

North Hanover Township School District



Student Support Systems

**“What does
the child
need?”**

Kids are not going to walk up to you and say, “I’m really struggling with some tough emotions right now and I’m not sure how to cope.”

www.thepathway2success.com

They are going to act out and behave in challenging ways.

It means the same thing.

**Pathway
& Success**

Teach students to cope through a collaborative, schoolwide, multi-tiered approach



- Teach emotional regulation
- Teach problem solving
- Build frustration tolerance
- Establish strong connections
- Establish classroom community
- Intentionally teach pro--social skills and replacement behaviors
- Support those in need of higher level interventions

So that they are prepared to face the demands of the "real world."

Our District's Multi-Disciplinary Student Support Team

- Principals
- School Counselors (2 at Endeavour, 1 UES, 1 CBL)
- Effective School Solutions Clinicians
- Behavior Coach (BCBA-Board Certified Behavior Analyst)
- Behavior Interventionist
- Military Family Life Counselors (MFLCs)
- Director of Special Services (BCBA- Board Certified Behavior Analyst)
- Child Study Team BCBA
- School Psychologists
- School Social Worker
- Student Transition Coordinator
- School Nurses
- School Resiliency Teams/Champions Team (higher level training)
- PIRT Team (preschool intervention and referral team)
- Teachers
- Paraprofessionals/ Educational Assistants

Statistics on Student Mental Health

About 25% of children and adolescents [experienced strong “distress,”](#) during the pandemic.

- Depression and anxiety are the most common mental health issues
- Behavior and attention problems have also increased, especially in younger children. (ED Week report of JAMA Meta-analysis)

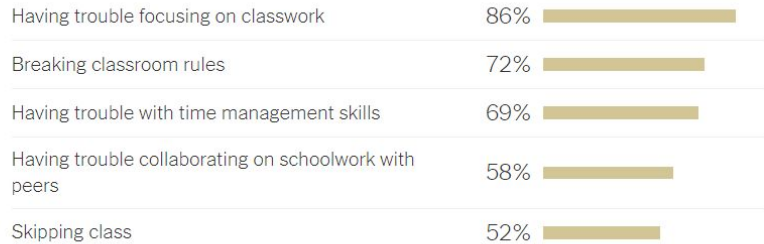
Researchers found that more than a third of the children (17 and under) who tested positive for COVID-19 were diagnosed with a new mental health disorder within 30 days.

- Attention-deficit hyperactivity disorder, anxiety disorders, and trauma or stress disorders were the most common diagnoses.

There has been an overall decrease in available support services

- Comparing March 2020 through January 2022 to the pre-pandemic period, the [Centers for Medicaid and Medicare Services](#) notes that there were approx. 23% (equates to 27.3 million) fewer mental health services for children under age 19

Academic Behaviors



Emotional Health

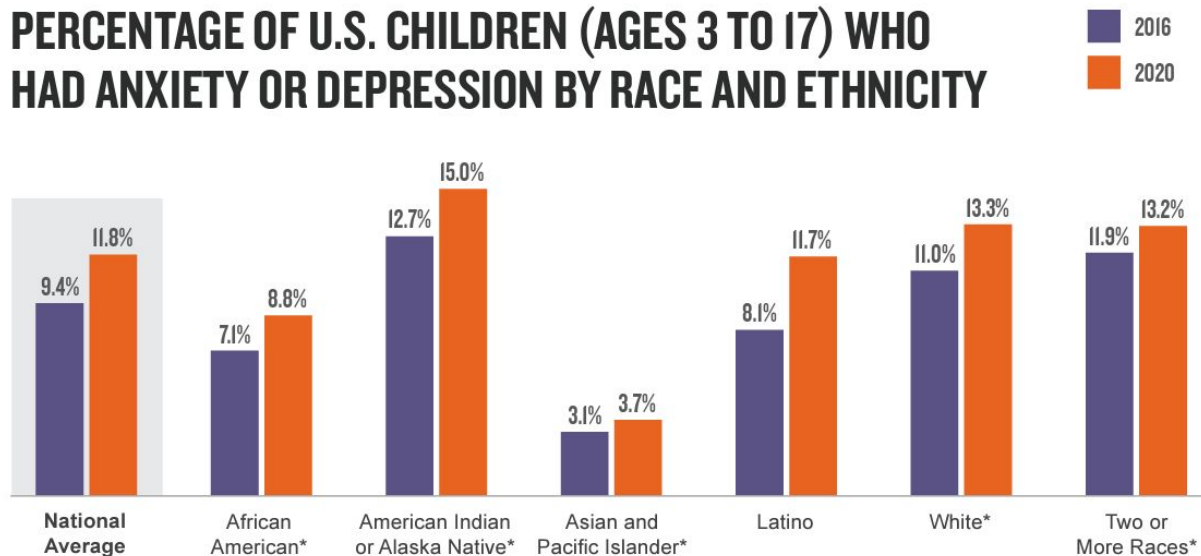


Social Skills



The New York Times surveyed 362 school counselors nationwide and found that these are issues being seen in increasing amounts in schools all across the country.

