

STUDENT ENGAGEMENT & SAFETY COORDINATION

Student Behavioral Health Services Evaluation Report



IDAHO STATE DEPARTMENT OF EDUCATION
STUDENT ENGAGEMENT AND SAFETY COORDINATION

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TABLE OF CONTENTS

Prefaceii

Executive Summary..... iii - iv

Idaho Behavioral Health and Wellness Services Scan: Data Report..... 1 - 18

Idaho Behavioral Health and Wellness Services Scan: Appendix A..... 19 - 43

Idaho Behavioral Health and Wellness Services Scan: Appendix B..... 44 - 45

PREFACE

This report is in response to the 2020 Idaho Legislative Session, House Bill No. 627, which provided requirements regarding a student behavioral health services evaluation. These requirements were further described within Section 5 of the bill, provided below:

There shall be an independent, external, and comprehensive evaluation of all programs and services within the purview of the state of Idaho supporting the behavioral health needs of K-12 students. The evaluation shall include a collective analysis of all programs germane to K-12 students, teachers, educational professionals, and parents or guardians of K-12 students. The evaluation shall identify gaps in delivery of behavioral health services across the State of Idaho, including but not limited to geographic regions, school districts and charter schools, and individual school buildings. The evaluation shall identify those behavioral health services that utilize evidence-based outcomes and performance-based indicators. The results of the evaluation shall be reported to the Joint Finance-Appropriations Committee and the Senate and House education committees no later than January 15, 2021, regarding the program access and delivery, best practices utilized, uses of funds, and any other relevant matters.

EXECUTIVE SUMMARY

This report includes the survey results from an effort to evaluate the behavioral health services and programs within the purview of the state of Idaho at both a school district and school building level. The Idaho State Department of Education (SDE) contracted with Education Northwest to conduct this study. Data collection began on September 10, 2020 and concluded October 23, 2020. Data was collected from more than 400 public school building and district level administrators, with more than an 80% participation rate from all Idaho public school district and charter administrators. Behavioral health services were defined as services focused on the well-being services, strategies, and/or programs available to the K-12 general student population. The data collected speaks to the gaps in delivery, available services, populations served (employee, student, family/community), the method of program evaluations, perceptions of effectiveness, and funding sources.

The data provides clear insight into several gaps that exist between our schools and districts. While nearly 60% of districts indicate they have a strategy or practice that is implemented to support all students, only one in four school districts reported having explicit, structured programs available to all students. Disparities between rural versus non-rural and/or charter versus non-charter are most apparent in the report. Rural administrators reported using outside service providers 18 percentage points more often than non-rural districts. Rural districts were also 11 percentage points less likely to say that student behavioral health was part of their school mission. Further, rural districts were less likely to provide opportunities that support families or caregivers and less likely to provide staffing or materials to support behavioral health services; by 14 and 10 percentage points respectively. In addition, charter school administrators reported offering no behavioral health services 12 percentage points more often than non-charter administrators.

Barriers to implementation were commonly identified as lack of adequate time and funding. However, one finding that was notable on barriers was location; which was identified as a barrier by 47 percent of rural school and district administrators and only 14 percent of non-rural school and district administrators. The benefits of behavioral health services were widely agreed upon with more than 90% of respondents agreeing that they help students feel safe, ready to engage in learning, build stronger student/teacher relationships, promote better

academic learning, build student engagement in school, and are flexible to support unique student needs.

The data from this report will inform and support the Idaho State Department of Education's ongoing efforts to improve the quality and access to behavioral health services in our public schools. During the spring of 2021, the SDE will sponsor professionally facilitated engagements with a statewide group of education stakeholders who will move us beyond the discovery phase into defining how we can best support the behavioral wellness needs of students, teachers, and families. The results of this study will inform the department's continued work to produce a vision statement on behavioral health services in our Idaho schools, set goals to help close perceived gaps, identify measurable objectives, and make recommendations for action to the State Superintendent Sheri Ybarra prior to the next legislative session.

At the time of writing this report, the coronavirus not only poses a threat to Idahoans' physical wellbeing, but also to our mental and emotional health. This can create high levels of stress and anxiety for students, teachers, and families alike. The State Department of Education has successfully pursued numerous federal grants to advance students' mental and behavioral health during the past year, and securing and administering those grants remains a top priority. Suicide prevention and risk detection also have been top priorities, and we can't afford to take our foot off the pedal now.

We must be vigilant about the social-emotional health of educators, as well as the children they serve. With extra duties, curriculum disruptions and loss of personal contact, this pandemic has taken a huge toll on the teachers and staff whose commitment and effort are vital in meeting Idaho's education goals. The State Department of Education is committed to empowering local districts to meet the behavioral health needs of their school community through leadership, resources, training, and technical support.

Idaho Behavioral Health and Wellness Services Scan: Data Memo

The Idaho State Department of Education (SDE) contracted with Education Northwest to conduct a survey to gather information on behavioral health and wellness services (BHWS) throughout Idaho. This work is in response to a 2020 legislative mandate (House Bill 627, Section 5) to conduct a comprehensive scan of all BHWS that support K–12 general education students in Idaho. The survey was launched September 10, 2020, and remained open until October 23, 2020.

This data memo presents the results of the survey, which SDE will share with the Idaho Legislature in January 2021. *It intentionally does not include an executive summary of results;* all further summarization and interpretation of the survey data will be conducted by SDE.

Memo Organization and Survey Description

The memo is organized into the following sections:

- Respondent Characteristics (p. 1)
- Guiding Framework and Approach (p. 3)
- Approaches to Supporting BHWS (p. 6)
- Types of BHWS Offered and How They Are Funded and Assessed (p. 9)
- Barriers to implementing BHWS (p.16)
- Efficacy and Impact (p. 17)

For the purposes of the survey, BHWS was defined as *services focused on the well-being services, strategies, and/or programs available to the K–12 general student population*. These services are available to all students, families, and/or school staff members to support students' mental, social, and personal health. The survey asked about the BHWS strategies and/or programs available as part of a typical school experience for students before the COVID-19 pandemic. Administrators were encouraged to connect with a team of educators in their district/school for a full picture of pre-pandemic efforts. Survey questions focused on providing an understanding of what types of BHWS are being implemented to the general population in each school and district; identifying service delivery gaps, challenges, and perceived value; and fostering understanding of how service delivery is being measured across districts and in schools (see appendix A for a copy of the survey).

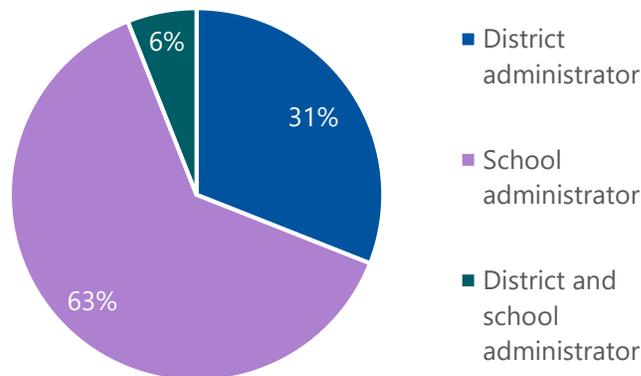
Respondent Characteristics

The survey was distributed to school and district administrators across Idaho, and we worked with SDE to determine the appropriate respondents from each school and district. We

conducted survey follow-up through SurveyGizmo, as well as individualized emails and phone calls from SDE, to maximize representation of all schools and districts in Idaho.

There were 411 total survey responses (330 complete responses and 81 partial responses). In addition, 12 respondents did not consent to participate, so they were disqualified from the survey. We received responses from 154 district administrators and 263 school administrators, including 27 individuals who were both district and school administrators (figure 1)¹. Most survey questions were asked of both school administrators and district administrators. Because of the low school-level response rate, responses from school administrators should be interpreted with caution; the analyses do not represent all schools in Idaho. Also, we analyzed all data by charter vs. non-charter and rural vs. non-rural.

Figure 1: Role of respondent (district and school administrators, N = 410)

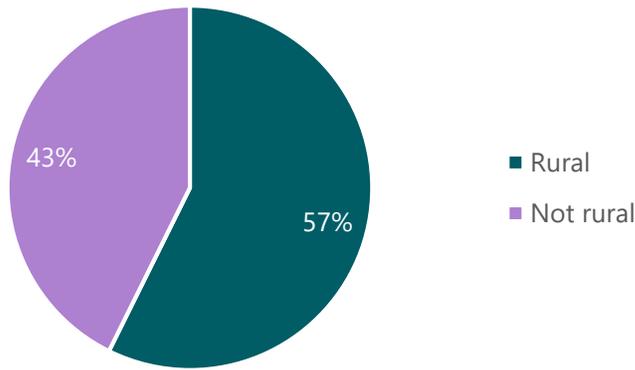


Note: Due to item-level non-responses, the number of item responses will not always be equal to the total number of survey responses.

Overall, 235 survey respondents were from rural districts and 175 were from non-rural districts (figure 2). Further, 70 respondents were from charters, and 340 were not from charters (figure 3).

