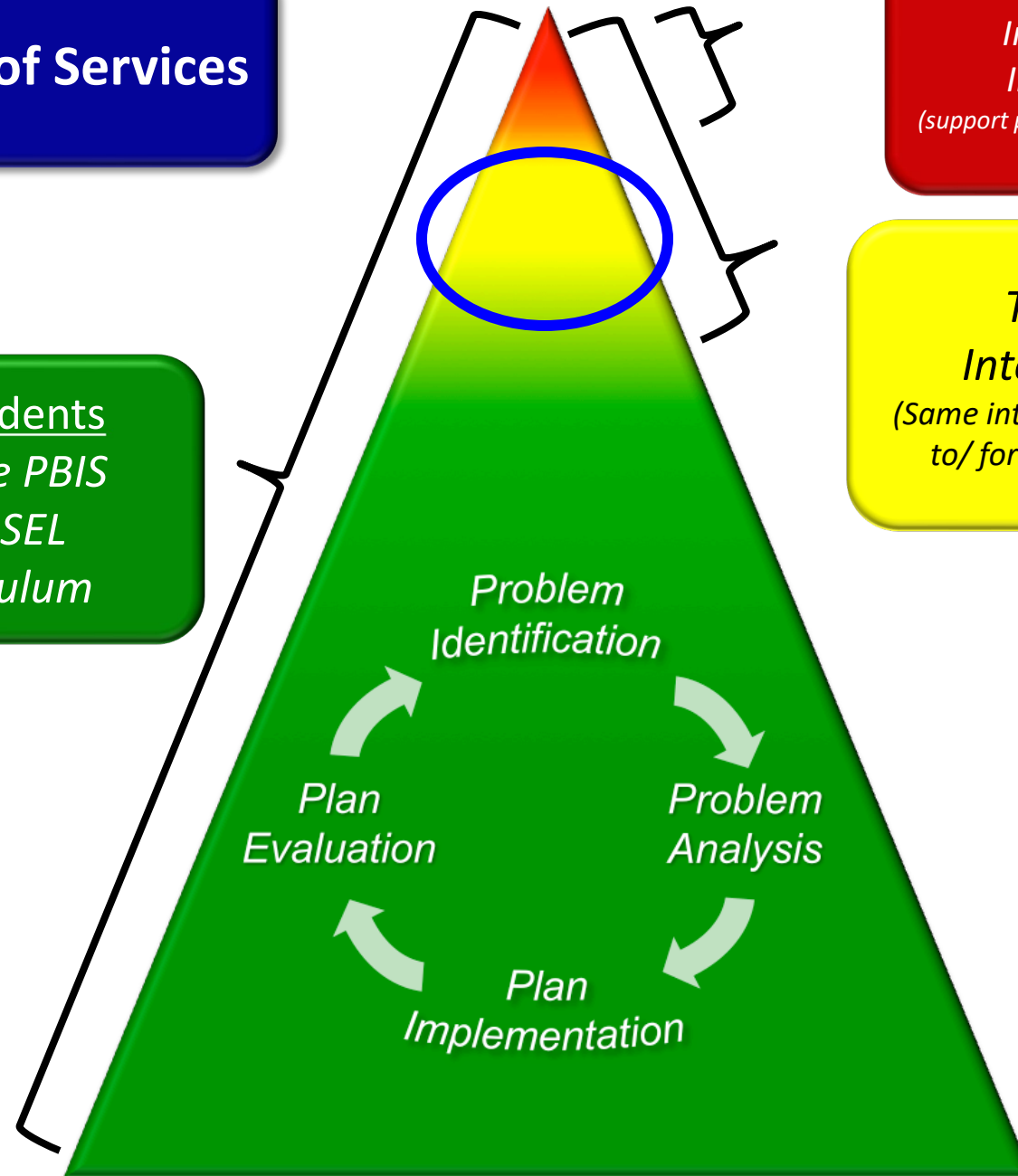


Continuum of Services

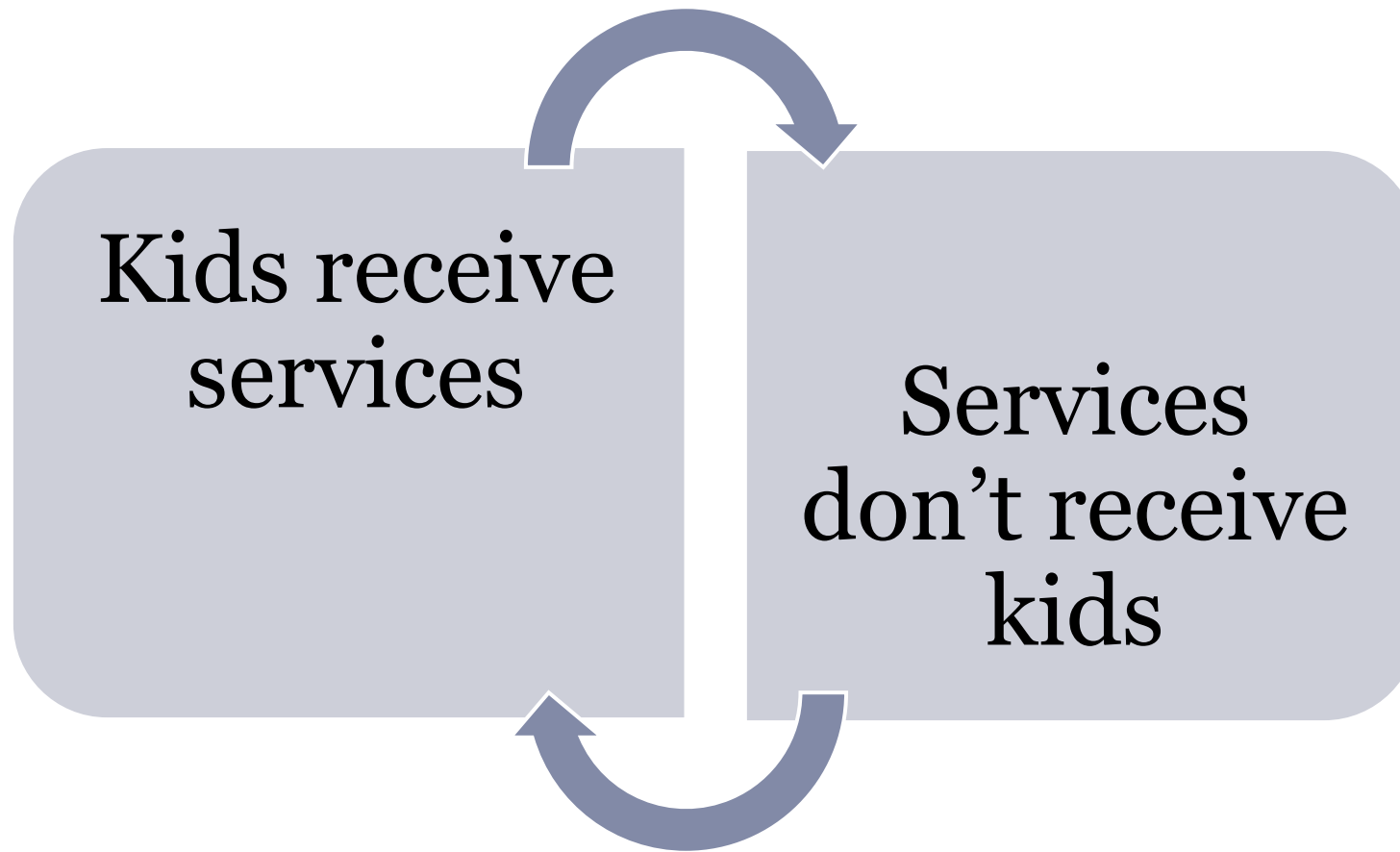
~80% of students
*Facility-wide PBIS
Universal SEL
Core Curriculum*

