

Skills for Success

Implementation Plan



Real Solutions for Education

Seeking Engagement with High Risk Students

- **High risk students exhibiting:**
 - Anxiety
 - Depression
 - Aggression
- **Long term goal is developing:**
 - Interest
 - Motivation
 - Participation
- **Immediate concerns are:**
 - Support
 - Containment
 - Focus

Support

Relationship building that is designed to build trust and create safety for the student. The ideal is having a dialog that is personal, individualized, based on the child's experience and ability, supports the student becoming a learner, and would make emotional connections with the student.

Containment

Is provided by the adults to create safety. This is both physical safety for the student as well as creating the feeling of being safe for the student

Focus

Learning interaction leading to involvement in activities other than the student's internal preoccupation with their locus of control. Ideally the activity would have an emotional connection for the student, the learning process, and with others the students is engaged with.

Skills for Success Implementation Plan
North Albany Middle School

Program Description: The goal of the SFS program is to identify and provide early intervention to students who demonstrate a lack of skills in self-responsibility causing them to act out in ways that interfere with their academic and social development in school. Approximately 5% of students in a school will fit the SFS profile.

1. **Explain the Program to the Staff:** Using a faculty meeting as a medium, teachers learn about the components of the program. To be optimally effective, significant groundwork would have already been done through the school's student management system so good behavior is the norm, and discipline referrals are already minimized.
2. **Student Identification Form:** Teachers, administrators and the counselor nominate students for intervention using the Student Identification Form. Other sources of data used to determine if the student is appropriate for the program are discipline referrals, academic and citizenship grades, and anecdotal evidence.
3. **SFS Team:** Teachers and staff familiar with selected students will provide a team approach to the program implementation. Parents will be involved once the identification is made, or may be included in the identification process. Outside resources to include on the team may include personnel from the ESD, FACT, counseling, and other appropriate adults.
4. **Parent Survey:** Using the SFS Parent Survey, selected Team adults interview the parents and involved guardians to understand the conditions that exist in the child's home and community.
5. **Student Survey:** Using the SFS Student Survey, selected Team adults interview the student to gain a greater understanding of strengths and needs of the student, as well as the conditions present when the student has problems.
6. **Piers-Harris 2: The Way I Feel About Myself:** The student takes a self-revealing inventory to further provide helpful information to the process. This is auto-scored and is done by a Team member.
7. **Functional Behavioral Assessment:** The FBA can be done in a variety of formats and would be constructed by the Team using input gathered through the survey, teachers, and parents. Depending on the student, this may already be available.

8. **Staffing:** Teachers will be given pertinent information to work effectively with the SFS students. Plans will be constructed to address strategies to use given the FBA. In addition, teachers will agree about where the student will be go in agreed-upon situations, including repeated misbehaviors despite appropriate interventions, serious misconduct, or when the child's state of mind makes them unavailable for learning.
9. **Skills Training:** SFS students will need skills training and this can be done in a variety of manners, from actual sessions with trained staff to cue cards to prompt social skill routines.
10. **Mentoring:** Each SFS student will choose an adult mentor. The mentoring program is run by the counselor and includes identifying four targeted areas depending on the student's skill deficiencies. After receiving their check-in sheet from the mentor each morning, the student collects yes or no indicators from all teachers and turns the form in to the mentor at the end of the day. Earning points in this manner allows the student to collect rewards or receive consequences. The mentor provides connection for the child and would be asked to call the child at home when absent, send birthday and holiday cards, and send summer postcards. The school has a budget for this through grants.
11. **Personal Education Plan:** For some students, a PEP will be created to remove ambiguity from the expected consequences for misbehaviors. The school's system of consequences leaves a significant amount of room for the adults involved to give consequences based on their judgment. For SFS students, predictability is key.
12. **School Conduct Training:** All students in the school are instructed in conduct expectations. SFS students may have sessions intermittently to further reinforce these.
13. **Restriction of Movement:** While the SFS student is working to increase skills, plans may be enacted to restrict movement. This may include limiting or removing free time, escorting to classes, and otherwise decreasing opportunities to be in unstructured areas.
14. **Extra Incentives:** Students who make significant progress through SFS intervention will receive extra rewards. These will be determined when the counselor meets with the student to set up the mentoring plan.
15. **Review, Reteach, Revise:** The Team will monitor the progress of the student and provide consistent feedback to the student, parents, and staff. Revisions as needed will be made.

Skills for Success Program Student Nomination Form

Name of Student: _____

Date: _____

Referring Staff: _____

Mark the box that best describes how the student being referred behaves in the classroom and common areas.

0 = Never
1 = Rarely
2 = Sometimes
3 = Frequently

0 = Never
1 = Rarely
2 = Sometimes
3 = Frequently

I. Study Skills

0 1 2 3

0 1 2 3

1. Exhibits poor academic achievement					4. Refuses to complete work				
2. Unable to complete assigned tasks on time					5. Does not attend class				
3. Behaves inappropriately when corrected					6. Unable to concentrate or pay attention				

II. Social Skills

0 1 2 3

0 1 2 3

1. Uncooperative with peers					4. Fails to ask for help when needed				
2. Gains peer attention inappropriately					5. Teased, neglected or avoided by peers				
3. Does not use problem solving and anger management skills					6. Painfully shy				

III. School Discipline Concerns

0 1 2 3

0 1 2 3

1. Disruptive in class					6. Associates with peers who get into trouble				
2. Responds impulsively to problem situations					7. Emulates gang talk or behaviors				
3. Lies to get out of trouble or cause problems					8. Doesn't seem to feel guilty after misbehaving				
4. Bullies or threatens others					9. Deliberately annoys people				
5. Uses, or talks about using, violence or weapons					10. Is a victim of violence or aggression				