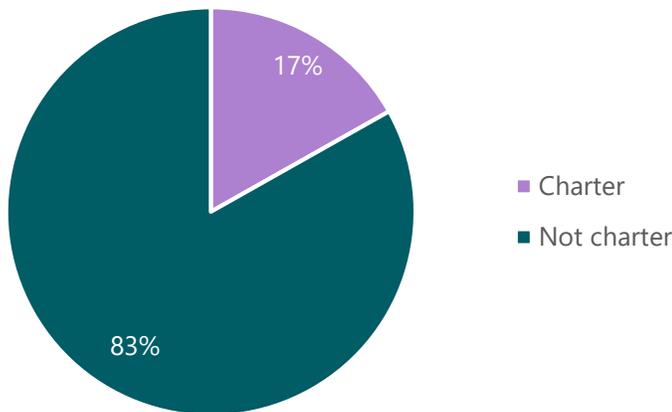
¹ Due to item-level non-responses, the number of item responses will not always be equal to the total number of survey responses.

Figure 2: Percentage of rural respondents (district and school administrators, N = 410)



Note: Due to item-level non-responses, the number of item responses will not always be equal to the total number of survey responses.

Figure 3: Percentage of respondents from charters and not from charters (district and school administrators, N = 410)

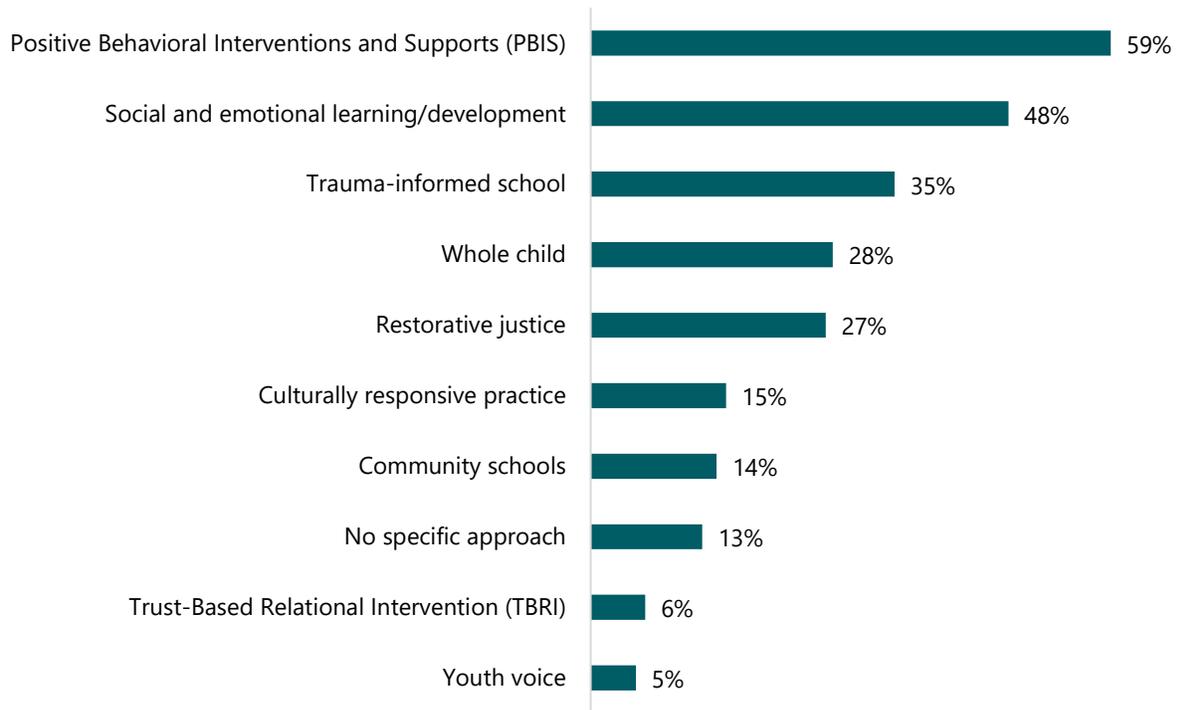


Note: This total includes respondents who were identified as part of a charter district. It does not include respondents who are part of charter schools in public districts.

Guiding Framework and Approach

Administrators were asked whether their district has a guiding framework or approach for BHWS. Over half (59 percent) said their district uses Positive Behavioral Interventions and Supports (PBIS) as a district-level guiding framework, and just under half (48 percent) cited social and emotional learning/development as their district's guiding framework (figure 4).

Figure 4: District-level guiding framework for BHWS (district and school administrators, N = 370)



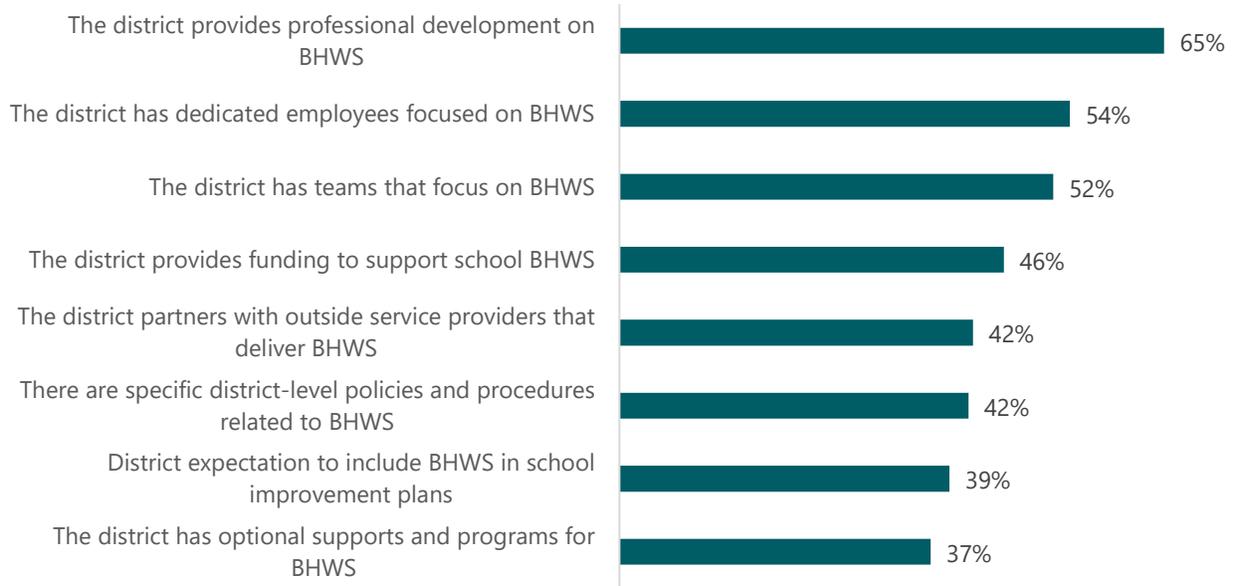
Source: Idaho BHWS survey responses from district and school administrators

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

In regard to guiding frameworks for BHWS, the largest differences between rural and non-rural districts were those that used a trauma-informed school approach (a 22 percentage point difference), restorative justice (15 percentage point difference), and social and emotional learning/development (13 percentage point difference)—and in all cases, rural districts were less likely to use these practices. Overall, 15 percent of administrators at rural districts said they had no specific guiding framework for BHWS compared with 9 percent of administrators at non-rural districts.

Administrators were also asked, “How does your district implement its approach to supporting BHWS?” The supports most frequently selected were professional development on BHWS (65 percent), dedicated district-level employees focused on BHWS (54 percent), and district-level teams to support BHWS (52 percent) (figure 5).

Figure 5: Ways districts implement their approach to supporting BHWS (district and school administrators, N = 355)



