ROADMAP FOR
School Mental Health
Improvement

Roadmap for
School Mental Health Improvement

Developed by

Liz Krubsack, MS, LPC
School Mental Health Consultant

Julie Incitti, MSW, CASPW
School Social Work Consultant

Jessica Frain, MSW
School Mental Health Consultant

WISCONSIN
DEPARTMENT OF
**Public
Instruction**

Wisconsin Department of Public Instruction
Jill K. Underly, PhD, State Superintendent
Madison, Wisconsin

Table of Contents

Note: Words or phrases **in bold** are defined in the Glossary at the end of the document.

Introduction to the Roadmap

The Wisconsin School Mental Health Framework provides a vision for building more equitable, comprehensive, and integrated systems to promote well-being in schools. Regardless of a school or district's current mental health infrastructure, school leaders can use a systematic change process to identify entry points to build a more **Comprehensive School Mental Health System.**
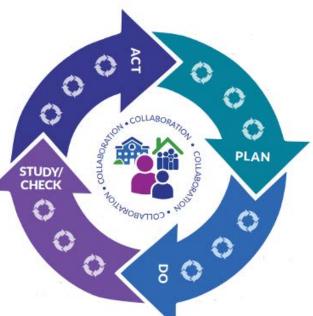
The Roadmap for School Mental Health Improvement is informed by the Center for Disease Control (CDC 2021) Community Change Process. It outlines five steps to engage in quality improvement:

- **Commitment**

- **Assessment**

- **Planning**

- **Implementation**

- **Reflection**

The Roadmap uses the principles of improvement science to move teams forward in their efforts to build more comprehensive systems. **Improvement science** is an approach to solving problems that focuses on learning by doing. It guides the development and fine-tuning of tools, processes, roles, and relationships (Carnegie Foundation 2023) and uses rapid-cycle testing in real settings to better understand what changes can be made to a system to improve it (Shakman 2020).

Improvement science is an approach to solving problems that focuses on learning by doing.

Rapid cycle testing involves implementing **Plan, Do, Study, Act (PDSA) cycles** in quick succession. A PDSA cycle is a way to organize work and make steady progress towards goals. A PDSA, or test, involves making a small change to day-to-day processes or procedures while observing the impacts in the real world. In other words, PDSA cycles help teams quickly move from ideas about how to improve the mental health system to action. When schools engage in multiple, iterative PDSA cycles over time, they are engaging in **continuous improvement**. When these iterative cycles increase the capacity of the school to produce successful outcomes reliably for different sub-groups of students in varied contexts, they are engaging in **quality improvement** (Carnegie Foundation 2023). This improvement framework helps bridge the gap between research and knowing what best practices are in school mental health, and being able to overcome local challenges when trying to implement an initiative.

Improvement science is helping the field of education to overcome a long history of selecting new initiatives and moving to fully implement them without thoroughly understanding the problem or learning about how a potential solution will work in a specific context, for their particular implementers. Unfortunately, this has led to initiatives that do not meet their goals, so a new one is selected and the cycle continues (Byrk et al. 2015). Improvement science offers a way to interrupt this pattern by instead rapidly learning about how to best implement a program or a process, in the actual setting where it will occur and with the people who will be implementing it. Through this process, unanticipated challenges may come to light, and as a result, adjustments can be made so implementation shifts with each iterative test.

Improvement science also offers an opportunity to examine and change the aspects of systems that lead to inequitable outcomes when improvers intentionally embed equity in their improvement work. The process of articulating theories, testing them, and realizing they are wrong or not producing the intended outcome promtoes "real time" learning, practice-based evidence, and an opportunity to interrupt assumptions and biases about what "will" work. This type of improvement for equity requires teams to continually be cognizant of who is involved in the improvement work and what the impact of the improvements are on students and caregivers (Hinnant-Crawford 2020). The roadmap steps in this document contain ideas on how to center equity throughout the improvement process.

Stages in the Roadmap for Improvement

The remaining sections in the document detail each stage in the improvement process. Within each step is a checklist of corresponding best practices. It is important to note that schools or districts may not need to check each box in the process, and some steps may occur simultaneously; how a team moves through this process is dependent upon resources, existing structures, supports, and priorities. This Roadmap is meant to guide a cyclical, multi-year change process, focusing on the small steps that lead to big improvements.