PERCENTAGE OF U.S. CHILDREN (AGES 3 TO 17) WHO HAD ANXIETY OR DEPRESSION BY RACE AND ETHNICITY



Source: Child Trends' analysis of the U.S. Department of Health and Human Services' 2016 and 2020 NSCH.

NOTE: The percentages presented here are estimates based on weighted NSCH data. The weights are important because they adjust for lower response rates in some states and over- or undercounting of certain child demographics. In this way, the percentages are weighted to be representative of the U.S. population of noninstitutionalized children and should be read as estimates.

*Data are for non-Hispanic children.

There has been a consistent increase in diagnoses of children who have experienced depression and/or anxiety in the past several years.

More Information on our Current State

Increase of behaviors and social emotional dysregulation post-pandemic, causing increase in need for counseling and social/emotional/behavioral preventative guidance and intervention (NY Times [link](#))

Increase of self-harm, suicidal ideations, and suicide in children and adolescents since the pandemic/post pandemic.

- Schools can help by including policies and support, such as training staff on how to recognize signs, building school connectedness, increase screenings, & schools to connect students/families to outside resources (American Psychological Association [link](#))



Impact of Technology Use on Children

The nonprofit Common Sense Media, [reports](#) that daily screen time has spiked since the pandemic.

Children ages 8-12 now use digital devices more than **five and a half hours** a day

Teenagers now spend nearly **eight hours and 40 minutes** a day on screens—not counting school technology.

Behavior problems [associated with excessive screen time](#) include:

- Lowered stress tolerance
- [Poorer focus and executive skills](#)
- [Higher risk of both acting out and internalized depression or anxiety](#)
- In some cases, studies have even found students' technology-related focus problems can be severe enough to be [misdiagnosed as attention deficit disorders](#)

Why Do We Think This is Happening?

- Increase population= increase events
- Post-Pandemic Issues Including
 - No or limited early intervention
 - Limited social interactions during formative time
 - Delayed social skill development
 - Gaps in learning
 - Varying pandemic learning experiences
- Increased access to electronic devices and content during formative time= reduced self-regulation and frustration tolerance, and reduced social interactions leading to struggles tolerating others and socializing appropriately
- Decrease in physical activity
- In some instances, home life stressors have caused additional forms of dysregulation, which can transfer to school behaviors
- Students starting school with little to no prior structured school experience (need time to learn expectations, routines, and social skills)
- Increased need for support with decreased access to services in the community

Response to Intervention- Behavior Support

Tier 1: 80-90% of All Students
Programs in place in all classrooms
Nurtured Heart *SEL Lessons* *SWAG*
Classroom Management *Responsive Classroom*
Positive Behavior Supports *Staff PD*

Tier 2: 5-10% of All Students
Needed for some students
PACE *Coaching* *School Discipline*
Counseling *Behavior Plans* *Mentoring*
Effective School Solutions *MFLC*
Intervention and Referral
Teams

Tier 3: 1-5% of All Students
CST Referrals
Intensive
Multi-Layered
Behavior
Individualized
Team Based
Approach

Prevention

Intervention

Intense
Remediation

Proactive

- Social Emotional Learning (SEL lessons, SWAG, PACE, etc.)
- Counseling & Social Skills Groups
- Nurtured Heart/Champions Trainings
- Responsive Classroom
- Houses/School-wide Positive Behavior Support Systems
- Challenge Day
- Updating behavior intervention plans
- Coaching to assist Educational Assistants and Teachers
- Referrals to Child Study Team (as appropriate)
- Professional Development on Behavior Strategies and Interventions
- Effective School Solutions providing training for staff and support to parents of students linked in with programming, crisis screening, and higher tier counseling
- MFLC to assist with socialization and transitions



Reinventing mental health care

In 2009, Effective School Solutions pioneered the **delivery of clinical care within the school setting**. ESS provided the **same quality care as a therapeutic day school** directly in the school building.

Our in-school programs result in better care for students, maintenance of students in the **least restrictive environment**, and a significant reduction of Out-of-District/Non-Public School Placements and associated costs- as well as **significant improvements in grades, discipline, and attendance**.

Currently, ESS serves over 3,000 students each day, in over 100 districts across 9 states.