Source: Idaho BHWS survey responses from district and school administrators

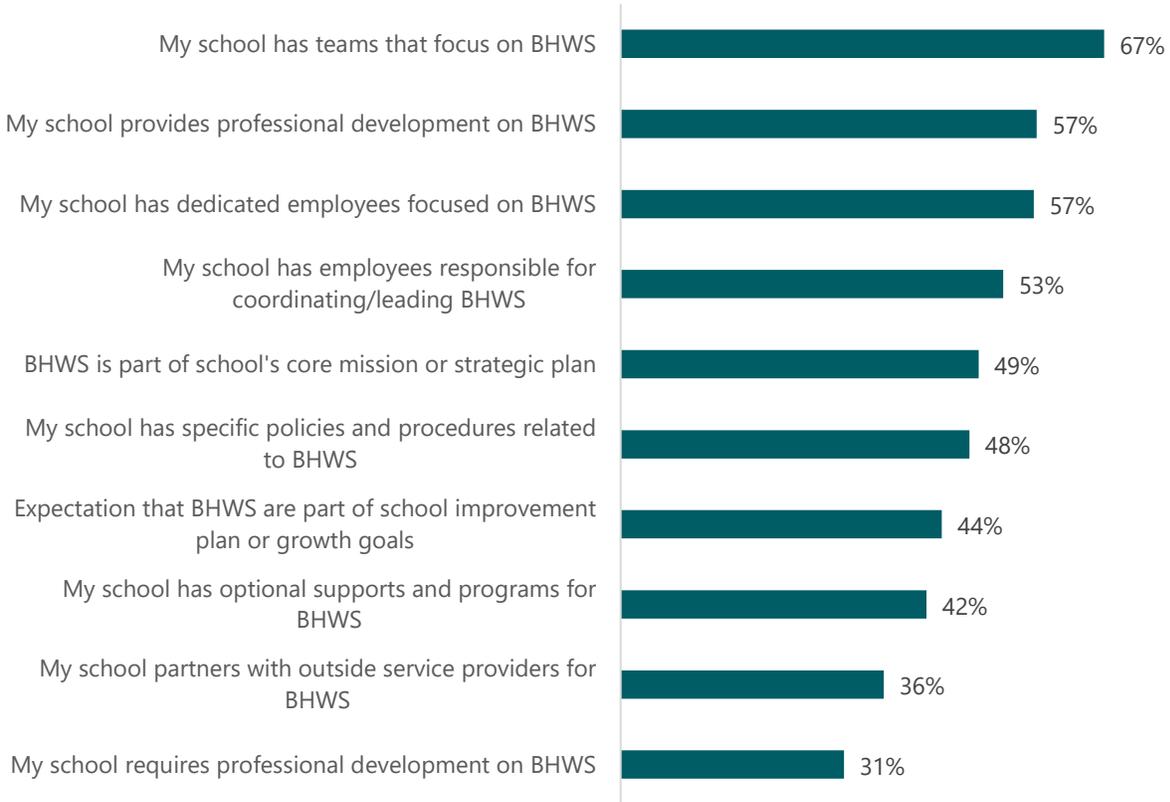
Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Compared with non-rural respondents, rural respondents were 19 percent points more likely to report that their district didn't have specific district-level policies for implementing BHWS and 17 percentage points more likely to report that their district didn't provide professional development.

Compared with non-charter respondents, charter respondents were 19 percentage points less likely to report partnering with outside providers and 18 percentage points less likely to report having district-level teams to support BHWS.

School administrators were also asked about their school-level approaches to BHWS, and the results were similar to responses regarding district-level approaches (figure 6).

Figure 6: Ways schools implement their approach to supporting BHWS (school administrators only, N = 237)²



Source: Idaho BHWS survey responses from school administrators only

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

When these data were examined for rural vs. non-rural respondents, the biggest differences were that rural school administrators:

- Used outside service providers 18 percentage points more often than non-rural school administrators
- Said that BHWS was a part of their school mission or strategic plan 11 percentage points less often than non-rural school administrators

Approaches to Supporting BHWS

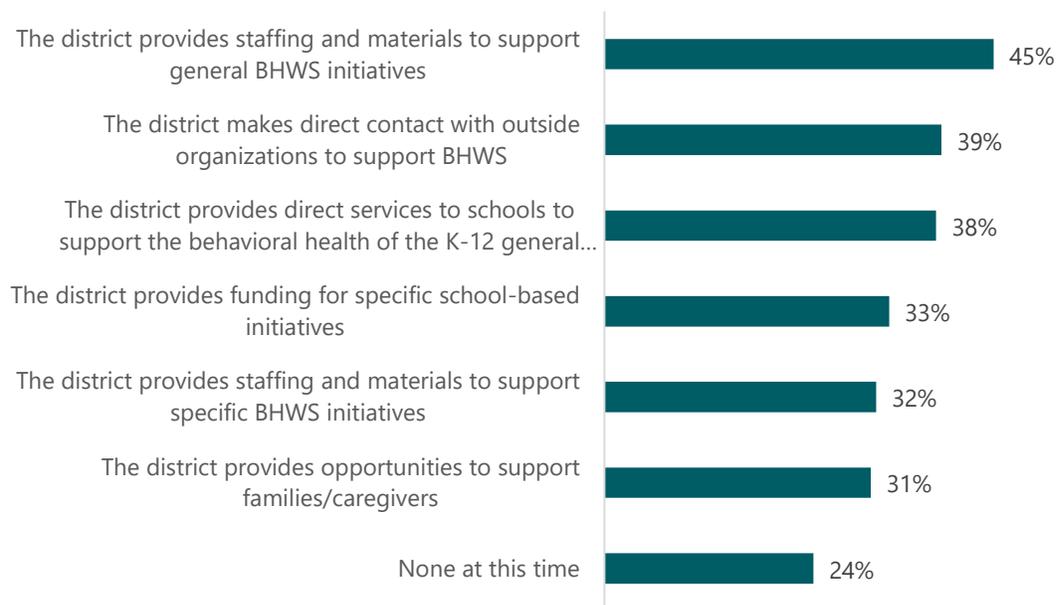
District and school administrators were asked about providing support to families and caregivers, as well as preparing school employees to provide BHWS, as part of their approach to supporting BHWS. They were also asked to reflect on gaps in both their district's and school's approach to BHWS (see the data attachment for responses).

² School-level responses are not representative of all schools in Idaho due to a low response rate.

BHWS Provided to Families and Caregivers

Both district and school administrators were asked about the BHWS available to families and caregivers of the K–12 general student population (figure 7). Districts cited various methods for providing BHWS, and 24 percent said they do not provide services to families and caregivers at this time.

Figure 7: District-provided BHWS available to the families/caregivers of the K–12 general student population (district and school administrators, N = 330)



Source: Idaho BHWS survey responses from district and school administrators

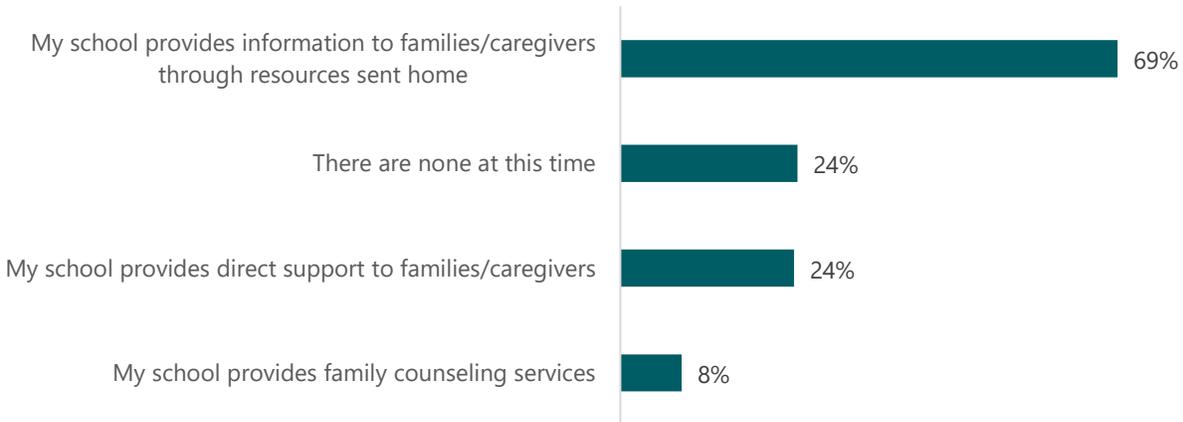
Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

The biggest differences in this area between rural districts and non-rural districts were that rural districts were 14 percentage points less likely to provide opportunities to support families or caregivers and 10 percentage points less likely to provide staffing and materials to support BHWS initiatives.

Comparing charters and non-charters, a lower percentage of charter respondents said they offered all options and were 17 percentage points more likely to say they offered none at this time.

School administrators were asked whether their school provided BHWS to the families or caregivers of their K–12 general student population. They reported that the most common service offered to families and caregivers was providing information through resources sent home (69 percent). In addition, 24 percent of school administrators said they provide no direct support to families and caregivers (figure 8).

Figure 8: Aspects of school-provided BHWS available to the families/caregivers of the K–12 general student population (school administrators only, N = 213)³



Source: Idaho BHWS survey responses from school administrators only

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

School administrators in rural districts were more likely than school administrators in non-rural districts to report that they offered no services to families and caregivers (28 percent compared with 20 percent). The difference between charter school administrators and non-charter school administrators was larger (34 percent compared with 23 percent).

Employee Preparation to Teach BHWS

In response to survey questions about how they prepared their employees to deliver BHWS, 59 percent of school administrators said they specifically recruited staff members with this skill set, and 50 percent said they used coaching and supports. Overall, 24 percent of school administrators said they offered dedicated and explicit training for BHWS, and only 10 percent they were doing nothing to prepare their employees to deliver BHWS (figure 9).

³ School-level responses are not representative of all schools in Idaho due to a low response rate.

Figure 9: Ways school employees are prepared to deliver BHWS (school administrators only, N = 217)⁴



Source: Idaho BHWS survey responses from school administrators only

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Overall, 13 percent of school administrators in rural districts reported not currently preparing employees to deliver BHWS compared with 5 percent of school administrators in non-rural districts. This difference was larger between charter school administrators (21 percent) and non-charter school administrators (8 percent).