Commitment

Comprehensive School Mental Health Systems rely on a shared commitment across key shareholders, such as school and district staff, community partners, Out-of-School Time providers, students, and families. Each shareholder group plays a unique role in the process of improving school mental health systems, with different levels of commitment and types of collaboration. The commitment step includes assembling a representative team and establishing partnerships with key school and community shareholders. "Coalitions and partnerships give participants ownership of the process and a ready pool of fiscal and human resources to support policy, systems, and environmental change strategies." (CDC 2021)

Regardless of their role, all shareholders make a shared commitment to increasing **mental health literacy**, decreasing **mental health stigma**, and working to change aspects of school and other systems that create inequities and act as barriers to well-being. This shared commitment to systems change, based on an accurate understanding of mental health and the social influencers of health, is the backbone of future improvement work. It also may become the focus of future improvement cycles, as teams explore ways to increase commitment to promoting mental health in their community.

> A shared commitment to systems change, based on an accurate understanding of mental health, is the backbone of future improvement work.

Commitment Summary Checklist:

- **Build support from stakeholders:** identify champions in the school and community that recognize student and school staff mental health as central to a healthy community. Champions reflect the demographics of the community and include students and caregivers.

- **Assemble a representative team or coalition:** Gather a group that will address key issues and establish partnerships with key community stakeholders.

- **Increase mental health literacy in the school-community:** Assess shareholder mental health literacy and utilize training resources to ensure that all shareholders have an accurate, shared understanding of mental health and the impacts of marginalization and trauma on mental health.

- **Establish and communicate a shared mission and vision:** Anchor all improvement work in a shared mission and vision of wellbeing for all students and staff that approaches mental health as an asset.

EQUITY CHECK ✓

Throughout the commitment step, teams should consider:

- ☐ Are we talking about mental health in a way that is strengths-based, decreases stigma, and empowers those who have experienced mental health challenges?

- ☐ Do champions, coalitions, and planning teams represent the diversity of thought needed to develop the best improvements? Whose voice is missing?

- ☐ Will accomplishing our articulated mission and vision related to well-being lead to more equitable outcomes? (Hinnant-Crawford 2020)

Assessment

Comprehensive School Mental Health Systems are shaped by the strengths and needs of students, staff, families, the community, and the local context. The assessment process is an opportunity to better understand what the community needs, and allows for the community's voice to be heard. Strategies used by schools to make improvements to their mental health systems must reflect the needs of the community to have the intended impact (CDC 2021).

System assessment is a process of evaluating the quality of the current mental health services and supports provided in a school. When teams have a clear understanding of the needs of the school community, with specific attention to historically marginalized groups, they can compare those needs to the current strengths and gaps in the school mental health system. Before engaging in assessment, schools should consider what data they currently have, where there may be gaps in understanding, and what methods of assessments may be helpful in moving forward in the improvement process. Not all schools will need to complete all of the suggested assessment activities.

Assessment Summary Checklist:

- **Gather existing data:** Identify existing process and outcome data that can provide a full picture of the mental health landscape and that center student and family voice.

- **Identify gaps:** Identify what the team does not know and how they might gain that information

- **Engage in System Assessment:** This could include assessment activities such as;

    – gathering input on the needs and resources of the community, and

    – assessing the quality of the mental health system components using a tool such as the School Mental Health Quality Assessment (SMHQA) or the trauma sensitivity with theTrauma Responsive Schools Implementation Assessment (TRS-IA) housed in the School Health Assessment and Performance Evaluation (SHAPE).

EQUITY CHECK ✓

Throughout the assessment step, teams should consider:

- ☐ Whose voices do we need at the table to have a clear understand of the system producing our current outcomes? (Hinnant-Crawford 2020)

- ☐ How can we disaggregate our data to better understand what is working and for whom?

- ☐ How are we collecting and considering data this is strengths-based and highlights the assets of students, staff, caregivers, and the community?