IV. Health & Safety Concerns

0 1 2 3

0 1 2 3

1. Set, or talks about setting, fires					9. Shows inappropriate sexual knowledge or behavior				
2. Destroys property or engages in vandalism					10. Noticeable weight gain or loss				
3. Physically aggressive with peers					11. Engages in self-abusive behaviors (biting, cutting, head-banging, etc)				
4. Physically aggressive with adults					12. Runs away from class or school				
5. Has used or possessed alcohol or drugs					13. Worries or is anxious				
6. Exhibits obsessive-compulsive behaviors					14. Feels s/he has to be perfect				
7. Takes others' belongings without permission					15. Unhappy, sad or depressed				
8. Displays inappropriate affect (laughs when expected to be sad, etc)					16. Complains of pain or sickness without obvious cause				

Date: _____

Day: M TU W TH F

Student: _____

Mentor: _____

Teacher: Please use ink, sign your name and give to student.

Class	Stayed on Task	Filled in Planner	Turned in All Work	Missing Work or Reports Sent Home	Teacher Signature
Morning Check In	YES NO				
1st Science	YES NO	YES NO	YES NO YES NO		
2nd Math	YES NO	YES NO	YES NO YES NO		
3rd Health	YES NO	YES NO	YES NO YES NO		
4th Computer	YES NO	YES NO	YES NO YES NO		
5th Learning Ctr	YES NO	YES NO	YES NO YES NO		
6th Literature	YES NO	YES NO	YES NO YES NO		
7th Math	YES NO	YES NO	YES NO YES NO		
Afternoon Check	YES NO				

23 POINTS POSSIBLE DAILY

TOTAL POINTS:

Level 4..... 19-23 Points = All Privileges and Special Reinforcers

Level 3..... 15-18 Points = Lunch Detention

Level 2..... 11-14 Points = Full Day In-School Suspension

Level 1..... 1-10 Points = Saturday School

Level 0..... Totally inappropriate behavior, verbal or physical. Out-of-School Suspension and Discipline Referral. At discretion of administration.

Please keep parents informed of missing work and assignments due. Please send progress reports regularly.

Student Functional Behavior Assessment Questionnaire

Instructions:

“I work with many kids who are capable learners but who need to improve on something in school. These questions will help us find the best ways to help you get on track and be the best student you can be. OK? Any questions before we start?”

1. What do you enjoy doing most in your life?
2. What are you good at?
3. What things in school do you feel best about?
4. Who are the people in school who like you and want you to do well?
5. Who do you think sometimes doesn't like you or care if you do well?
6. Who in school can you tell if something's not OK in your life?
7. What would you like to improve in school?
8. What do you think your teacher(s) would like you to improve?
9. What do you mostly get in trouble for?
10. Where are you when you get in the most trouble?
11. What is your class doing when you get in trouble in class?
12. What does your teacher want all kids to be doing at that time?
13. What do you do if you don't know what to do?
14. What makes it difficult for you to do that?
15. What are you doing when you're in trouble?
16. What are you thinking or saying inside to yourself before you get in trouble?
17. What are you feeling inside then?
18. What happens after you make that choice?
19. What do you wish would happen?
20. What do you wish your teacher or other adult would do at that time?

21. What do you wish you would do?
22. What would be one thing you could do to make it better?
23. What gets in your way of doing it?
24. What would help you to make that choice?
25. What of all things bothers you the most in class/ school?
26. What helps you most in your out of school home life?
27. What do you wish would happen from home that would help you make good choices in school?
28. Does something happen in your out of school life that makes it easier to do well in school? Harder?
29. Has something happened recently that gets in your way?

Thank you for the valuable information. I will talk with your teacher(s) and we will work on ways to use your answers to help you be the good learner we know you can be.

Parent Centered Guided Functional Behavior Assessment Questionnaire

This questionnaire is intended to assist us in understanding and addressing the learning needs of your child. Only answer what you are comfortable with, however, the more accurate information we share, the more effective a plan can be made to assist him/her in school.

1. What does he/she most like to do?
2. What is he/she best at?
3. What activities do you share with your child?
4. How much time do you get to spend together doing what he/she likes?
5. How much time do you spend together on homework?
6. What is your child's general health?
7. What other health needs are there in the family?
8. What subjects in school does your child like?
9. What subject is she/he good in?
10. What subjects do he/she struggle with most?
11. What are you most concerned about in her/his school life?
12. What is your understanding of the school's concern about your child?
13. Do you see the same problem at home?
14. What are the behaviors you see at home?
15. Where, with whom and when does the problem occur?
16. What happens after?
17. Have you sought or been offered help through private or public agencies for this or other problems?
18. How do you handle it?

“What follows is a brief developmental history:”

19. Were there complications of pregnancy or birth

20. Was mother's health OK? Illness, medications?

21. Were there drugs or alcohol used during pregnancy?

22. Did anyone express concern about the use of substances during pregnancy?

23. Is there a drug or alcohol issue adults struggle with currently?

24. Was your child healthy and normal?

25. Did any MD or other adult express concern about your child's development in physical, motor, sensory, language or behavior areas?

26. Does any blood relative suffer from learning problems?

27. How able was he/she to focus, sit on a lap, sleep, and stay with a task?

28. What was his/her school, preschool experience like?

29. Did staff express concerns to you?

30. What would you like to see your child be able to do at this time in school?

31. What would you like the school to do in considering your child's needs?

Thank you for the valuable information. Please call if you think of something else. We will be getting back to you to get your input about what might be helpful to your child in school.