



Behavioral Health

Lessons Learned

Simle Middle School



All schools can implement MTSS with little cost. Strong leaders create change in the school system.



Teams of teachers, administrators, and other support staff work together to systemize interventions.



The focus shifts from consequences to re-teaching and providing supports for students to be successful.

2022-2023 MTSS Behavior Data

| | 2014-15 | 2015-16 | 2016-17 | 2017-18 | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|-------------|--|--|--|--|--|--|--|--|
| Number of Major Discipline Referrals | 905 | 240 1 st year of MTSS | 180 2 nd year of MTSS | 256 3 rd year of MTSS | 238 4 th year of MTSS | 243 *COVID 5 th year of MTSS | 175 *COVID 6 th year of MTSS | 141 7 th Year of MTSS | 199 8 th Year of MTSS |
| Change | ----- -- | -665 | -60 | +76 | -18 | +5 | -65 | -34 | +58 |
| % of students receiving a major discipline referral | 24% | 10% | 3% | 4% | 9% | 11% | 10% | 9% | 8% |

Simple Behavioral Health Gating System

Teacher Nomination

Team Nomination

SSIS SEL Screener

Referral to Sanford

Sanford Feedback

The significance of our partnership

We must have a process at the school level, so we are referring the right students. Students with legitimate mental health needs.

Sustainability with billing – private insurance, Medicaid, Sanford

Simle has partnered with the state of North Dakota in developing a playbook to be implemented in any school throughout North Dakota.

This partnership has been the model in the state of North Dakota, and we continue to identify gaps and the state has been receptive. Behavioral Health Grant funding is one example.

Our clinician spending time with school staff.

What have we learned?



Find critical partnerships and don't be afraid to ask for help. Find the right partner for you. Billing, location, etc.



Understand the difference between co-located and integrated behavioral health in schools.



It will take a shift in thinking at every level of your school. Be prepared for others not making the shift as quickly as you. An example of this is talking about interventions vs consequences.



Schools need to focus on Tier 1 and 2 before bringing on a provider.



Have a solid gating system in place.



Financial cost has been minimal.

What next?



Continue to work with other schools, districts, and policymakers.



What can we do for students and families who need more than public schools can support? Can the cabinet be a voice with these students?



Support providers in recruitment and retention of qualified staff?



Support leadership who want to implement sustainable behavioral health practices in schools.



Share the toolkit and the different phases.

<https://www.hhs.nd.gov/education/pilot-project>

Toolkit

- Phase One
 - Building the Foundation
- Phase Two
 - Strengthening Tier 1 while adding Tier 2
- Phase Three
 - Supporting Tier 1 and 2 while adding Tier 3 Interventions





Questions?

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