Planning

During the planning stage, teams interpret needs assessment and system assessment data to better understand areas of strength and need within the school mental health system to identify a problem, develop improvement goals, and identify possible changes that will lead to improvement. The planning process will help teams to answer three essential improvement questions (Langley 2009):

1. What are we trying to accomplish?

2. What change might we introduce and why?

3. How will we know a change is an improvement?

To answer the first question, "what are we trying to accomplish" or put another way "what is the exact problem we are trying to solve?" teams can utilize strategies, such as **root cause analysis** and **empathy interviews**, to fully understand the problem and the system that maintains it. Together, these strategies help teams to avoid **solutionitis**, or the tendency to jump to solutions before thoroughly understanding the problem (Byrk et al. 2015). These strategies can also help teams remain user-centered and see the system from the perspective of the user (students, families, etc.) (Bennett et al. 2022). To be truly user-centered, teams should be cognizant of deficit ideology that labels those closest to the problem as the problem. Instead, teams employ an asset-based lens and approach those closest to the problem not just as a source of information about the problem, but as central to generating helpful solutions. (Hinnant-Crawford 2020)

To answer the second question, "what change might we introduce and why," teams develop a **theory of improvement**. A theory of improvement is a team's hypothesis about why and how a particular change will lead to improvement, and considers the local system creating the problem, the expertise of people on the ground who will implement the change, and theory and research about the problem (Hinnant-Crawford 2020). It includes an **aim, drivers** (parts of a system that influence the aim), and **change ideas** that provide tangible, specific ideas on what needs to change day-to-day to accomplish the aim (Benet and Provost 2015). In short, a theory of improvement is a hypothesis that the team will test and adjust throughout their improvement journey.

A theory of improvement is a team's hypothesis about why and how a particular change will lead to improvement.

To answer the last question, "how will we know the change is an improvement," teams must translate their theory of improvement into something measurable. Measurement for improvement, or **practical measurement**, is embedded into day-to-day routines and helps improvement teams understand how changes they are making are impacting the system. These data are collected frequently and analyzed soon after collecting so they can inform changes along the way and keep the team moving towards its aim (Hinnant-Crawford 2020). These measures should not only focus on outcomes, but also provide information on how something is being implemented, how a change is impacting the system, and if there are any unintended consequences of the change.

Once these three questions have been answered, teams create plans for testing their hypothesis using rapid **Plan, Do, Study, Act (PDSA) cycles** to make small changes to everyday programs, practices, policies, or procedures and observe the impact. While it can be tempting to fully implement a new program or practice from the beginning, there can be large consequences if that implementation fails. Instead, teams test small changes to (Institute for Healthcare Improvement 2023):

- decrease resistance and increase buy-in,

- decide if the change will work in the actual environment,

- evaluate costs, social impact, and unintended consequences,

- increase confidence that the change is actually an improvement, and

- determine how much improvement can be expected from a change.

Planning Summary Checklist:

- **Identify a problem of practice:** Use information gathered in the assessment step to identify a problem of practice. Use strategies such as Root Cause Analysis and Empathy Interviews to fully understand the problem.

- **Develop a theory of improvement:** Articulate an aim, drivers, and change ideas using a driver diagram.

- **Identify measures:** The measurement plan should include data that help the team understand how the changes are being implemented, the impact on the system, and student outcomes.

- **Select a change idea**: As a team, decide on one primary/secondary driver of focus and select a change idea to test.

- **Plan a test of change (PDSA cycle):** Determine a method for testing the change idea. Testing a change requires the team to make an actual change to day to day programs, practices, policies, or procedures and observe the impact. Assign roles and tasks, document the plan, and observe results.

EQUITY CHECK ✓

Throughout the planning step, teams should consider:

Whose voices have we included as we defined our problem of practice? Whose voices have we left out?

Will addressing this problem of practice lead to greater opportunities to learn for all students? For traditionally marginalized or underserved students?

Are our identified root causes based on deficit understandings of the populations we serve?

Are we approaching this problem with **systems thinking**, or considering how our school or district's policies, practices, procedures, priorities, and personnel contribute to the problem, intentionally or unintentionally??

Whose knowledge is reflected in our theory of improvement? Are some stakeholders' knowledge privileged above others? Whose knowledge is absent? (Hinnant-Crawford 2020)

Implementation

In the implementation step, teams execute the chosen change idea in collaboration with shareholders in order to test their hypothesis or theory of improvement . Teams implement PDSA cycles to test small changes and monitor the impact of the changes being made with data collection. The PDSA process provides teams the opportunity to observe the impact of changes in real-time, identify unintended consequences, and decide whether or not the change has moved the system closer to its goals (Langley et al. 2009). During this step, the commitment and ownership established previously can be leveraged in the PDSA process (CDC 2021).