~5%
*Individualized
Interventions*
(support plan unique to each youth)

~15%
*Targeted
Interventions*
(Same intervention provided
to/ for groups of youth)



Person First Language



Prevention is Critical

Tier 1

Systems are essential and must be in place

- Consistently score 70% or greater on the TFI

Tier 2

Processes and supports rely on a strong Tier 1 system

Foundation

Lack of a firm T1 = too many students referred for T2 supports



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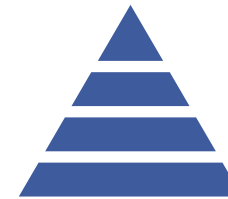
Goals of Tier 2 Supports



Identify and Support youth
at-risk for not meeting
behavioral expectations

Provide:

- A continuum of supports
- Remediation
- Sufficient & appropriate interventions



Prevent problems from
getting worse

Tier 2 Processes Include



Universal Screening



Data-based problem solving



Pre-determined *data decision rules (DDRs)*



Appropriate, evidence-based interventions



Checks for fidelity of implementation



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Critical Features Checklist

Tier 2 interventions provide:

- ☐ Additional instruction/time for student skill development
- ☐ Additional structure/predictability
- ☐ Increased opportunity for feedback



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Fidelity Goal:
All Tier 2 Interventions include all 3 core
Tier 2 features.

Critical Elements of Tier 2 PBIS

Equity

Make student **growth** and **benefit** central to all decisions. Youth outcomes that reflect equitable learning opportunities must be the ultimate criteria for all decisions

Systems

- Secondary Intervention Team
- Weekly data-based program review
- ...

1. ~15% of youth with facility determined tracking form cut offs
2. Increasing pro-social skills of targeted group (as measured by points earned for pro-social behavior)
3. Reduce likelihood of committing crimes

Outcomes

- Tracking Forms
- Point cards
- Behavioral data(grades, credits earned, classes attended)

Data

- Screening
- More intense and frequent social skills instruction & reinforcement
- Tailored interventions to match risk level, criminogenic needs and characteristics

Practices



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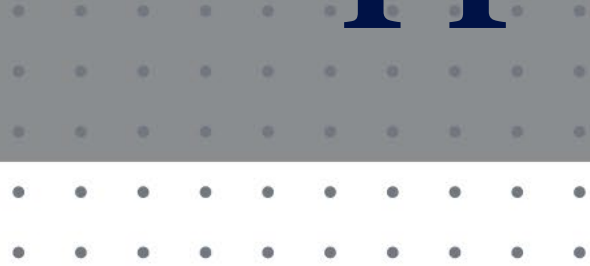


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Requests for Additional Support





Request for Additional Support Process

What is Needed?

- Staff training
- Decision rules
- Procedures if staff/teacher requests for support exceed resources
- Staff notification of youth receiving support

Timelines Determined

- Nomination decisions (~10 days)
- Providing supports to youth (~30 days)



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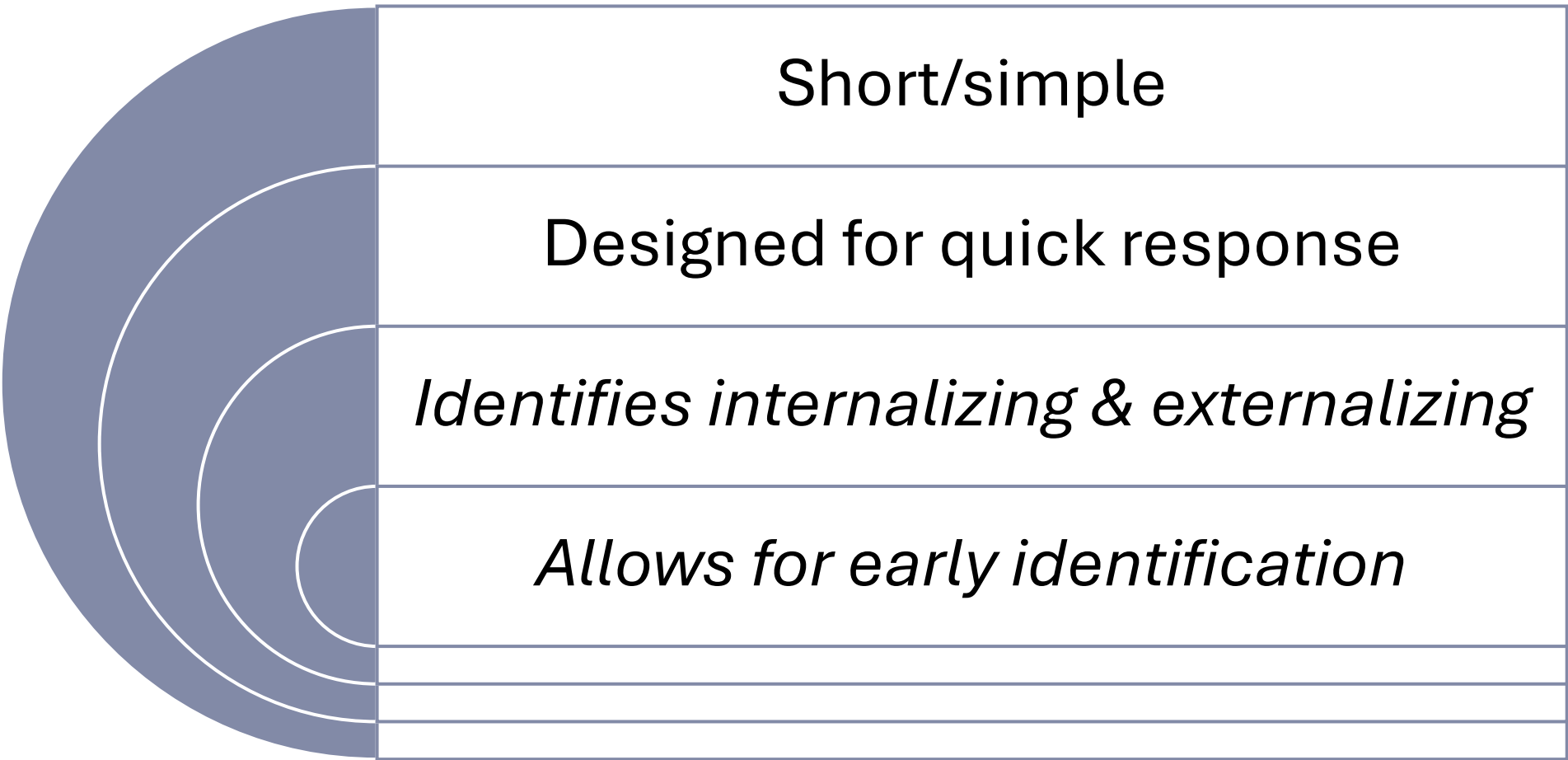
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Staff Request for Additional Support