ESS Program Components

Tier 3



Tier 2

Tier 3 Characteristics

Meant for Severe Emotional and Behavioral Challenges

Time in Program: Based on Clinical Need of Student

Caseload: 10 / Clinician

Program Components

Weekly Individual Therapy

Weekly parent Check-ins

Monthly Family Therapy

Monthly Parent Support Group/Newsletters

Urgent Sessions for Students Within the Cohort

Clinical Supervision with Quality and Risk Management

Tier 2 Characteristics

Meant for Mild Emotional and Behavioral Challenges

Utilized as an Alternative to Suspension or Restorative Discipline Practice

Time in Program: Treatment Delivered as a 6-8-week Block
* Can Repeat as Needed

Program Components

Weekly Individual Therapy

Minimum of One Family Session per 6-8 Treatment Period

Prescribed psych-education curriculums: Anger Management;
Substance Use; Bereavement

Urgent Sessions for Students Within the Cohort

Clinical Supervision with Quality and Risk Management



Building Community

- ✓ Provided Professional Development opportunities for district staff on Nurtured Heart Approach and Trauma Attuned Model (TAM)
- ✓ Identified 10 teacher champions of TAM who receive monthly trainings and professional coaching along with case consultation
- ✓ Assessment and referrals conducted district wide with clinical recommendations made
- ✓ Open House for faculty
- ✓ Weekly administrative meeting for ongoing case consultation

Supportive Responses and Building Connection

- Academic and social/emotional/behavioral planning
 - via team meetings
 - parent consultations
 - student input
- Conflict resolution strategies/peer groups
- Restorative actions (HIB)
- Awareness Assemblies
- School wide assemblies/challenges
- Buddy classrooms/Houses
- Challenge Day
- Family events
- Celebrations of success



Additional Responses

Note: Due to FERPA regulations, disciplinary actions of students are considered protected information and cannot be disclosed to members of the community

- Discipline root word means to teach
- Our goal is to change negative behavior and increase targeted positive behaviors
- Detention and suspension, reduced school day, 1-1 student support, mentoring, etc are tools that principals use as needed. The interventions are as varied and individual as our students and the situation.
- Standard disciplinary consequences don't always yield the same results for different students
- Leaning on “punishments” in isolation are unlikely to change behaviors. The “teaching” piece of discipline is also important so we have various other ways to support children and remediate the missing social skills. Cooper, J. O., Heron, T. E., & Heward, W. L. (2007). Applied Behavior Analysis (2nd ed.). Upper Saddle River, NJ: Pearson Education.

Exclusionary Discipline Guidelines

NJ Law (N.J.S.A. 18A:37-2a) & BOE Policy 5610:

- No suspension for Preschool unless a firearm is present
- No suspension for K-2 unless except when the suspension is based on conduct that is of a violent or sexual nature that endangers others
- No expulsion under third grade for any reason except as provided pursuant to the “Zero Tolerance for Guns Act”

Necessary as a response to severe behaviors

Limited Use: *Ineffective at changing behavior*

- Under 10 days = Short Term Suspension
- Over 10 days = Requires Board Hearing
- *Students with IEPs who accumulate more than 10 days = Manifestation Determination hearing. The behavior that caused the suspension cannot be a manifestation of their disability.*

If a student is suspended, this could result in learning loss and possible increase in challenging behaviors upon return.

- Re-Entry Meeting and Creating a Support Plan for Student
- Restorative Counseling & Any Additional Restorative Supportive Planning

Behavior Intervention Plans

- When? When behavior impedes the learning of themselves and others
- Determining the function of the behavior (Functional Behavior Assessment as needed)
- Identify proactive strategies
- Identify reactive strategies
- Identify and teach replacement skills
- Data collection
- Analyze data to make appropriate decisions
- Shaping behavior over time
- Use positive reinforcement

Program and Team Expansion

- Hired supportive personnel including
 - Director of Special Services with a BCBA background
 - Additional Educational Assistants/Hourly Aides
 - Additional Behavior Coach
 - Additional School Counselor
- Contracted with on-site clinicians (ESS) and Care Solace (mental health support)
- Provided training and support to staff
 - Staff training in Nurtured Heart
 - Staff training on behavioral strategies and supports
- Schedule Updates and Structure
 - K - 2 Social Emotional Learning 45 minute - 1x a week
 - Kindergarten Purposeful Play and additional playground time

What is next?

- Add Assistant Principal at Endeavour
- Make adjustments on administrative team to direct resources to student intervention needs
- Additional Behavior Coach/Specialist
- Behavior Intervention Program Pilot
- Additional Social Worker and BCBA in early grades
- Additional Training for Staff
- Partnered with [Care Solace](#) to make access to mental health care easier for students, staff, and our families.
- PEACE Grant to emphasize additional proactive intervention strategies
- SEPAG presentations to provide support and information to parents
- Summer support programs