After each test, teams will decide whether to adapt, adopt, or abandon the change. With each iterative test, teams should test the change in more conditions, with more people, until they are confident that they have worked out any potential issues. Teams should not adopt and implement a change widely until it has been tested with multiple PDSA cycles. As teams work to change the system, the collective understanding of the system will deepen; the implementation stage is learning by doing.
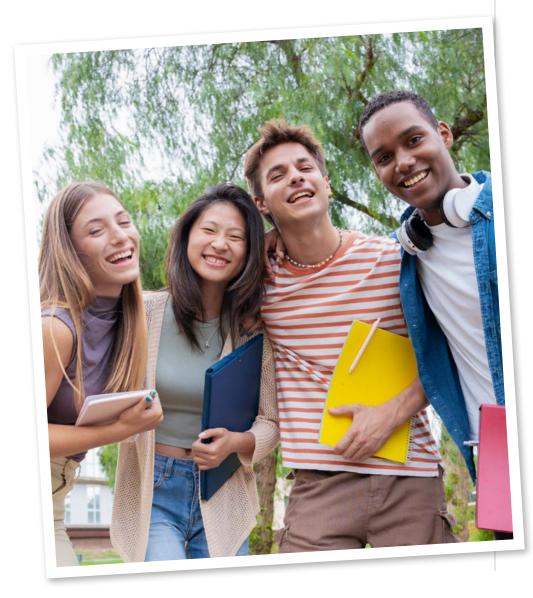
Implementation Summary Checklist:

- **Implement a change idea:** Perform a PDSA cycle by testing the team's chosen change idea, observing the impacts of the test, and documenting the results.

- **Study the results:** After each cycle, consider whether to abandon, adapt, or fully adopt the change based on the observed impact of the test.

- **Incorporate learning:** Update driver diagrams, root cause analysis tools, system maps, etc. to reflect new learning.

- **Run more tests:** Continue to implement PDSA cycles until the team's confidence in the change has increased and the change has been tested in a variety of conditions.

- **Scale up:** Integrate successful changes into school or district processes and make a plan to evaluate the changes over time. Plan for professional development, which supports the integration of system improvements.

The implementation stage is learning by doing.

EQUITY CHECK ✓

Throughout the implementation step, teams should consider:

☐ How has the PDSA process been communicated to those involved in testing changes?

☐ Is our documentation in the "do" phase reflective of everyone involved in the change? Whose voices are missing?

☐ Whose perspectives and suggestions were considered in deciding next steps in the "act" phase? Whose were overlooked or ignored? (Hinnant-Crawford 2020)

Reflection

Reflection includes intentionally gathering and considering lessons learned throughout the improvement process to understand how the changes have moved the team towards its goal and to inform future planning. Although reflection is listed at the end of this cyclical process, it should be incorporated from the beginning and throughout all phases. Reflection can help teams answer key questions such as: Are we implementing the right strategies? Are we creating the measurable impact envisioned? (CDC 2021)

Reflection also provides an opportunity to celebrate successes and inform key shareholders of the progress being made and its impact on school and district goals. Communicating these successes with key partners and decision makers ensures engagement and support throughout the change process.

Reflection Summary Checklist:

- **Evaluate data:** Evaluate both implementation and impact data to determine the extent to which the improvement cycles have met established goals. When evaluating these data, consider unintended consequences and impacts on historically marginalized communities.

- **Plan for sustainability:** Anticipate policies, practices, and resources needed to sustain changes as more staff members participate, turnover occurs, and improvement cycles continue.

- **Celebrate:** Take time to celebrate successes, appreciate champions, and communicate improvements to shareholders.

EQUITY CHECK ✓

Throughout the reflection step, teams should consider:

☐ Are the improvements we are making producing similar outcomes across student groups? Schools? The district?

☐ Who has been impacted by our improvement work? How ?