SVYC Processes



Youth Level of Service/Case Management Inventory 2.0 (YLS/CMI 2.0)

- Completed prior to admittance into the facility to assist with case plan
- Youth reevaluated during their commitment
- Identifies risk factors as correlates or causes of criminal activity (e.g., developmental history, personality, behavioral and attitudinal characteristics, family situation, peer group assumptions, educational and job performance)
- Interventions must be targeted and delivered effectively to meet the needs of the youth

YLS/CMI Referral Matrix

YLS/CMI SERVICE REFERRAL MATRIX – SUMMIT VIEW

	YLS/CMI NEED AREAS						
	Family Circumstances/ Parenting	Education/Employment	Peer Relations	Substance Abuse	Leisure/Recreation	Personality/Behavior	Attitudes/Orientation
Moderate	Refer to an evidence-based family/parent skills development program. Family-based interventions might look at problem solving, conflict resolution skills, communication methods, trauma etc. MH, MRT	Obtain educational evaluations, if available. Monitor school behavior and attendance with teacher or counselor. Consider using a daily behavior checklist. EDU, MRT-JR, MRT-LSC, MRT-LSP, PBIS	Increase positive social interactions by referring to youth groups and enhancing social skills. FT-PR, LM, PBIS, YS	Complete and review substance abuse assessment (or co-occurring disorders if MH an issue) and refer to an appropriate level of treatment. MH, SA, TA	Increase leisure activities and pro-social activities. FT-R&L, LM, PBIS	Review available psychological evaluation/assessment. Mental health/behavioral assessment needed. Possible CBT to target specific behaviors. FT, JSO, MH, MRT, PBIS, TA	Target specific behaviors and include parent/family or school-based interventions. FT, GI, JSO, MH, MRT, PBIS, TA, YS
High	Consider an evaluation assessing the level of violence, abuse, neglect that might necessitate out of home placement. Referrals to Child welfare system may be necessary. MH, MRT, MRT-DV	Engage youth in school-related services to target improving learning, study skills, classroom skills. Consider possible changes in classroom and/or school settings (including homebound). After-hours treatment for mod/high scores in other risk areas may interfere with completion of homework. EDU, MRT-JR, MRT-LSC, MRT-LSP, PBIS, VP	Consider more intensive services or systems treatment to target social skills and improve interpersonal relationships. Require increased structured pro-social activities. Establish a mentor for the youth. FT-PR, GI, LM, MRT-DV, PBIS, YS	Complete and review substance abuse assessment (or co-occurring disorders if MH an issue) and refer to an appropriate level of treatment. Family engagement is critical in this programming. MH, SA, TA	Consider intensive services directed toward community supports and increasing pro-social activities. Require increased structured pro-social activities. Establish a mentor for the youth. FT-R&L, LM, PBIS	Indicates need for mental health or psychosocial evaluation. FT, JSO, MH, MRT, MRT-AM, MRT-DV, PBIS, TA	Cognitive life-skills courses, Possible CBT to target specific behaviors and include parent/family or school-based interventions. FT, GI, JSO, MH, MRT, PBIS, TA, YS

Abbreviations:

EDU – Education (High School)
 FT – Forward Thinking Interactive Journaling
 FT-R&L – Forward Thinking Recreation & Leisure
 FT-PR – Forward Thinking Peer Relationships
 GI – Gang Intervention
 JSO – Juvenile Sex Offender Counseling (Individual)
 LM – Large Muscle

MH – Individual/Family Therapy (CBT)
 MRT – Moral Reconation Therapy
 MRT-AM – MRT Anger Management
 MRT-DV – MRT Domestic Violence
 MRT-JR – MRT Job Readiness
 MRT-LSC – MRT Life Skills (Getting a Job – Career)
 MRT-LSP – MRT Life Skills (Finding Right Job – Path)

PBIS – Positive Interventions and Supports
 SA – Substance Abuse Counseling (Individual/Group)
 TA – Taking Action Life Skills Training
 VP – Vocational Programming (Automotive, Flagging, Forklift, OSHA-10, ServSafe)
 YS – YourSPACE



Nomination/Request Form

Summit View Youth Center PBIS Staff Nomination Form

Youth: Click here to enter text

Nominating Staff: Click here to enter text

1. Problem behavior(s) you are concerned about ("problem behaviors" include both externalizing/acting out behaviors and internalizing/inward focused behaviors):

- Click or tap here to enter text
- Click or tap here to enter text
- Click or tap here to enter text

2. Summary of behavior(s). What do they look like? When and where do they occur? Why do you think the behavior(s) are happening?

Click or tap here to enter text

3. Have you ever completed a Behavior Tracking Form or Documentation Form for youth?

☐ Yes ☐ No

4. Are there any social skills you believe the youth might need to work on? For example: accepting no from a peer/staff, expressing feelings and emotions, asking for help, etc.

- Click or tap here to enter text
- Click or tap here to enter text
- Click or tap here to enter text

5. Include any additional information you would like to provide

Click or tap here to enter text

****Submit this form to an AHG by 1pm on Wednesdays**



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Additional Ways that Youth may Receive Tier 2 Supports

- All youth's mental health records are reviewed prior to admissions/during intake process
 - Youth with significant mental health needs/high acuity are identified and watched from the beginning of commitment
 - Identified intellectual/developmental differences are monitored closely from commitment



Universal Screening and Matching Youth Need



Why Screen?