Types of BHWS Offered and How They Are Funded and Assessed

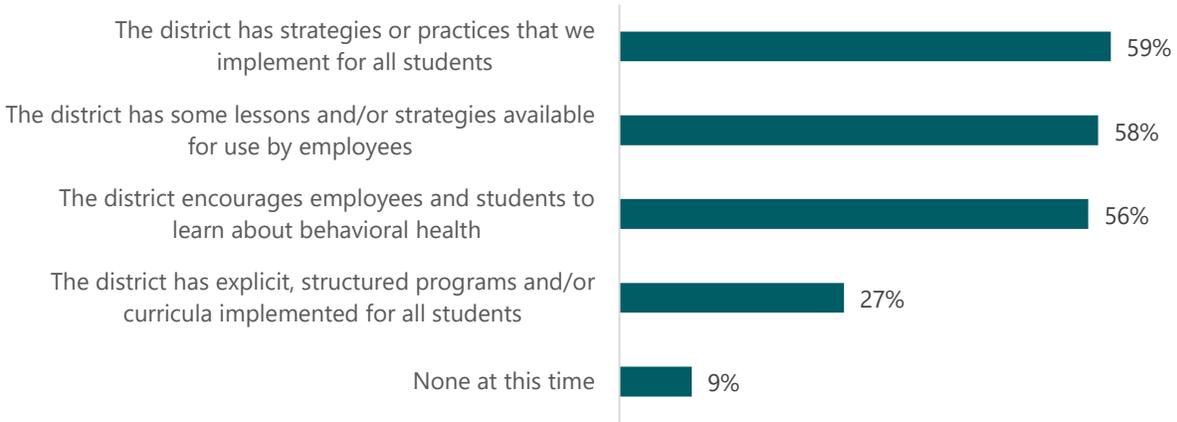
District and school administrators were asked about the types of BHWS offered to the K–12 general student population in their district. School administrators were also asked about the specific types of programs offered at the school level and how these programs are funded and assessed.

Types of BHWS

All respondents were asked what types of BHWS were offered to the K–12 general student population across their district (figure 10). A little over half of respondents said their district has strategies or practices that they implement for all students (59 percent), has lessons and/or strategies available for employees to use (58 percent), and encourages employees and students to learn about behavioral health (56 percent).

⁴ School-level responses are not representative of all schools in Idaho due to a low response rate.

Figure 10: Types of BHWS offered to the K–12 general student population across districts (district and school administrators, N = 333)



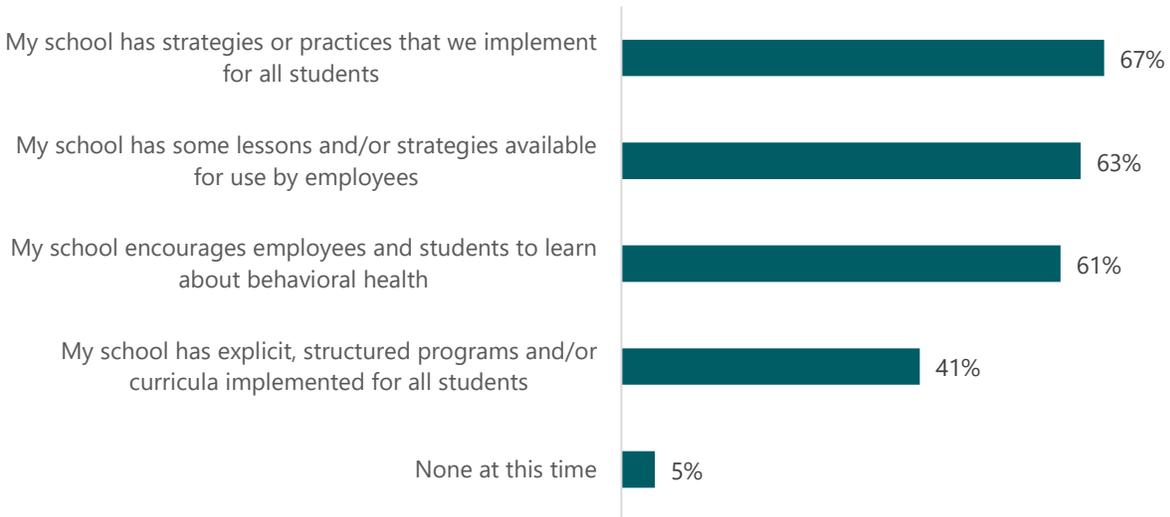
Source: Idaho BHWS survey responses from district and school administrators

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Overall, 22 percent of school and district administrators from rural districts reported that they had explicit and structured programs and/or curricula for all students, which was 12 percentage points lower than administrators from non-rural districts. No difference between charter and non-charter respondents was greater than 10 percentage points.

School administrators were also asked what types of BHWS were offered to the K–12 general population at their school (figure 11). Similar to district administrators, over half of school administrators said their school has strategies or practices they implement with students (67 percent), has lessons and/or strategies available for use by employees (63 percent), and encourages employees and students to learn about behavioral health (61 percent).

Figure 11: Types of BHWS offered to the K–12 general student population at the school level (school administrators only, N = 216)⁵



Source: Idaho BHWS survey responses from school administrators only

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Compared with non-rural school administrators, rural school administrators said their schools offered fewer services to their students. Specifically, compared with their non-rural peers, rural school administrators were 12 percentage points less likely to report that their school was implementing strategies and practices for all students and 10 percentage points less likely to report that their school had lessons or strategies available for use by employees.

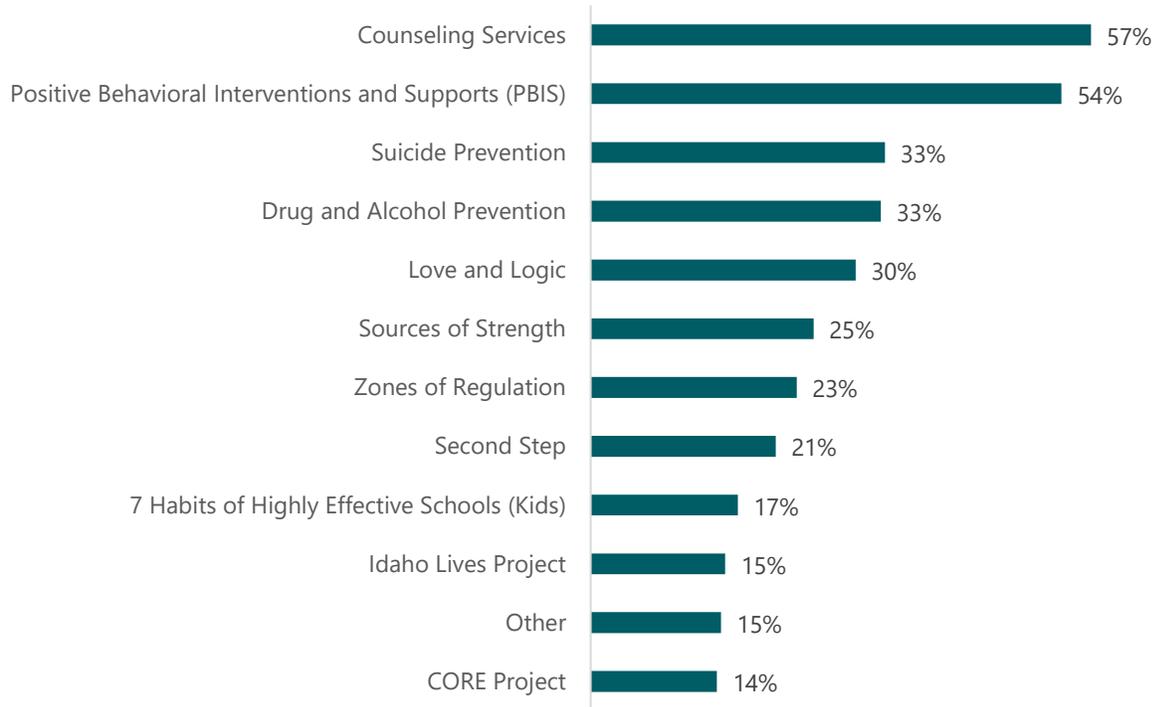
In addition, charter school administrators reported offering no BHWS at this time 12 percentage points more than non-charter school administrators.

School administrators were also asked what specific BHWS programs they use in their schools (figure 12).⁶ Schools reported offering many types of programs, and top two were counseling services and PBIS.

⁵ School-level responses are not representative of all schools in Idaho due to a low response rate.

⁶ Figure 12 displays programs that 10 percent or more of school administrators reported offering. The full list and percentages are in appendix B.

Figure 12: Specific BHWS programs schools provide to K–12 general education students (school administrators only, N = 209) ⁷



Source: Idaho BHWS survey responses from school administrators only

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

The largest differences between rural and non-rural school administrators were for Zones of Regulation and the CORE Project. Specifically, 21 percent of rural school administrators reported using the CORE Project compared with 7 percent of non-rural school administrators, and 17 percent of rural school administrators said they used Zones of Regulation compared with 32 percent of non-rural school administrators.