☐ How have we communicated improvement work to shareholders? (Hinnant-Crawford 2020)

Reflection provides an opportunity to celebrate successes and inform key shareholders of the progress being made.

Need Help?

Check out DPI's Roadmap for [School Mental Health Improvement webpage](#) for tools, examples, and microlearning opportunities.

Glossary

Comprehensive School Mental Health System: "Comprehensive school mental health systems provide an array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness. These systems are built on a strong foundation of district and school professionals, including administrators, educators and specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses and other school health professionals), all in strategic partnership with students and families, as well as community health and mental health partners. These systems also assess and address the social and environmental factors that impact mental health, including public policies and social norms that shape mental health outcomes." (Hoover et. al, 2019)

Improvement Science: approach to solving problems that focuses on learning by doing. It guides the development and fine-tuning of tools, processes, roles, and relationships (Carnegie Foundation 2023) and uses rapid-cycle testing in real settings to better understand what changes can be made to a system to improve it (Shakman 2020).

Plan, Do, Study, Act Cycle: "An improvement cycle that uses a process to make quick, incremental improvements to a program or practice. They can be used to test the feasibility and impact of a new way of work prior to attempting to use it more broadly." (SISEP 2015)

- **Plan**: Identify a change idea,make predictions about what will happen and why, determine a plan for testing the change and documenting its impact.

- **Do :** Carry out the test on a small scale, and document unexpected outcomes, problems, and general observations.

- **Study:** Set aside time to study results, analyze data, compare observations to predictions, create a summary of what was learned, and reflect on learning.

- **Act:** Use what was learned to make changes to the test, and decide to abandon (go back to planning), adapt (modify and try again), or adopt (scale up and standardize); Repeat the cycle. (SISEP 2021)

Continuous Improvement: "An ongoing effort to improve a framework, process, program, and innovation and requires an organizational commitment to continual learning, self-reflection, adaptation, and growth." (DPI 2020)

Quality Improvement: "An effort to increase the capacity of an organization to produce successful outcomes reliably for different sub-groups of students, being educated by different teachers and in varied organizational contexts." (Carnegie 2023)

Mental Health Literacy: "Knowledge and beliefs about mental disorders which aid their recognition, management or prevention, including: (a) the ability to recognize specific disorders (b) knowledge and beliefs about risk factors and causes; (c) knowledge and beliefs about self-help interventions; (d) knowledge and beliefs about professional help available; (e) attitudes which facilitate recognition and appropriate help-seeking; and (f) knowledge of how to seek mental health information." (Jorm 1997)

Mental Health Stigma: "Negative social attitude attached to a characteristic of an individual that may be regarded as a mental, physical, or social deficiency. A stigma implies social disapproval and can lead unfairly to discrimination against and exclusion of the individual." (APA 2020)

Root Cause Analysis: A tool used to clearly define problems of practice. Root cause analysis helps teams answer the first improvement science question, "what is the exact problem I am trying to solve?" by helping teams determine what is truly the cause of the problem. (Hinnant-Crawford 2020).

Systems Thinking: Considering how an organization's policies, procedures, practices, priorities, and personnel are contributing to a problem of practice so that appropriate solutions can be generated. (Hinnant-Crawford 2020)

Solutionitis: "The tendency to jump quickly on a solution before fully understanding the actual problem to be solved. This behavior results in incomplete analysis of the problem to be addressed and fuller consideration of potential problem-solving alternatives. It is siloed reasoning - seeing complex matters through a narrow-angle lens - that can lure leaders into unproductive strategies." (Byrk et. al, 2015)

Theory of Improvement: "A small interrelated set of hypotheses about key drivers necessary for achieving an improvement aim and specific changes associated with each driver. It requires a creative blending of observations arising from the causal system analysis with relevant research that bears on this problem together with wise judgments from expert educators." (Carnegie 2023)

Aim: A goal for an improvement effort that answers the question What are we trying to accomplish? Improvement aims should clearly specify how much, for whom, and by when? (Carnegie 2023)

Primary Driver: "Representation of a community's hypothesis about the main areas of influence necessary to advance the improvement aim." (Byrk et. al, 2015)

Secondary Driver: A smaller system component that is hypothesized to impact the primary driver (Byrk et.al, 2015).