Supports MTSS

Inform prevention and
early intervention
strategies

Identify:

- youth at risk for mental illness or harm to self or others
- concerns specific to safety, treatment, behavior, educators, clinicians, and staff

Improve access to mental
health supports

Improves protective
factors

It is economically
sound



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National Center for School Mental Health and
MHTTC Network Coordinating Office. (2019).



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Using The Universal Screener

Use the universal screener to:

Identify youth who may need a more targeted screener

Determine the Types of Targeted Screeners needed



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Screening for youth with high needs...is complicated

- Screeners typically utilized in K-12 do not typically meet the needs of the youth in our setting(s).
- Frequency for screening increased
- Adapted from Student risk screening scale-Internalizing/Externalizing (SRSS-IE)
 - Data-decision rules
 - CICO averages
 - Major and minor rule violation thresholds breached
 - Internalizing and externalizing behaviors are rated
 - Case managers report on engagement and completion or goals



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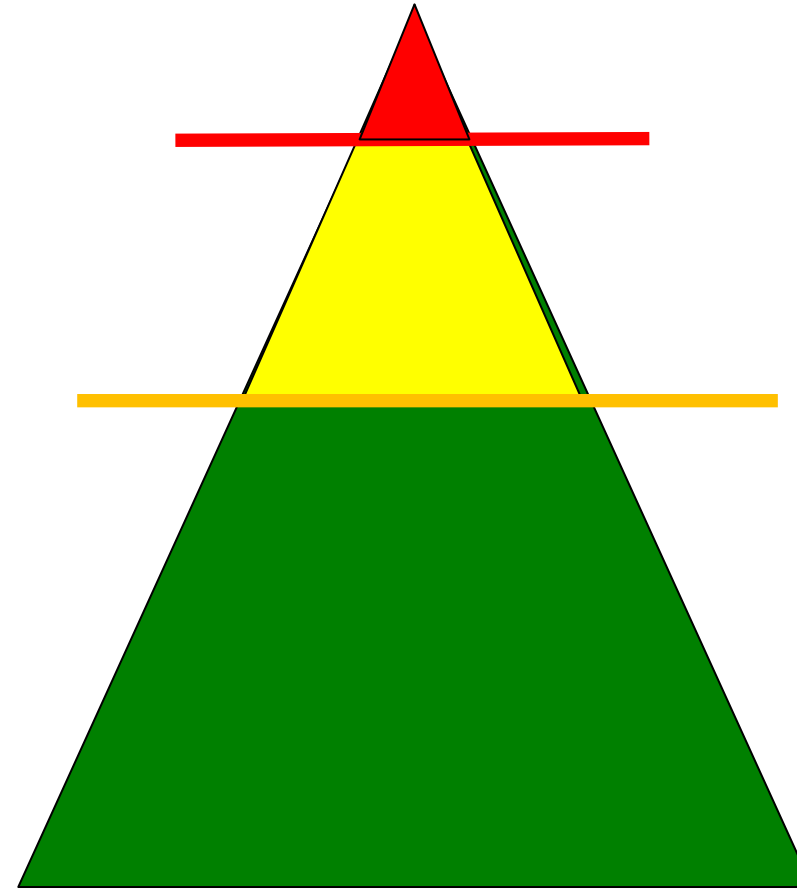
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Set Floors and Ceilings with Data

- Determine what the threshold is for youth who need a particular intervention
- ALSO determine the cap for youth who need more intensive supports

Pull Big 5 to review to aid in setting the floors and ceilings.





More SVYC Processes



SVYC Practice Audit

Tier 2 Interventions are triggered by behavioral data (e.g., SWIS, CICO-SWIS, self-harm, school-based data) and/or requests for assistance

Service	Description	Behavioral Indicators/Entry Criteria	Data to Progress Monitor	Exit Criteria	Fidelity Measures	Meet Tier 2 Critical Features?
Targeted Social Skills Instruction (TSS) GROUP 1-adolescent curriculum	Skillstreaming lessons repeated/intensified to provide social skills instruction based on youth needs. Participating youth continue to have access to Tier 1 Skillstreaming program.	Program Screening Meeting referral. Lack of progress on case plan (identified need by CFT). Perceived motivation on tracking forms related to social skills interactions problems.	Progress on social skills goals (recorded on modified CICO sheet). Youth tracking forms are monitored at Baseline to match youth to need and accessed monthly at team meeting for discharge to Tier 1 or escalation of support(s).	Reduction in tracking forms over a minimum of 3 months. CM reports increasing trend in engagement/completion of goals for release.	Lesson taught documented in case management system. Fidelity checklist (see TSS Tier 2 Intervention Plan document).	Yes
Targeted Social Skills Instruction (TSS) GROUP 2-Elementary curriculum	Skillstreaming lessons repeated/intensified to provide social skills instruction based on youth needs. Participating youth continue to have access to Tier 1 Skillstreaming program. Elementary curriculum is utilized to meet the developmental and or intellectual needs of the youth.	Program Screening Meeting referral. Lack of progress on case plan (identified need by CFT). Perceived motivation on tracking forms related to social skills deficit. Tracking form increase related to social interactions.	Progress on social skills goals (recorded on modified CICO sheet). Youth tracking forms are monitored at Baseline to match youth to need and accessed monthly at team meeting for discharge to Tier 1 or escalation of support(s).	Reduction in tracking forms over a minimum of 3 months. CM reports increasing trend in engagement/completion of goals for release.	Lesson taught documented in case management system. Fidelity checklist (see TSS Tier 2 Intervention Plan document).	Yes
PREA Remedial Education	Remedial training for youth who have committed a sexually related offense toward others. Must complete prior to entry into Boundaries class.	Harassment or sexually related behaviors upheld by BOR.	Attendance. PREA related behaviors on behavior tracking forms.	Completion of training. Completion of behavior contract.	PREA Remedial Education fidelity checklist.	Yes
MRT Anger Management	Evidence-based CBT model designed to help youth recognize, overcome, and control anger. There are 8 modules youth are expected to complete.	Disciplinary BOR referral OR staff nomination/program meeting referral.	Attendance at scheduled Anger Management programming. Physical aggression, fighting, bullying, lying/cheating, harassment on behavior tracking forms.	Completion of 8 session program including workbook and reduction in aggression related tracking forms	Facilitator guidelines followed and observed by program directors.	Yes
Refocus Program	Youth complete IMAGO lessons (online social-emotional learning curriculum) daily and attend check-out sessions to demonstrate their understanding of the material. Youth receive increased support from case manager to address their problem behavior. Youth have access to all Tier 1 universal practices (with exception of going to the PBIS store and coping skills group). Youth will continue to earn PBIS points, attend groups, access Skillstreaming program, go to Education (with exception of one-week introductory period), receive GS	Refusal to secure resulting in a use of force, fighting (severity and frequency considered by the board of review), sexually related infractions, physical aggression toward staff, inciting a riot, attempted escape.	Completion of programming. Behavior tracking forms. CICO scores.	After one-week introductory period, for 3 consecutive days: completion of ALL programming, no behavior tracking forms (behavior documentation forms ok), and no zeros for any time block on CICO sheet. *Requirement to complete programming excludes mandatory exercise as this is a NRS violation.	Daily supervisor review. IMAGO check-outs with AHG or Refocus staff after lesson completion. Refocus fidelity checklist.	Yes