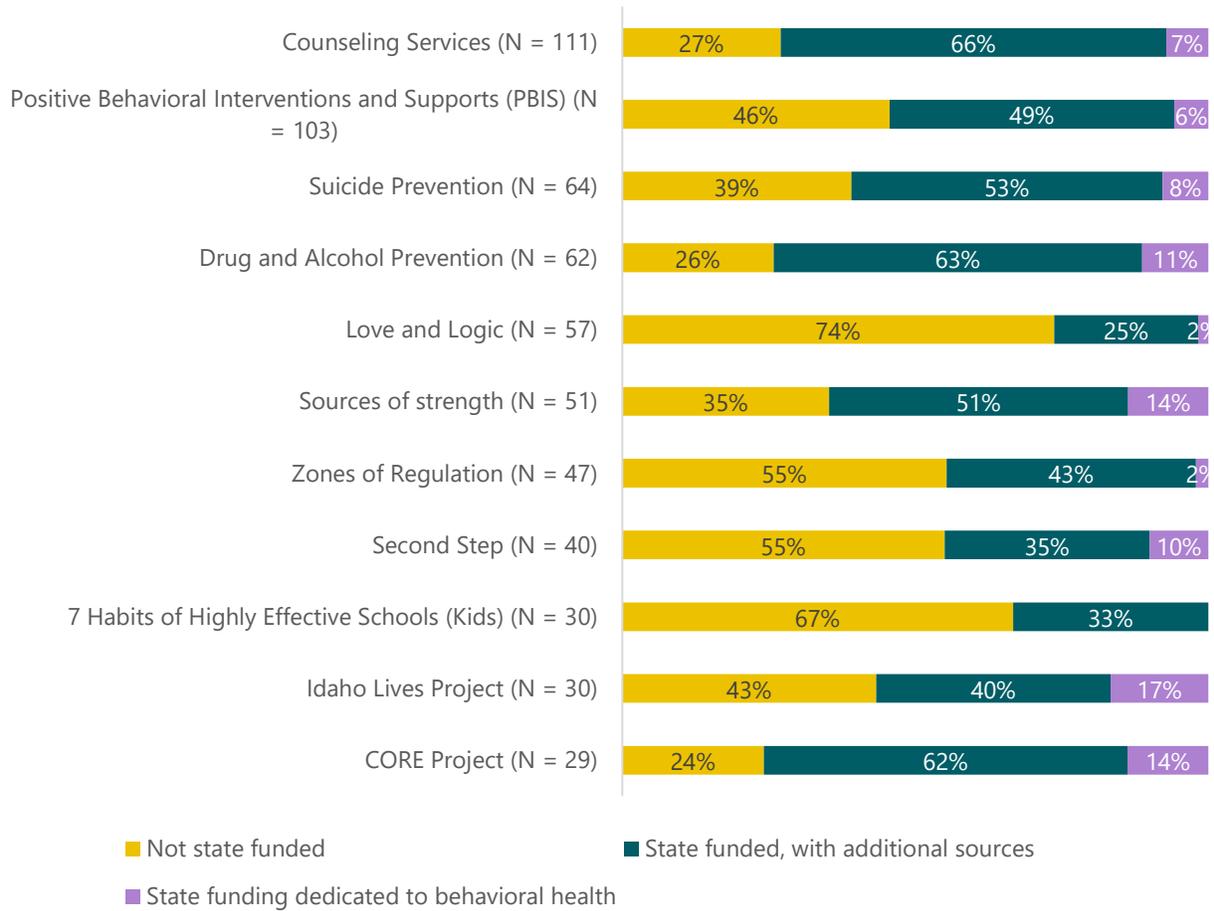
Funding BHWS

School administrators were asked how they funded the programs they reported offering (figure 13) ⁸. They reported that few programs are supported by state funds dedicated to behavioral health and that financial support is mostly an even mix of state funding and additional funding sources or that they are not funded with state dollars (figure 13).

⁷ School-level responses are not representative of all schools in Idaho due to a low response rate.

⁸ Figure includes programs that 10% or more of school-level administrators reported offering. The full list and percentages are available in appendix B.

Figure 13: How schools fund the programs they offer (school administrators, N = 194)⁹



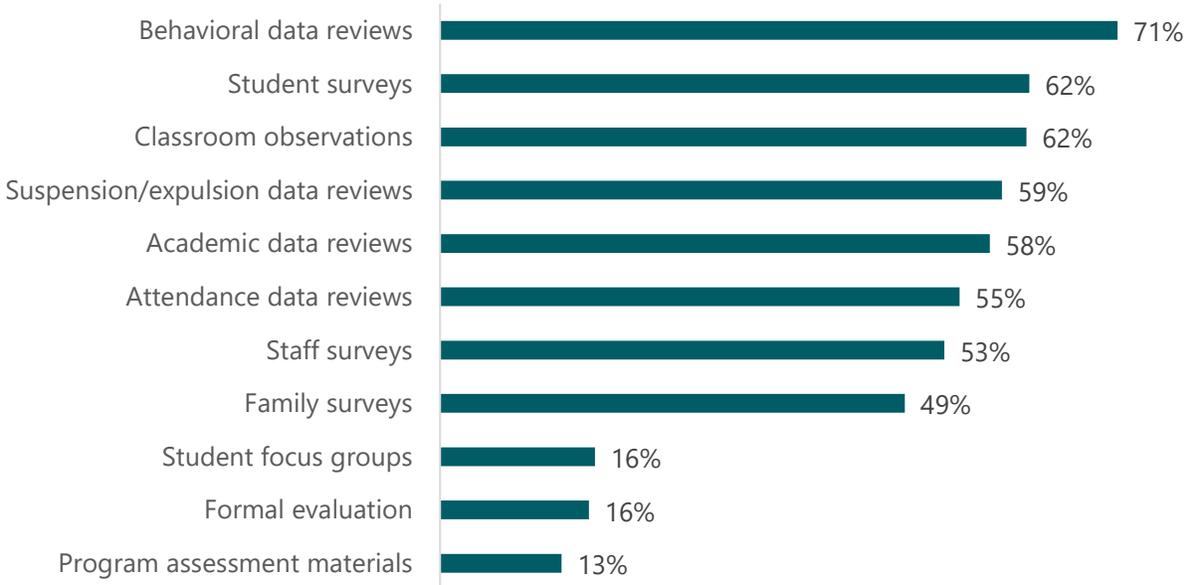
Source: Idaho BHWS survey responses from school administrators only

Measuring the Efficacy and Impact of BHWS

District and school administrators were asked how BHWS are being assessed in their district. Various methods were cited, and behavioral data reviews (71 percent) were most frequently cited (figure 14).

⁹ School-level responses are not representative of all schools in Idaho due to a low response rate

Figure 14: How BHWS are being assessed or measured in districts (district and school administrators, N = 313)



Source: Idaho BHWS survey responses from district and school administrators

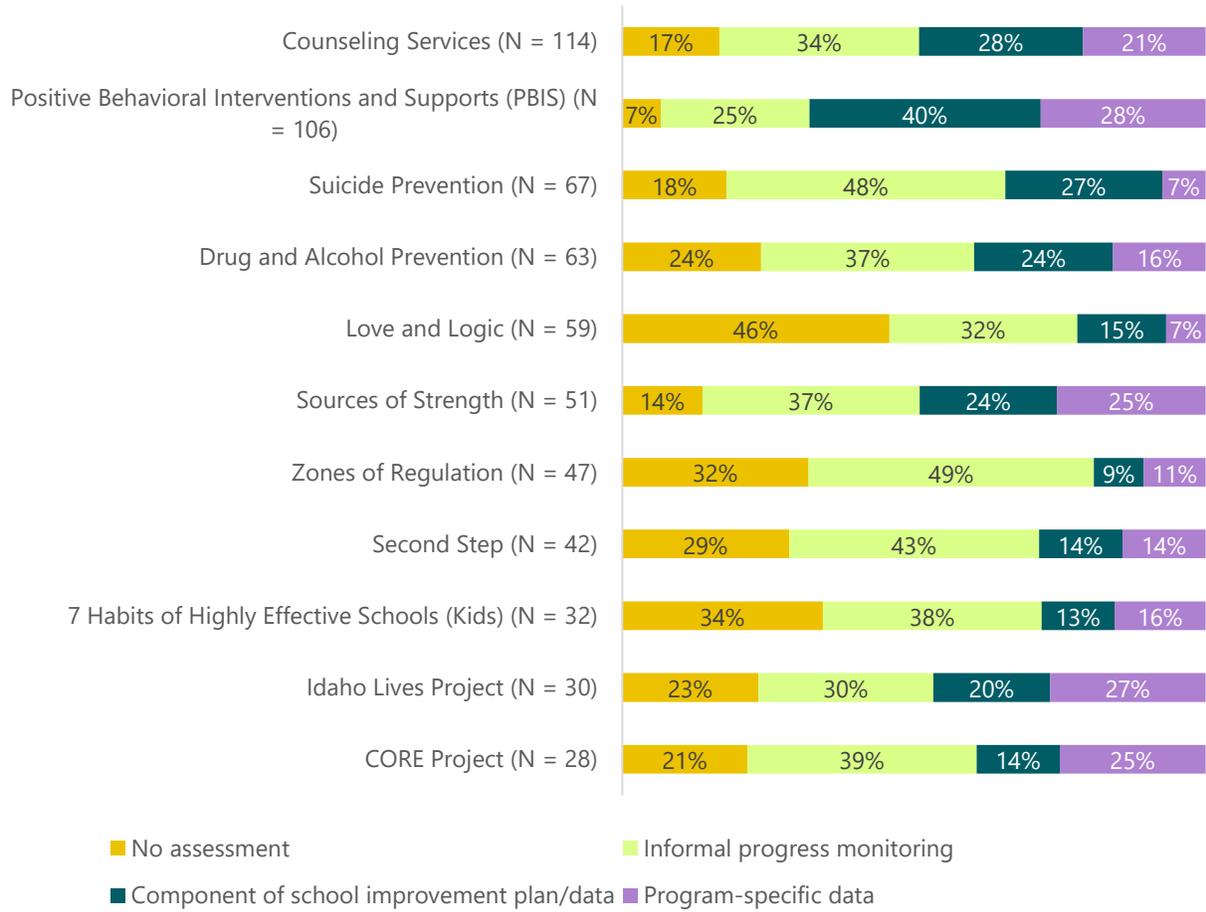
Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Rural school and district administrators were more likely to report that they used classroom observations (10 percentage points more than non-rural administrators). In addition, rural school and district administrators were 10 percentage points less likely to report using suspension or expulsion data reviews to assess their BHWS than non-rural administrators. Charter school administrators reported using classroom observations 10 percentage points less than non-charter school administrators.

