

School Mental Health Profile—Entity Version

The School Mental Health Profile documents the structure and operations of your school mental health system. This Profile is part of the National School Mental Health Census, an effort to capture the status of school mental health nationally.

Instructions: Complete this assessment with an existing team or identify a new team. Broad and diverse participation ensures meaningful assessment, successful planning, and implementation. Your team may include school- or community-employed staff and other partners and stakeholders, including youth and families. Please respond to these questions based on the past school year.

We anticipate most entities will have schools with a range of progress in school mental health, a variety of data collection and reporting strategies, and other characteristics queried on this profile. However, we ask that you do your best to respond on behalf of your whole entity based on the data you have access to and can estimate.

What if we have difficulty answering a question? If you don't have the data to report, you can skip the question. Also, many teams need to leave some questions blank and come back to them later (you can still proceed and return to update this profile at any time). Further, no team can tackle all parts of their school mental health system at once or in a given school year. This assessment should be used as a quality improvement tool to facilitate structured conversations, strategic planning, metric for team reassessment, and to optimize the quality of all aspects of your school mental health system over time

SHAPE Entity Profile

I. Entity INFORMATION

Number of public schools in [entity] last school year:	
Number of students enrolled in grades K-12 in [entity] last school year:	

II. STUDENTS SERVED AND DATA SYSTEMS

To the best of your knowledge, to what degree are the following school mental health services and supports in place across schools in [entity].

Screening is the assessment of students to determine whether they may be at risk for a mental health concern. This can be accomplished with a systematic tool or process, including standardized student-report, parent-report, teacher-report measures, examining (deidentified, aggregate) mental health surveillance data, or a structured teacher nomination process. Screening is the assessment of a large portion of or the entire student body.

Mental health promotion services and supports (Tier 1) are mental health-related activities, including promotion of positive social, emotional, and behavioral skills and wellness which are designed to meet the needs of all students regardless of whether they are at risk for mental health problems. These activities can be implemented school-wide, at the grade level, and/or at the classroom level. Services may be provided by school-employed and community-employed, school-based professionals. Examples include social emotional learning, school-wide positive behavior supports, and mental health literacy.

Selective services and supports (Tier 2) to address mental health concerns are provided for students who have been identified through needs assessments and school teaming processes as being at risk for a given concern or problem. When problems are identified early and supports put in place, positive youth development is promoted and problems can be eliminated or reduced. Sometimes these are referred to as mental health "prevention" or "secondary" prevention services. Services provided can be provided by school-employed and community-employed, school-based professionals. Examples include a daily check-in process and behavioral goals with students identified as needing more support, trauma support group for students who have reported experiencing trauma).

Indicated services and supports (Tier 3) to address mental health concerns are individualized to meet the unique needs of each student who is already displaying a particular concern or problem and displaying significant functional impairment. Sometimes these are referred to as mental health "intervention" or "tertiary" or intensive services. Please include services provided by school-employed and community-employed, school-based professionals. Examples include individual, group or family therapy or consultation for students in general or special education who have identified, social, emotional and/or behavioral needs that negatively affect functioning.

Services and Supports	Not in place	Available in 1- 25% of schools	Available in 26-50% of schools	Available in 51-75% of schools	Available in 76-100% of schools
Mental Health Screening					
Tier 1 Services and Supports					
Tier 2 Services and Supports					
Tier 3 Services and Supports					
Evidence-based practices and programs (as identified in national evidence-based registries)					
Community partnerships to augment school mental health services and supports provided by the school system					
Quality improvement process to understand and improve the comprehensive school mental health system					

Indicate which of the following data points [entity] collected last year and how those data were used. (SMH = school mental health)

	_	u collect t year?	How was it used? (select all th			all that apply)	that apply)		
Data point	Yes	No	Identify students for mental health risk	Match/triage students to SMH service delivery	Track individual student progress in SMH interventions	Monitor/ evaluate SMH system outcomes	Was collected but not used for SMH services last year		
Attendance/ Chronic Absences									
Academic Achievement (Grades, standardized testing)									
Office discipline referrals									
Out of school suspensions									
School climate/safety									
Other (please describe):									
Other (please describe):									