Driver Diagram: "A tool that visually represents a group's working theory of practice improvement. The driver diagram creates a common language and coordinates the effort among the many different individuals joined together in solving a shared problem." (Byrk et. al, 2015)

Fishbone Diagram: "A tool that visually represents a group's causal systems analysis (sometimes known as a cause-and-effect diagram or an Ishikawa diagram."

Change Ideas: An alteration to a system or process that is to be tested through a PDSA cycle to examine its efficacy in improving some driver(s) in working theory of improvement. (Carnegie 2023) A change idea should be:

- directly linked to the goal,
- feasible,
- able to make a large impact ,
- tested with short test cycles (within a two-week time frame),
- able to be tested on a small scale (involves one or two people to start),
- reflect the needs of the community, and
- tested with multiple test cycles.

Practical Measurement: "Data to inform improvement that is embedded in regular work. Since the intent is to inform continuous improvement, practical measures are collected frequently to assess whether positive changes are in fact occurring. Since the focus is on specific populations and contexts, the measures are framed in a language natural and comprehensible to those asked to answer them." (Carnegie 2023)

Empathy Interviews: "Empathy interviews are a qualitative data collection technique that helps practitioners understand the perspectives of different stakeholders. They can be used during problem definition, as a part of seeing the system, or as a method to document implementation within the PDSA cycle." (Hinnant-Crawford 2020)

References

American Psychological Association (APA). 2020. "APA Dictionary of Psychology." https://dictionary.apa.org/.

Bennet, B., Provost, L. 2015. *What's Your theory?* Quality Progress, 48(7), 36.

Bryk, A. S., Gomez, L. M., Grunow, A., & LeMahieu, P. G. 2015. *Learning to Improve: How America's Schools Can Get Better at Getting Better*. Cambridge, MA: Harvard Education Press.

Carnegie Foundation for the Advancement of Teaching. 2023. "Learning to Improve Glossary." https://www.carnegiefoundation.org/resources/learning-to-improve-glossary/.

Center for Disease Control (CDC). 2021. "Community Change Process and The Change Tool." https://www.cdc.gov/nccdphp/dnpao/state-local-programs/change-tool/community-change-process.html.

Hoover, S., Lever, N., Sachdev, N., Bravo, N., Schlitt, J., Acosta Price, O., Sheriff, L. & Cashman, J. 2019. "Advancing Comprehensive School Mental Health: Guidance From the Field." Baltimore, MD: National Center for School Mental Health. University of Maryland School of Medicine. http://www.schoolmentalhealth.org/AdvancingCSMHS.

Hinnant-Crawford, B. N. 2020. *Improvement Science in Education.* Myers Education Press.

Institute for Healthcare Improvement. 2023. "Science of Improvement: Testing Changes." https://www.ihi.org/resources/Pages/HowtoImprove/ScienceofImprovementTestingChanges.aspx.

Langley, Gerald J., Ronald D. Moen, Kevin M. Nolan, Thomas W. Nolan, Clifford L. Norman, and Lloyd P. Provost. 2009. *The Improvement Guide.* 2nd ed. Chichester, England: Jossey Bass Wiley.

Shakman, K., Wogan, D., Rodriguez, S., Boyce, J., & Shaver, D. 2020. *Continuous improvement in education: A toolkit for schools and districts.* Washington, DC: U.S. Department of Education, Institute of Education Sciences, National Center for Education Evaluation and Regional Assistance, Regional Educational Laboratory Northeast & Islands. https://ies.ed.gov/ncee/edlabs.

State Implementation & Scaling-up of Evidence-based Practices Center (SISEP) and The National Implementation Research Network (NIRN). 2015. "Handout 14: Improvement Cycles." https://nirn.fpg.unc.edu/sites/nirn.fpg. unc.edu/files/resources/Handout%2014%20 Improvement%20Cycles.docx. pdf.

State Implementation and Scaling-up of Evidence-based Practices. 2021. "The PDSA Cycle." https://implementation.fpg.unc.edu/resource/lesson-the-pdsa-cycle/

Wisconsin Department of Public Instruction (DPI). 2020. Continuous Improvement Process. Version 1.2. https://dpi.wi.gov/sites/default/files/ imce/continuous-improvement/pdf/CIP_rubric_draft.pdf