School administrators were also asked how they assessed the programs they reported offering. Survey results indicate that programs are most frequently assessed informally or not assessed at all, with only PBIS having over half of program users conducting an assessment through school improvement planning or data or program-specific data (figure 15).¹⁰

¹⁰ Figure 15 displays programs that 10 percent or more of school administrators reported offering. The full list and percentages are in appendix B.

Figure 15: How schools assess the programs they offer (school administrators only, N = 209)¹¹



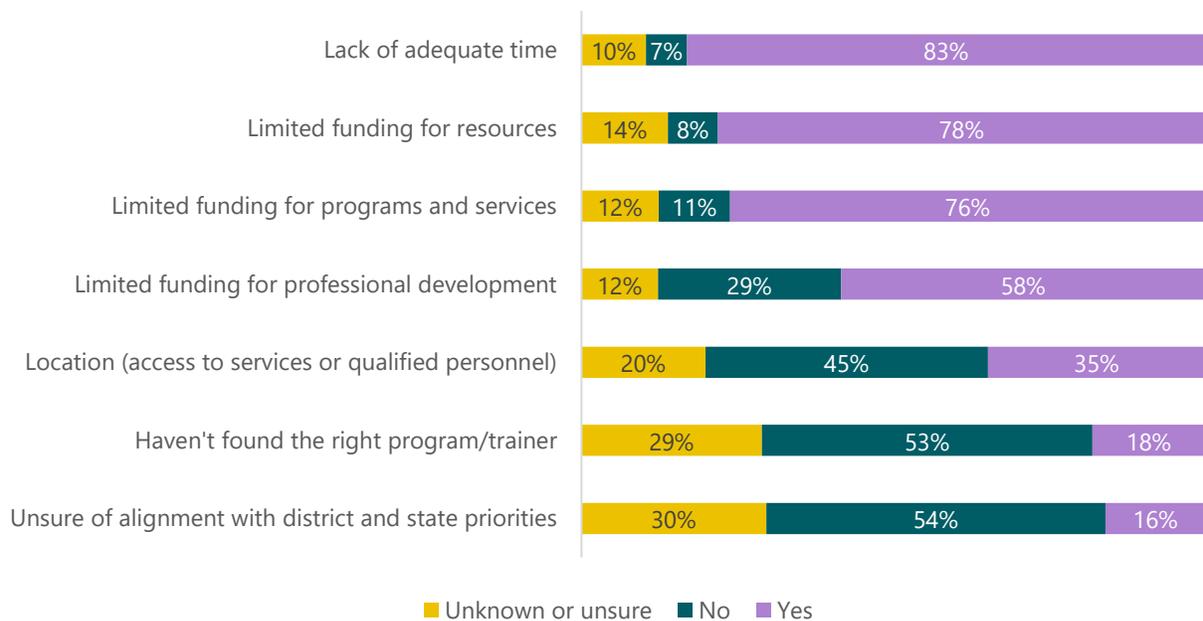
Source: Idaho BHWS survey responses from school administrators only

¹¹ School-level responses are not representative of all schools in Idaho due to a low response rate.

Barriers to Implementing BHWS

In the survey, school and district administrators reported on barriers to implementing a full, high-quality BHWS program. They indicated that the top district-level barriers were lack of time (83 percent), limited funding for resources (78 percent), limited funding for programs and services (76 percent), and limited funding for professional development (58 percent). Administrators also responded to open-ended questions about the most significant barriers schools and districts face while implementing BHWS and related supports to K–12 general education students (open-ended survey question responses are in the attachment).

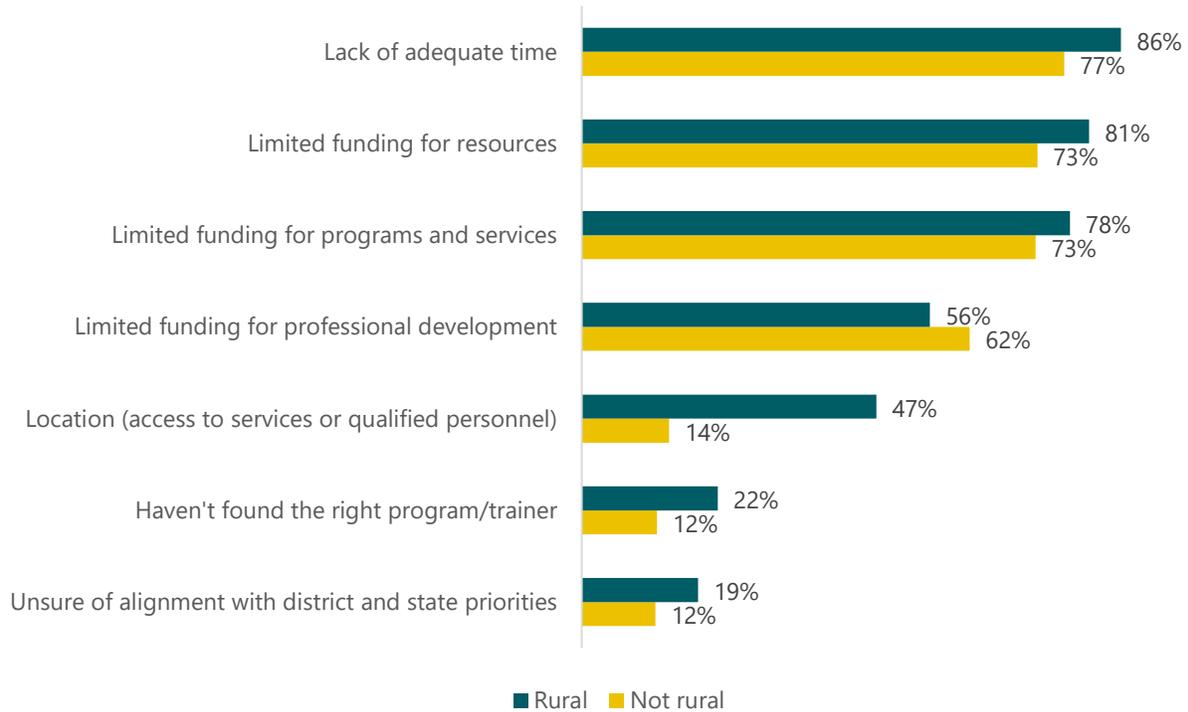
Figure 16: District-level barriers to implementing a full, high-quality BHWS program (district and school administrators, N = 325)



Source: Idaho BHWS survey responses from district and school administrators

One finding that was notably different for rural administrators was location, which was identified as a barrier by 47 percent of rural school and district administrators and only 14 percent of non-rural school and district administrators (figure 17).

Figure 17: District-level barriers to implementing a full, high-quality BHWS program, by locale (district and school administrators, N = 325)