Does [entity] have an electronic data system to identify the number of students receiving mental health early intervention (Tier 2) and/or treatment (Tier 3) services and supports? (yes /no)

If yes, please describe the system [entity] used	

III. STAFFING

Indicate which of the following professionals comprised your team last school year. For each team member you select, you will be asked whether they are school employed or not (e.g., a community partners) and the total Full Time Equivalent (FTE)* of all of those kinds of professionals within [entity]. Note: Individuals should only be represented one time in the staffing data, so please include them in the category that best describes their role. (e.g., if a school nurse is also a nurse practitioner, but they are best described as a school nurse, please only "count" them in the school nurse category).

Team Members	Community employed? (Yes or No)	School employed? (Yes or No)	If yes, TOTAL FTE*
Behavioral Specialist			
Case Manager/ Care Coordinator			
Community Mental Health Supervisor/ Director			
Cultural Liaison/Promotora			
Family Support Partner (Family Member)			
Nurse Practitioner / School Nurse			
Occupational Therapist			
Parent Liaison or Parent Engagement Coordinator			
Peer Mediator			
Physician (Pediatrician, Family Medicine, etc.)			
Physician Assistant			
Professional Counselor			

Psychiatrist		
Psychologist		
School Counselor/Guidance Counselor		
School Psychologist		
School Resource Officer		
School Social Worker		
Social Worker		
Substance Abuse Specialist		
Trainee (e.g., counseling, psychiatry, psychology, social work)		
Youth/Family Advocate		
Other		

^{*}To calculate total Full Time Equivalent (FTE), add together FTE for every team member in this category. Each day per week = .2 FTE. A full-time employee who works 40 hours per week (5 days) = 1.0 FTE. For example, if you had 3 school-employed behavioral specialists in [entity] and two work full time but one works 2.5 days per week (part time), the total FTE for 3 school-employed behavioral specialists would be 1.0 + 1.0 + 0.5 = 2.5

IV. SERVICES AND SUPPORTS

TIME FRAME: Please complete these questions for LAST SCHOOL YEAR.

Indicate whether or not your [entity's] school mental health system provided tiered services and supports or referral for the student concerns listed below. Select all that apply and note that you may not necessarily *need* services at all tiers for all concerns listed below.

Mental health promotion services and supports (Tier 1) are mental health-related activities, including promotion of positive social, emotional, and behavioral skills and wellness which are designed to meet the needs of all students regardless of whether or not they are at risk for mental health problems. These activities can be implemented school-wide, at the grade level, and/or at the classroom level. Please include services provided by school-employed and community-employed, school-based professionals.

Selective services and supports (Tier 2) to address mental health concerns are provided for groups of students who have been identified through needs assessments and school teaming processes as being at risk for a given concern or problem. When problems are identified early and supports put in place, positive youth development is promoted and problems can be eliminated or reduced. Sometimes these are referred to as mental health "prevention" or "secondary" prevention services. Please include services provided by school-employed and community-employed, school-based professionals.

<u>Indicated services and supports (Tier 3)</u> to address mental health concerns are individualized to meet the unique needs of each student who is already displaying a particular concern or problem and displaying significant functional impairment. Sometimes these are referred to as mental health "intervention" or "tertiary" or intensive services. Please include services provided by school-employed and community-employed, school-based professionals.

	Mental Health Promotion Services & Supports (Tier 1)	Selective Services & Supports (Tier 2 – Students At-risk)	Indicated Services & Supports (Tier 3 – Students displaying mental health concerns)	Referrals to community providers not in the school building.	No services for this student concern
Anxiety					
Attention/ Hyperactivity					
Bullying					
Depression/ Suicidal ideation					
Disordered eating					
Grief/Loss					
Oppositional or conduct problems/ Anger management					
Psychosis (hallucinations, delusions)					
Healthy relationships					
Social and emotional skills/ Character development					
Substance use (alcohol, tobacco, drugs)					
Trauma/PTSD/ Abuse/Neglect/ Exposure to violence					