Intake Screeners

Massachusetts Youth Screening Instrument Version 2 (MAYSI-2)

Ages 12-17

- Brief screening tool for use in juvenile justice systems to identify mental health/emotional disturbance
 - Screens for the following areas
 - Suicidality
 - Somatic Complaints
 - Alcohol/Drug Use
 - Depressed-Anxious
 - Thought Disturbance
 - Traumatic stress

Columbia-Suicide Severity Rating Scale (C-SSRS)

Ages 6-Adult

- Risk assessment with a checklist of risk and protective factors for suicide
- Can quickly assess for passive and active suicidal ideation, plan, and intent



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Additional Intake Screeners

Drug Abuse Screening Test-Adolescent (DAST-A)

Ages 13-18

- 28 question adapted from the original adult Drug Abuse Screening Test (DAST)
- Screens for the presence and severity of substance use

Division of Child and Family Services Prison Rape Elimination Act Risk Assessment

- Created specifically for Nevada DCFS
- Adapted from the National PREA Resource Center

Children's Uniform Mental Health Assessment

- Bio-psychosocial assessment tool used to evaluate a youth's mental health status, symptoms, and needs
- Conducted by a mental health counselor in conjunction with youth and family
- Comprehensive assessment when combined with clinical judgment leads to a DSM-5

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Our adapted screening

SVYC #300.35 Attachment I

Program Screening Meeting Form

Unit: Everest II, Sierra II

Staff present: [Click here to enter text.](#)

- Data Decision Rules for Minors, Majors, and CICO Points:**
- Progressing under Tier 1 – 0-3 minors and/or 0-1 majors in past 30 days
 - Referral to Tier 2 – 4-8 minors and/or 2-3 majors in past 30 days AND earning less than 80% of CICO points on average
 - Referral to Tier 3 – 9+ minors and/or 4+ majors in past 30 days AND earning less than 80% of CICO points on average

[illegible]

Currently working on...

- Building out screening processes to more effectively match youth need to intervention
- Selecting appropriate screeners for trauma and anger management
- Using adapted screener layered with the level program
 - Catch youth who have been stagnant in a level
 - Youth completed screener as means to enter/exit supports
 - Barriers
 - Some need to be conducted by clinicians only
 - Marked increase in response effort
 - Strain on staff and sustainability of practices



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Discussion/Think on it

- What screeners are your facilities currently using?
 - Targeted and universal
 - Adult or youth completed?
- Do you find that these meet your youth need?
 - Why or why not?

**3 minutes
to discuss
with the
group!**



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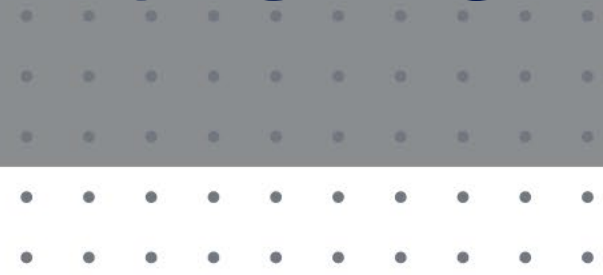


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Options for Tier 2 Interventions



Caution!

Some group interventions require delivery by licensed professional

In depth training is advised/part of our training catalog



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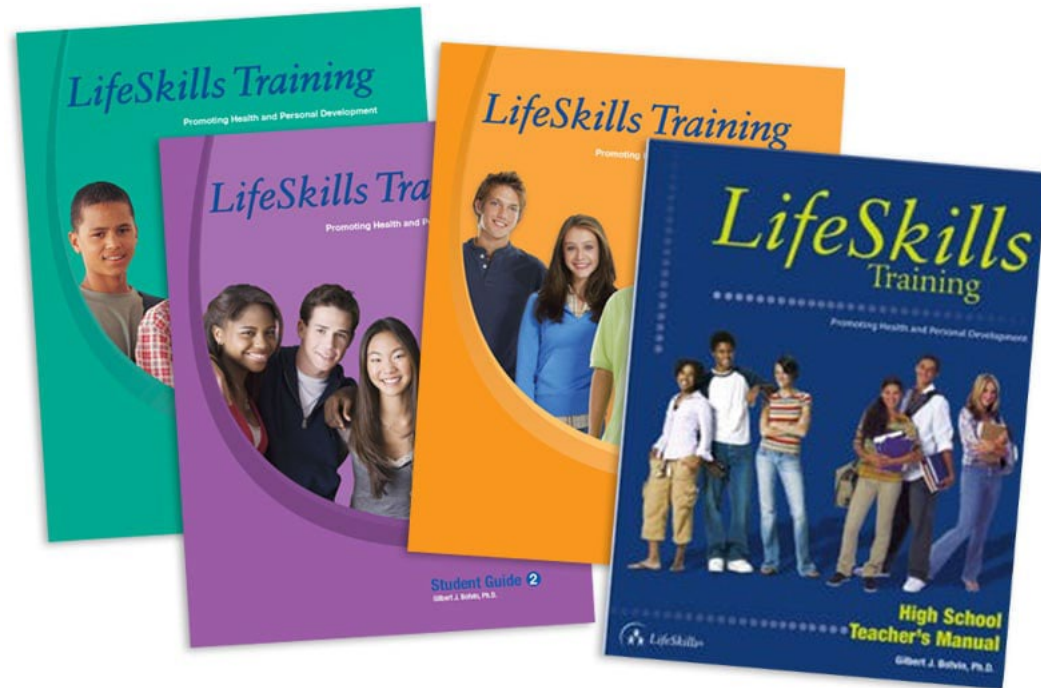
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Considerations for Choosing Interventions

- Time based or pick and pull?
 - How long do the interventions take to complete?
- Clinician needed or not?
- Open or closed group?
- Structured, semi-structured, or process groups?
- Is a correctional facility the appropriate place to conduct the group or is the community a more appropriate place?