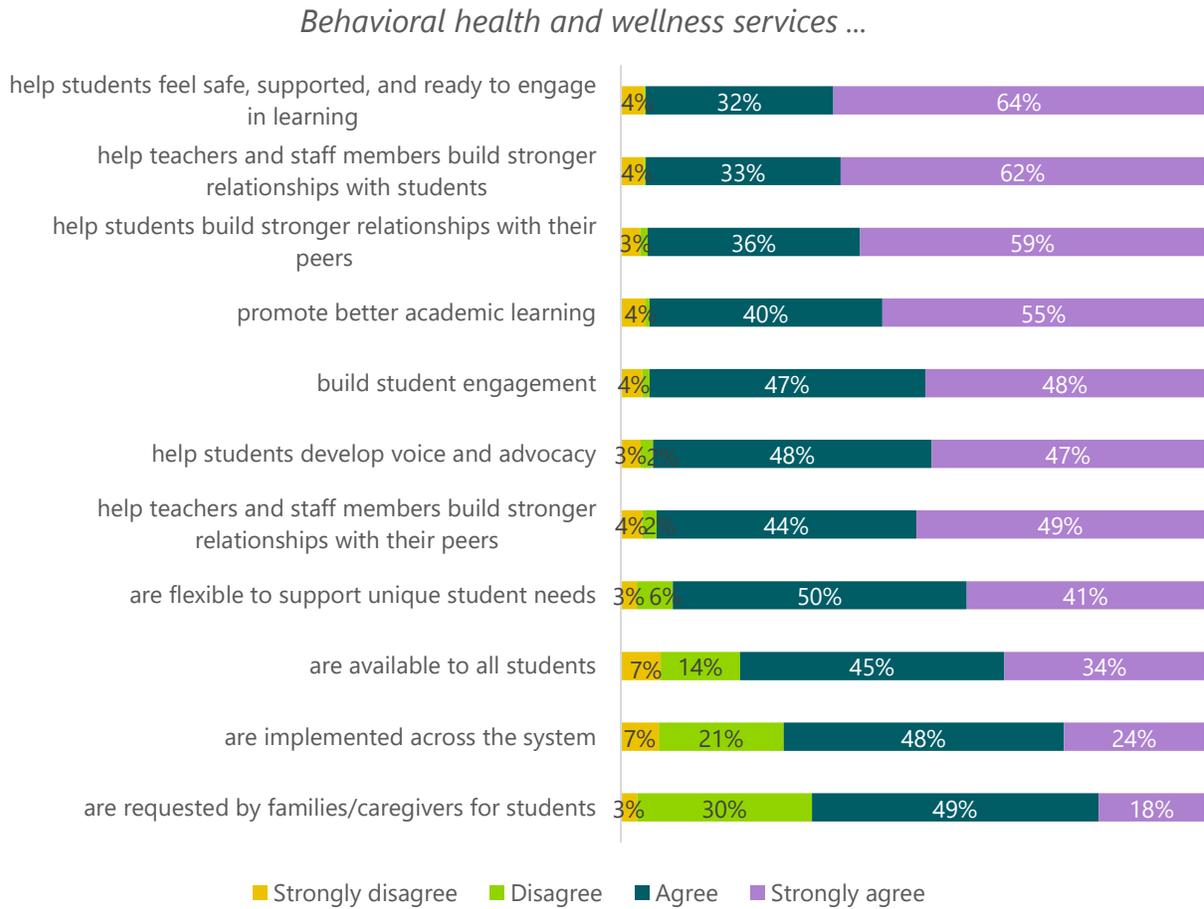


Source: Idaho BHWS survey responses from district and school administrators

Efficacy and Impact

On the survey, school and district administrators were asked how much they agreed or disagreed with specific statements about BHWS. More than 90 percent of respondents agreed or strongly agreed with all but three statements (figure 18).

Figure 18: Percentage of survey respondents who agreed with statements about BHWS (district and school administrators, N = 324)



Source: Idaho BHWS survey responses from district and school administrators

Note: Respondents were asked to select all that apply and therefore may have selected multiple approaches.

Appendix A: Idaho Behavioral Health and Wellness Services Survey (2020)

Informed Consent

To create positive learning experiences, many schools implement strategies that help students develop skills in areas such as emotion management, behavior, and interpersonal communication. These strategies may be delivered directly to students (e.g., through a program or curriculum), implemented as a tool educators can use (e.g., justice circles, morning messages), offered as professional development for school staff members (e.g., trauma-informed practice training), or through other means.

This survey was created in response to a 2020 legislative mandate (House Bill 627, Section 5) to conduct a comprehensive scan of all behavioral health and wellness services (BHWS) that support general education K–12 students in Idaho. The Idaho State Department of Education contracted with Education Northwest to gather this information from district and school administrators. Results will be delivered to the Idaho Legislature in January 2021. This survey will help provide an understanding of what types of BHWS are being implemented to the general population in each school and district; identify service delivery gaps, challenges, and perceived value; and foster understanding of how service delivery is being measured across districts and in schools.

Your perspective as a district or school administrator is very valuable. There are no right or wrong answers. Your participation in this survey is voluntary; you can stop participating at any time, skip a question, or refuse to participate without any consequences. It may be possible to identify you by your responses because we are asking specific questions about your school or district. We do not anticipate any risk to participating in the survey.

This survey should take no more than 30 minutes to complete.

Please complete this survey by September 30, 2020. If you have questions, contact Elizabeth Gandhi at 503-275-9590 or elizabeth.gandhi@educationnorthwest.org.

Behavioral Health and Wellness Services (BHWS) Definition

“Behavioral health” is often used as a clinical term to support targeted or identified students in need of specialized services. For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K–12 general student population. Along those lines, these services are available to all students, families, and/or school staff members to support students’ mental, social, and personal health. They may include:

- *Specific goals with strategies and actions available for all students*
- *Evidence or research-based programs provided to all students*
- *Dedicated staffing or resources available for all students*
- *Partnerships with additional agencies to support all students*

For the purposes of this survey, BHWS may also be known as:

- *Social and emotional learning*
- *Character development*
- *Character education*
- *Mental health and well-being*
- *Resilience building*
- *Resiliency training*
- *Trauma-informed practices*
- *Responsible citizen education*

Please note that this survey asks about the behavioral health and wellness services, strategies, and/or programs available as

part of a typical school experience for students *prior to the COVID-19 pandemic*. We know some of these may not be available post-pandemic.

Before completing this survey, you may want to connect with a team of staff members in your district/school for a full picture of your efforts prior to the COVID-19 pandemic.

You may close the survey and return to it before September 30, 2020, using the unique link you received.

General Questions

Page exit logic: Skip / Disqualify Logic**IF:** #1 Question "Do you agree to participate in this survey?" is one of the following answers ("No") **THEN:** Disqualify and display: "Thank you for your time and enjoy the rest of your day. If you have questions about the survey, please contact Elizabeth Gandhi at 503-275-9590 or elizabeth.gandhi@educationnorthwest.org."

Logic: Show/hide trigger exists.

1) Do you agree to participate in this survey?*

Yes

No

Logic: Show/hide trigger exists. Hidden unless: #1 Question "Do you agree to participate in this survey?" is one of the following answers ("Yes")

2) What is your role? (Select all that apply)*

District-level administrator

School-level administrator

Approach to supporting BHWS

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

3) Does your district have a guiding framework or approach for BHWS? (Select all that apply)

No specific approach

Whole Child

Multi-Tiered System of Supports (MTSS) or Response to Intervention (RTI)

Trauma-Informed School

Restorative Justice

Social and Emotional Learning/Development

Culturally Responsive Practice

Positive Behavioral Interventions and Supports (PBIS)

Youth Voice

Community Schools

Trust-Based Relational Intervention (TBRI)

Other - Write In: _____

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

4) Does your school have a guiding framework or approach for BHWS? (Select all that apply)

- No specific approach
 - Whole Child
 - Multi-Tiered System of Supports (MTSS) or Response to Intervention (RTI)
 - Trauma-Informed School
 - Restorative Justice
 - Social and Emotional Learning/Development
 - Culturally Responsive Practice
 - Positive Behavioral Interventions and Supports (PBIS)
 - Youth Voice
 - Community Schools
 - Trust-Based Relational Intervention (TBRI)
 - Other - Write In: _____
-

Approach to supporting BHWS

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

5) How does your district implement its approach to supporting BHWS? (Select all that apply)

- It is a district-level expectation to have BHWS included in district improvement plans and/or growth goals.
- The district provides funding to support school BHWS.
- There are specific district-level policies and procedures related to BHWS.
- The district has dedicated employees focused on BHWS.
- The district has teams that focus on BHWS.
- The district has optional supports and programs for BHWS.
- The district provides professional development on BHWS.
- The district partners with outside service providers that deliver BHWS.
- Other - Write In: _____

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

6) How does your school implement its approach to supporting BHWS? (Select all that apply)

- It is an expectation to have BHWS included in my school's improvement plan and/or growth goals.
- It is part of my school's core mission and strategic plan.

- My school has specific policies and procedures related to BHWS.
 - My school has dedicated employees focused on BHWS.
 - My school has teams that focus on BHWS.
 - My school has optional supports and programs for BHWS.
 - My school has employees responsible for coordinating/leading BHWS.
 - My school requires professional development on BHWS.
 - My school provides professional development on BHWS.
 - My school partners with outside service providers for BHWS.
 - Other - Write In: _____
-

Approach to supporting BHWS

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

7) Describe any gaps in your district’s approach to supporting BHWS.

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

8) Describe any gaps in your school's approach to supporting BHWS.

Page entry logic: This page will show when: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

Approach to supporting BHWS

REMINDER

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Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

9) How does your school implement its approach to supporting BHWS? (Select all that apply)

- It is an expectation to have BHWS included in my school's improvement plan and/or growth goals.
- It is part of my school's core mission and strategic plan.
- My school has specific policies and procedures related to BHWS.
- My school has dedicated employees focused on BHWS.
- My school has teams that focus on BHWS.
- My school has optional supports and programs for BHWS.
- My school has employees responsible for coordinating/leading BHWS.
- My school requires professional development on BHWS.
- My school provides professional development on BHWS.
- My school partners with outside service providers for BHWS.
- Other - Write In: _____

10) Describe any gaps in your school's approach to supporting BHWS.

Approach to supporting BHWS

REMINDER:

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- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

11) Are there aspects of district-provided BHWS that are available to the families/caregivers of the K-12 general student population? (Select all that apply)

There are none at this time.

The district provides opportunities to support families/caregivers (such as parenting support groups and wraparound services that include BHWS resources).

The district provides direct services to schools to support the behavioral health of the K-12 general student population.

