



Positive Behavior Intervention and Support and Comprehensive School and Community Treatment Process Document

Site Name _____ Date: _____

Directions: Evaluate your school's engagement in the PBIS/CSCT process by having a School-wide Evaluation Tool (SET) conducted, **OR** submit the required documentation as listed in Method of Documentation.

	<p align="center">Site Can Document</p>	<p align="center">Method of Documentation</p> <p>Site can elect to have a School-wide Evaluation Tool (SET) conducted to document their PBIS process, OR submit the following documentation for each PBIS requirement. CSCT data must be submitted as requested in Method of Documentation.</p>
	<p>Evidence-Based Practices:</p> <ul style="list-style-type: none"> • Universal expectations in place (PBIS) • Universal expectations taught with fidelity (PBIS) • Reinforcement/reward system (PBIS) • CSCT personnel in building are providing cross mental health training with school staff • CSCT staff are given the opportunity to train school staff during in-service days at least once/year • School administrators are informed of school's responsibilities as mental health/Medicaid providers (CSCT) • Schools understand Medicaid billing and documentation requirements (CSCT) • School administrator actively participates in writing annual reports on effectiveness of CSCT • School has received notification of CSCT rules about PBIS requirements from Licensed Mental Health Centers 	<ul style="list-style-type: none"> • Written description of 3-5 universal behavior expectations • Documentation that lessons are taught throughout the year (calendar, teaching schedule, minutes, or agendas) • Written description of reinforcement system AND example of reinforcement/reward "ticket" • Meeting minutes/agenda • Meeting minutes/agendas • Training/workshop agenda or meeting minutes • Submit date and location biller attended Xerox provider training • Submit annual report to DPPHS • Copy of notification

<p>PBIS School-wide Team is in Place</p> <ul style="list-style-type: none"> • There is a PBIS school-wide team and identified team facilitator • Administrator attends PBIS team meetings regularly • PBIS team meets regularly (at least monthly) • Licensed <i>Mental Health Centers</i> are communicating with school administrators about the teaming and referral process (CSCT) • The "referral team" i(Tier 2/3 team) includes a CSCT therapist, a school administrator, and a school counselor • The "referral team" (Tier 2/3 team) considers all referrals to mental health services, not just CSCT • Teachers are included in treatment team planning as deemed appropriate by the youth and families served (CSCT) 	<ul style="list-style-type: none"> • Submit roster of team members and name of identified team facilitator • Submit PBIS team meeting minutes with attendees identified • Submit schedule of PBIS team meetings or team meeting minutes • Submit minutes documenting communication • Submit "referral team" roster with team member job positions identified • Submit documentation evidencing non-CSCT referrals • Submit team meeting minutes with attendees and positions identified
<p>Data-based Decision Making</p> <ul style="list-style-type: none"> • Problem-solving process model is utilized for problem-solving and decision-making • Data collection system is in place for recording behavioral data 	<ul style="list-style-type: none"> • Submit description of problem-solving model • Name of or written description of data collection system