Group Interventions for Substance

Botvin Life Skills



Too Good for Drugs



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Group Interventions for Social Skills

Skillstreaming



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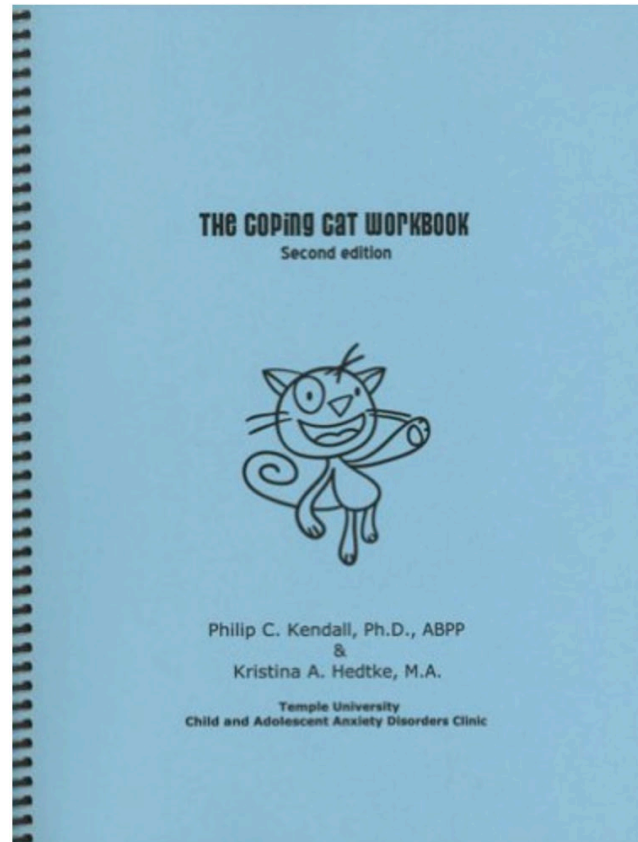


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Coping Cat



16-week program

- 50-minute sessions

Teaches emotions

- Primarily targets anxiety
- Connection between thinking and emotions
- Problem solving skills
- Friendship skills



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Moral Reconciliation Therapy (MRT)

- Cognitive-behavioral program for substance abuse and offender populations
 - Required 4 day, 32 hour training for mental health professionals and correctional professionals
- Adolescent version available for juvenile offenders
- Monthly fidelity checks with others nationwide
- Can be used as the primary treatment for perpetrators of domestic violence-Need additional training
- Anger management and trauma all have their own books, but require additional training
- Used for life skills (e.g., Finding the Right Job and Creating a Path in Life, Getting a Job, and Job Readiness)
 - Facilitator's do not need the same training as the MRT instructors

HOW TO ESCAPE YOUR PRISON



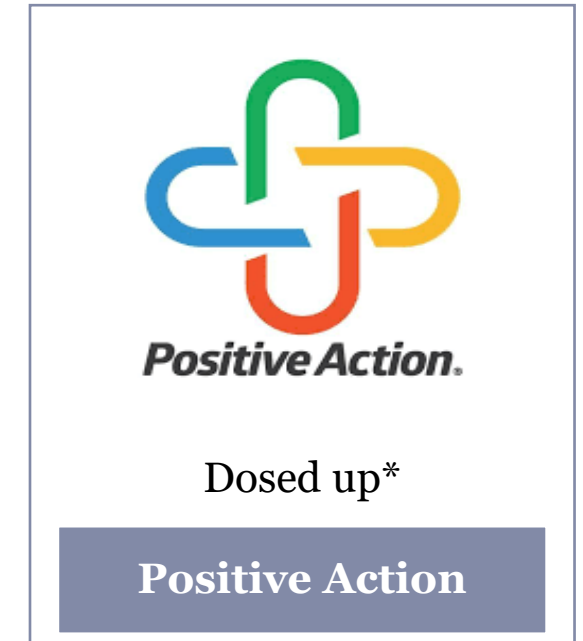
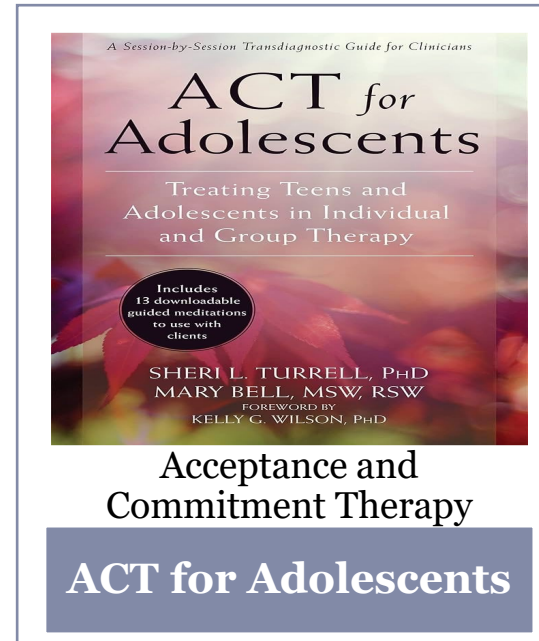
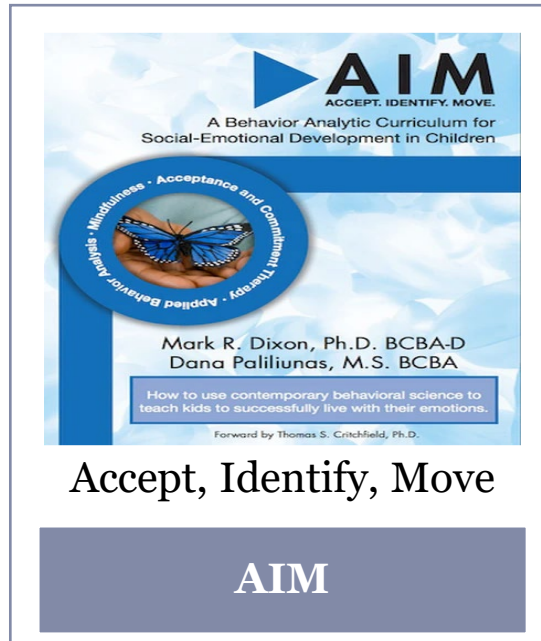
A MORAL RECONCILIATION THERAPY WORKBOOK

Gregory L.
Little

Kenneth D.
Robinson



Group Interventions for Psychological Flexibility



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Most Importantly



Use the
data

Identify the
need

Select the
intervention



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Identify Needs of the Group for Intervention Selection

After selecting the group of youth that will participate in Tier 2:

- Group youth into categories by need and function
 - Social skills
 - What level?
 - Youth who internalize
 - Exposure to trauma
 - Anger management
 - Domestic violence arrests
- Interventions will be selected based on these needs