The district provides funding for specific school-based initiatives.

The district provides staffing and materials to support **general** BHWS initiatives.

The district provides staffing and materials to support **specific** BHWS initiatives.

The district makes direct contact with outside organizations to support BHWS in schools.

Other - Write In: _____

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

12) Are there aspects of school-provided BHWS that are available to the families/caregivers of the K-12 general student population? (Select all that apply)

There are none at this time.

My school provides direct support to families/caregivers (such as parenting support groups and wraparound services that include BHWS resources).

My school provides information to families/caregivers through resources sent home, information nights, etc.

My school provides family counseling services.

Other - Write In: _____

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

13) How are employees at your school prepared to deliver BHWS? (Select all that apply)

We don't currently have this

Dedicated, explicit training

Coaching and supports

Employees with this skill set are specifically recruited (e.g., guidance counselor, social worker, school nurse)

Part of policy and expectations of all employees

Other - Write In: _____

What types of BHWS are being implemented, and where are there gaps?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

14) What types of BHWS are offered to the K-12 general student population across the district? (Select all that apply)

- None at this time.
- The district has explicit, structured programs and/or curricula implemented for all students.
- The district has strategies or practices that we implement for all students.
- The district has some lessons and/or strategies available for use by employees and students.
- The district encourages employees and students to learn about behavioral health.

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

15) What types of BHWS are offered to the K-12 general student population at the school level? (Select all that apply)

- None at this time.
- My school has explicit, structured programs and/or curricula implemented for all students.
- My school has strategies or practices that we implement for all students.
- My school has some lessons and/or strategies available for use by employees and students.
- My school encourages employees and students to learn about behavioral health.

Page entry logic: This page will show when: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

What types of BHWS are being implemented, and where are there gaps?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

16) Does your school provide these specific BHWS to general education K-12 students? (Select all that apply)

7 Habits of Highly Effective Schools (Kids)

7 Mindsets

Advocacy Time

Ambitions of Idaho

Character Counts

Check and Connect

Conscious Discipline

Core Essential Values

CORE Project

Counseling Services

- Drug and Alcohol Prevention
- Idaho Lives Project
- Leader in Me
- Love and Logic
- Minds Up
- PAX Good Behavior Game
- Positive Behavioral Interventions and Supports (PBIS)
- Project Wisdom
- Recognizing, Understanding, Labeling, Expressing, and Regulating (RULER) Program
- Second Step
- Sources of Strength
- Suicide Prevention
- Toolbox Curriculum
- Why Try
- Youth Mental Health Supports
- Zones of Regulation
- Other - Write In: _____

Page entry logic: This page will show when: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

What types of BHWS are being implemented, and where are there gaps?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

How are the BHWS offered by your school funded?

	Does not use state funding	Uses state funding, with additional sources	Uses state funding dedicated solely to behavioral health
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What types of BHWS are being implemented, and where are there gaps?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*

- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K–12 general student population.*

17) At the district-level, are the following barriers to implementing a full, high-quality BHWS program for the K-12 general student population?

	Yes	No	Unknown or unsure
Limited funding for resources (e.g., employees and materials)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of adequate time (i.e., competing priorities)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limited funding for programs and services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limited funding for professional development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Haven't found the right program/trainer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsure of alignment with district and state priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location (access to services or qualified personnel)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

18) At the school-level, are the following barriers to implementing a full, high-quality BHWS program for the K-12 general student population?

	Yes	No	Unknown or unsure
Limited funding for resources (e.g., employees and materials)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Lack of adequate time (i.e., competing priorities)	()	()	()
Limited funding for programs and services	()	()	()
Limited funding for professional development	()	()	()
Haven't found the right program/trainer	()	()	()
Unsure of alignment with district and state priorities	()	()	()
Location (access to services or qualified personnel)	()	()	()

19) What are the most significant barriers your district is facing while implementing BHWS and supports to the K-12 general student population?

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

20) What are the most significant barriers your school is facing while implementing BHWS and supports to the K-12 general student population?

How do you measure efficacy and impact?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*

- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K–12 general student population.*

21) How is BHWS being assessed or measured districtwide? (Select all that apply)

- Attendance data reviews
- Behavioral data reviews
- Suspension/expulsion data reviews
- Academic data reviews
- Student surveys
- Staff surveys
- Family surveys
- Classroom observations
- Student focus groups
- Program assessment materials
- Formal evaluation
- Other - Write In: _____

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

22) How is BHWS being assessed or measured at your school? (Select all that apply)

- Attendance data reviews
- Behavioral data reviews

- Suspension/expulsion data reviews
- Academic data reviews
- Student surveys
- Staff surveys
- Family surveys
- Classroom observations
- Student focus groups
- Program assessment materials
- Formal evaluation
- Other - Write In: _____

Page entry logic: This page will show when: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

How do you measure efficacy and impact?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

Logic: Hidden unless: #2 Question "What is your role? (Select all that apply)" is one of the following answers ("School-level administrator")

How is the specific BHWS provided at your school assessed or measured?

	Informal progress monitoring	A component of our overall school improvement plan/data	Program-specific data	We do not assess or measure this program
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How do you measure efficacy and impact?

REMINDER:

- *Before completing this survey, it may be helpful to connect with your team for a full picture of pre-COVID-19 efforts.*
- *For the purposes of this survey, behavioral health and wellness services (BHWS) are focused on the well-being services, strategies, and/or programs available to the K-12 general student population.*

23) Please rate your agreement with the following statements:

Behavioral health and wellness services ...

	Strongly disagree	Disagree	Agree	Strongly agree
build student engagement	()	()	()	()
promote better academic learning	()	()	()	()
help teachers and staff members build stronger relationships with students	()	()	()	()
help teachers and staff members build stronger relationships with their peers	()	()	()	()
help students build stronger relationships with their peers	()	()	()	()
help students feel safe, supported,	()	()	()	()

and ready to engage in learning				
help students develop voice and advocacy	()	()	()	()
are flexible to support unique student needs	()	()	()	()
are implemented across the system	()	()	()	()
are requested by families/caregivers for students	()	()	()	()
are available to all students	()	()	()	()

BHWS

24) Please provide any additional feedback you'd like to share on the topic of K-12 general education BHWS in your district or school.

Thank You!

Thank you for taking this survey. Your response is very important.

If you have any questions or concerns about this survey, contact Elizabeth Gandhi at 503-275-9590 or elizabeth.gandhi@educationnorthwest.org.

Appendix B: School Programs, Funding, and Assessment

	Percentage using program	Not state funded	State funded, with additional sources	State funding dedicated to behavioral health	No assessment	Informal progress monitoring	Component of school improvement plan/data	Program-specific data
<i>Specific programs identified (N = 209)</i>		<i>BHWS state funding (N = 194)</i>			<i>BHWS assessment (N = 203)</i>			
Counseling Services	57%	27%	66%	7%	17%	34%	28%	21%
Positive Behavioral Interventions and Supports (PBIS)	54%	46%	49%	6%	7%	25%	40%	28%
Suicide Prevention	33%	39%	53%	8%	18%	48%	27%	7%
Drug and Alcohol Prevention	33%	26%	63%	11%	24%	37%	24%	16%
Love and Logic	30%	74%	25%	2%	46%	32%	15%	7%
Sources of Strength	25%	35%	51%	14%	14%	37%	24%	25%
Zones of Regulation	23%	55%	43%	2%	32%	49%	9%	11%
Second Step	21%	55%	35%	10%	29%	43%	14%	14%
7 Habits of Highly Effective Schools (Kids)	17%	67%	33%	0%	34%	38%	13%	16%
Idaho Lives Project	15%	43%	40%	17%	23%	30%	20%	27%
Other	15%				10%	42%	29%	19%
CORE Project	14%	24%	62%	14%	21%	39%	14%	25%
Character Counts	10%	74%	26%	0%	42%	42%	11%	5%
Leader in Me	8%	50%	44%	6%	12%	18%	53%	18%
Youth Mental Health Supports	8%	44%	56%	0%	12%	59%	18%	12%
Toolbox Curriculum	8%	57%	43%	0%	20%	53%	13%	13%
Conscious Discipline	7%	62%	38%	0%	14%	57%	14%	14%
Why Try	6%	30%	50%	20%	18%	36%	27%	18%
7 Mindsets	4%	43%	57%	0%	29%	43%	0%	29%
Advocacy Time	4%	43%	29%	29%	14%	43%	29%	14%
Core Essential Values	4%	33%	50%	17%	0%	100%	0%	0%

	Percentage using program	Not state funded	State funded, with additional sources	State funding dedicated to behavioral health	No assessment	Informal progress monitoring	Component of school improvement plan/data	Program-specific data
Check and Connect	3%	86%	14%	0%	14%	29%	29%	29%
Recognizing, Understanding, Labeling, Expressing, and Regulating (RULER) Program	1%	50%	50%	0%	50%	0%	0%	50%
Ambitions of Idaho	0% ¹²				0%	100%	0%	0%
Project Wisdom	0% ¹²	100%	0%	0%	0%	0%	0%	100%
Minds Up	0% ¹²							
PAX Good Behavior Game	0% ¹²							

¹² Number of respondents rounded to 0%.