SVYC Tier 2 Options



Tier 2 Menu

PBIS Directed via DDRs

- MRT- Anger Management
- Targeted social skills
 - Group 1
 - Specialized CICO
 - Group 2
 - Specialized CICO
- Recreation therapy (additional sessions)
- Refocus
- PREA Remedial Management
- Victim Empathy
- Trauma Processing Group (in progress)

Court Directed

- MRT- Anger Management
- Domestic Violence
- Substance Use
- 24/7 Dad
- JSO
- Job Readiness
- Gang Class
- Victim Empathy
- PREA Remedial Management



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Specialized CICO for Targeted Social Skills

SVYC CICO Point Sheet – School Day Schedule

Youth: _____ Date: _____ Unit: E S I II Day of the Week: M Tu Th F

Social Skill being worked on: _____

	Block	Be Safe	Be Respectful	Be Responsible	Block Points	Youth Signature	Staff First Initial Last Name	Constructive Feedback	Bonus Points	Tracking Form Completed
1	Morning Routine; Breakfast	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
2	Period 1	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
3	Period 2	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
4	Period 3	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
5	Lunch	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
6	Period 4	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
7	Period 5	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
8	Afternoon Activities; Dinner	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
9	Evening Activities	0 1 2	0 1 2	0 1 2				☐ +1		☐ Yes ☐ No
					Total Block Pts			Total Constructive Pts	Total Bonus Pts	Total PBIS Pts

STAFF KEY	
2 points	Youth demonstrated expectation independently or with one prompt
1 point	Youth demonstrated expectation with reminders/assistance
0 points	Youth refused to demonstrate expectation despite reminders and/or assistance

Day Shift Supervisor Review: _____
Print Name

Swing Shift Supervisor Review: _____
Print Name

Supervisor Notes:

Supervisor Notes:



Discussion/Think on it

- What Tier 2 interventions do you have in place?
- Do you find there are barriers to implementation?
 - Clinicians need to facilitate?
 - Need a pick and pull option?

**3 minutes to
discuss with
the group!**





Tier 2: Evaluation



Evaluation

Tier 2 Evaluation

2.9 Level of Use

2.13 Decision Making with Youth
Performance Data

2.14 Decision Making with Fidelity Data

2.15 Quarterly Evaluation



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Level of Use

Track what
proportion
of youth are
accessing
advanced
tier
supports

- Can break down by:
 - Gender
 - Ethnicity
 - IEP status,
 - Etc.

Measuring Level of Use

By hand (old fashion way)

Level of Use Evaluation

Intervention	# of Students in Intervention	Intervention Identifiers (%)		Tier 1 Proportion (%)		Intervention Success Rate (%)
		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		
		Gender Male Female		Gender Male Female		
		Disability (IEP) Yes No	Status Yes No	Disability (IEP) Yes No	Status Yes No	
		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		
		Gender Male Female		Gender Male Female		
		Disability (IEP) Yes No	Status Yes No	Disability (IEP) Yes No	Status Yes No	
		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		Ethnicity African American: ____ American Indian: ____ Asian: ____ Latino: ____ Multiracial: ____ Pacific Islander: ____ White: ____ Other: ____		
		Gender Male Female		Gender Male Female		
		Disability (IEP) Yes No	Status Yes No	Disability (IEP) Yes No	Status Yes No	

Utilize SWIS

- We cannot as we have CICO designated as a tier 1 intervention.
- SVYC monitors overall number of youth receiving higher tiers of support
 - Month to month
 - If “bulging” at the higher tiers
 - Evaluate tier 1



Decision Making with Youth Performance Data

Tier 2 leadership team establishes and uses decision rules and a written process for regular data review to

- (a) monitor benefit overall, by group, and for individual students and
- (b) adjust support (e.g., intensify, modify, or fade) to increase responsiveness.

Exit Criteria

Use exit criteria as a measurement for youth performance data

Support	Description	Entry Criteria	Data to Progress Monitor	Modification Criteria	Exit Criteria
Check-In Check-Out	Check-In Check-Out (CICO) is a Tier 2, group-oriented intervention, designed especially for students whose problem behaviors (a) are unresponsive to Tier 2 practices and systems, (b) do not require more immediate individualized interventions, and (c) are observed across multiple settings or contexts. CICO also provides a built-in system for (a) monitoring students' progress in the program, (b) evaluating the fidelity of implementation, and (c) transitioning to a self-managed program.	3+ unexcused absences AND 2+ <u>nonviolent</u> ODRs (office discipline referrals) AND D's or F's in any class, or missing 20% or more of assignments from any class	Daily DPRs (Daily Progress Reports) Fading when appropriate to WPRs (Weekly Progress Reports)	Make modifications: Less than 6 weeks of success* and/or even or downward trend Move to fading or self-management: At least 6 weeks with 4 days per week of success* Move to more intensive supports: 2 weeks without improvement after fidelity has been monitored and modifications have been made *Success is defined as earning 80% or more of points on DPR	4-6 weeks of success (80% or more of points on DPR) on fading/self-management plan



Fidelity of Implementation

Interventions are implemented as intended

- Necessary to evaluate youth response to intervention
- Considerations:
 - What are the essential components of an intervention?
 - Dosage: amount of time intervention is to be implemented (e.g., frequency, duration of intervention, etc.)
 - How will you determine the accuracy of each component?
 - Do you have a plan in place for staff absences?
 - Maintain proper dosage of a particular intervention



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Fidelity Forms

CLINICIAN:
SESSION:

CBITS, Second Edition

Adherence & Fidelity Measure

PART 1: FOR THE FOLLOWING SECTION COMPLETE THE SCORING FOR THE SESSION YOU ARE REVIEWING. DELETE THE OTHER SESSIONS.

Session 1:

Did the group leader cover the following elements?

- 0 – not covered at all
1 – cursory reference to this topic and quick review
2 – group leader clearly covers the topic, with or without cooperation of group members
3 – group leader covers the topic thoroughly, integrating it into the larger context of therapy and in an interactive style)

- ____ Introduction of group members, confidentiality, and group procedures.
____ Explanation of treatment using stories
____ Discussion of reasons for participation (kinds of stress or trauma).
____ Homework assignment: Goal-setting

Session 2:

Did the group leader cover the following elements?

- 0 – not covered at all
1 – cursory reference to this topic and quick review
2 – group leader clearly covers the topic, with or without cooperation of group members
3 – group leader covers the topic thoroughly, integrating it into the larger context of therapy and in an interactive style)



Check & Connect Monthly Fidelity Survey

This survey is for coordinators to assess the quality of a mentor's data entries for a given student in a given month. It will take approximately 5 to 8 minutes to complete. To fill out this survey, you will need the mentor and student IDs and the mentor's most recent monthly monitoring form (or C&C App data entries) for that student. The survey will provide vital information to improve implementation of Check & Connect activities.

Your Name: _____ Mentor ID: _____
School: _____ Student ID: _____
Monitoring Data Month/Year: ____ / ____

Core Component: Check

Question 1: Mentor recorded data for attendance, behavior, and course performance each week of the month.

Answer Yes if all of the following conditions are met:

1. Attendance data are entered for all school days during the month.
2. Behavior data are entered for all days that a student is in school and a negative behavior occurs.
3. Course performance data are entered each school week of 3 days or more.

- ☐ Yes
☐ No

If answered *No*, provide comments regarding lack of weekly data recording:

Question 2: Mentor determined the level of risk by indicating Yes/No on the monitoring form (or C&C App) or indicated the level of risk in the case notes.

Answer Yes if either of following conditions is met:

Intervention Fidelity Checklist

School: _____ Intervention: **Positive Action** Date: _____ Observer: _____

Steps of the Intervention	Was the Step Implemented?	Fidelity Score
	Yes/No/NA	Y=1 No = 0 NA= NA
1. Facilitator presented the goal of the activity		
2. Model: Positive Action concept being taught		
3. Practice: students use their own words to demonstrate the skill		
4. Feedback: Skill assessment activity is facilitated		
Fidelity Score		__/4
		__%



Skillstreaming fidelity

OBSERVER'S CHECKLIST

INSTRUCTIONS: A highly skilled observer may complete this observation checklist as the Skillstreaming group is taking place. The observer will note whether leader(s) completed each procedure with a low level of competence (score 1), medium proficiency (score 2), or a high level of skill (score 3). At the conclusion of the observation, the observer may provide leader(s) with recommendations for specific steps needing improvement.

Group leader(s) [REDACTED] Observers [REDACTED]
Date of group [REDACTED] Time of group [REDACTED]

Proficiency Level
1 2 3

Step 1: Define the skill

1. The skill to be taught was defined and the group understood its meaning. ☐ ☐ ☒
2. Skill steps were presented and discussed (via poster or skill cards). ☐ ☐ ☒

(For all sessions after the first)

3. Group members' skill homework was discussed. ☐ ☐ ☒
4. Appropriate reinforcement was provided for group members who completed homework. ☐ ☐ ☒

Step 2: Model the skill

5. Two examples of the skill were modeled. ☐ ☒ ☒
6. Each skill step was identified as the modeling unfolded. ☐ ☒ ☒
7. Modeling displays were relevant to group members' real-life circumstances. ☐ ☐ ☒
8. Group members were directed to watch for the steps being modeled. ☐ ☒ ☐
9. The model was friendly and helpful. ☐ ☒ ☒
10. A coping model was presented if indicated. ☐ ☒ ☐
11. The model used self-talk to illustrate the steps and thinking about skill performance. ☐ ☒ ☐
12. The modeling display depicted positive outcomes. ☐ ☐ ☒
13. The model was rewarded for skill performance (following the skill steps). ☐ ☐ ☒

Step 3: Establish student skill need

14. Each group member's need for skill use was defined (when, where, and with whom) and listed. ☐ ☐ ☒

Step 4: Select the first role-player

15. The main actor was selected for role-play (e.g., "Who would like to go first?") ☐ ☐ ☒

Skillstreaming

From Skillstreaming the Adolescent: A Guide for Teaching Prosocial Skills (3rd ed.), © 2012 by E. McGinnis, Champaign, IL: Research Press (www.researchpress.com, 800-519-2701).

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Proficiency Level

1 2 3

Step 5: Set up the role-play

16. Main actor selected a coactor who reminded him/her most of the real-life person with whom he/she has the skill need. ☐ ☐ ☒
17. Main actor described the physical setting, events preceding the problem, mood/manner of the person, and any other relevant information. ☐ ☐ ☒

Step 6: Conduct the role-play

18. Group members were assigned specific step(s) to observe. ☒ ☐ ☐
19. Main actor was instructed to follow the behavioral steps. ☐ ☐ ☒
20. Main actor was reminded to "think aloud." ☐ ☐ ☒
21. Coactor was reminded to stay in the role of the other person. ☐ ☐ ☒
22. Group leader assisted the main actor as needed (pointed to skill steps, coached). ☐ ☐ ☒

Step 7: Provide performance feedback

23. Coactor was asked to provide feedback (e.g., how he/she felt, how well the main actor enacted the steps). ☐ ☐ ☒
24. Group members were asked if the main actor followed each step. ☐ ☒ ☐
25. Leaders provided appropriate feedback (praise, approval, encouragement), identifying specific aspects of the main actor's performance. ☐ ☐ ☒
26. Reinforcement in an amount consistent with the quality of role-play was provided. ☐ ☐ ☒
27. Main actor was invited to give comments. ☐ ☐ ☒

Step 8: Select the next role-player

28. Volunteer participant asked to act as the main actor in the next role-play. Repeated Steps 5 through 7. ☐ ☐ ☒
29. All group members were given a chance to role-play, or plans were made to role-play for those who did not have a chance. ☐ ☐ ☒

Step 9: Assign skill homework

30. Skill homework was assigned to each main actor. ☐ ☐ ☒
31. Assistance was provided as needed in identifying the day, place, with whom the skill will be used, and so forth. ☐ ☐ ☒

TOTAL 87

59 points or below

60-74 points

75-83 points

84-93 points

Group leader intervention needed.

Continued monitoring of instruction necessary.

Consultation with master leader available.

Mastery of intervention demonstrated.

Comments:

Used same role play for all youth. was very beneficial because all youth have gone through this same scenario. Great feedback from peers and instructors. (knowing your feelings when receiving feedback). Exit plans). Great work between Leader & Co-Leader flowing back and forth.

Recommendations for improvement:

Encourage self talk, and have youth point out how steps were used in each role-play scenario.



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Evaluation Plan

At least quarterly, Tier 2 leadership team uses a written process to document the fidelity, effectiveness, and equitable use of Tier 2 practices including year-by-year comparisons that are:

- (a) integrated with other data to inform overall school improvement efforts and
- (b) shared with partners (staff, families, community, district) in a usable format.

In sum

- Increase screening frequency
- Bring supports down into lower tiers, when needed and sustainable
- Live by your DDRs/ Practice Audit- train and disseminate thoroughly
- When in doubt, create your own fidelity checklist
- Go slow, add only as you can sustain

Please Complete this Session's Evaluation

10/22

3F – Establishing Tier 2 Systems & Practices in Settings for Youth with High Needs

Four options, pick one!

1. Mobile App

Click "Take Survey" under the session description.

2. QR Code

Scan the code on this slide.



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Click on the link located next to the downloadable session materials posted online at:

www.pbis.org/conference-and-presentations/pbis-leadership-forum

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