

# New Hampshire MTSS-B Fidelity Inventory (NH-MFI)

## District Module

School District/LEA:

Date completed:

Facilitator name:

Facilitator role:

### Instructions

The Behavioral Health Improvement Institute has made the NH-MFI freely available as part of the NH MTSS-B Toolkit. Do not alter the tool without their permission.

Please use the following citation in all references to the NH-MFI:

Phillips, M., Fauth, J. (2020). The New Hampshire MTSS-B Fidelity Inventory (NH-MFI). Behavioral Health Improvement Institute, Keene State College.

Download and save a copy of this form *before* completing the NH-MFI.

### Purpose

The NH MTSS-B Fidelity Inventory (NH-MFI) assesses the degree to which districts and schools are implementing the core features of the NH MTSS-B framework and helps district and school teams understand the relative strengths and weaknesses of their MTSS-B implementation. The NH-MFI District Module is one of four modules (District, Schoolwide/Tier 1, Tier 2/3, and Behavioral Health Integration) and is designed to measure the quality of your district-level implementation, including district-level leadership, support, and teaming structures. Scores should be used to support strategic/action planning, monitor progress, and gauge fidelity to the NH MTSS-B framework.

### Administration

The NH-MFI should be completed a minimum of once a year, during the district/school's typical planning time (e.g., just prior to the start of or after the close of the school year). In addition, the NH-MFI can be administered again mid-year to gauge ongoing implementation progress, if desired. Each module requires approximately 45 minutes to complete. A MTSS-B coach should facilitate administration, helping the team fully understand each item, reality-check their perceptions of implementation, and reach consensus on scoring.

Module	Team	Administration	Facilitator
District	<p><b>District-Community Leadership Team</b></p> <p>At minimum, this should include a district-level leader (Superintendent, Asst. Superintendent, and/or Dir. Student Services), administrators from each participating school, a teacher, a school behavioral health lead, a community-based mental health leader, a leader from other key child-serving organizations, and family and youth representatives.</p>	<p><b>Annually, during typical district/school planning time</b> to support annual strategic/action planning</p> <p><b>Optional: one additional administration mid-year</b> to gauge ongoing progress</p>	Internal or external MTSS-B coach

## Scoring

Each item on the NH-MFI describes a MTSS-B ideal/gold standard. The relevant team should work through the items one by one, in order. First, each team member – independently – considers the degree to which an item/gold standard is *currently* in place: not at all, a little, somewhat, mostly, or completely – and what evidence they could cite to support that rating. Then, team members share their individual ratings with the team along with an explanation of any evidence supporting those ratings. Especially with teams that are newer to the NH-MFI, the MTSS-B coach can then offer a score (e.g., that sounds like a “2”), inviting the team to agree or disagree and discusses any discrepancies – ultimately generating a single, agreed-upon consensus score for each item. As a general rule, teams should err on the side of being conservative in their scoring – if you’re not sure which response option fits best, or think reality falls right in between two possible response options, choose the lower one. See below for further guidance on what each response option represents in visual/symbolic and quantitative terms.

Response options	Symbol	Score	Percent implemented
Not at all in place	○	0	~0% in place
A little in place	◐	1	~25% in place
Somewhat in place	◑	2	~50% in place
Mostly in place	◒	3	~75% in place
Completely in place	●	4	~100% in place

## Sources and acknowledgements

Development of the NH-MFI was supported by the Office of Student and Educator Wellness, Bureau of Wellness and Nutrition, New Hampshire Department of Education; Midwest PBIS Network; Northeast PBIS Network; Institute on Disability, University of New Hampshire; and New Hampshire Center for Effective Behavioral Interventions and Supports, Southeastern Regional Education Service Center. The NH-MFI was inspired by and drew from the following tools:

- Algozzine, B., Barrett, S., Eber, L., George, H., Horner, R., Lewis, T., Putnam, B., Swain-Bradway, J., McIntosh, K., & Sugai, G (2019). *School-wide PBIS Tiered Fidelity Inventory*. OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports. Retrieved from: [www.pbis.org](http://www.pbis.org).
- Splett, J. W., Perales, K. & Weist, M. D. (2019). *Interconnected Systems Framework – Implementation Inventory (ISF-II), Version 3*. Unpublished instrument. Gainesville, FL: University of Florida. Retrieved from: <http://www.midwestpbis.org/interconnected-systems-framework/tools>
- Center on Positive Behavioral Interventions and Supports (2019). *Positive Behavioral Interventions and Supports District Systems Fidelity Inventory (DSFI) – Pilot version 0.1*. Eugene, OR: University of Oregon. Retrieved from: <https://www.pbis.org/resource/pbis-district-systems-fidelity-inventory-dsfi-pilot-version-v0-1>

## NH-MFI District Module

District Leadership and Support	○	◐	◑	◒	●
<p><b>D1 District buy-in</b></p> <p>District administrators are knowledgeable, engaged, and visible champions of MTSS-B. They place social-emotional and behavioral wellness at the center of a “whole student” vision of education and learning as articulated in the district vision/mission statement and/or strategic plan. Administrators regularly demonstrate understanding and support of MTSS-B in internal and external communications such as district publications, school board presentations, staff meetings, etc.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D2 District alignment and prioritization</b></p> <p>MTSS-B is included as a goal in the district’s 3- to 5-year long-range improvement plan and aligns with other district priorities and initiatives. Other district priorities and initiatives complement and augment rather than compete with or detract from MTSS-B (i.e., shared goals/outcomes and resources).</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D3 District fiscal support</b></p> <p>District administration prioritizes and fully resources MTSS-B in the district budget, including adequate funding for professional development, internal and external MTSS-B and behavioral health coaching, human resources, stipends for team participation and other implementation tasks, data systems, curricula, and other materials.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D4 District human resource support</b></p> <p>Staff recruitment and selection procedures such as position announcements, evaluative criteria, and hiring decisions prioritize MTSS-B knowledge, experience, and interest/buy-in. Job descriptions include sufficient dedicated time for MTSS-B-related roles, training, and duties.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D5 District technology and data</b></p> <p>The district acquires and effectively uses districtwide and other data platforms and technologies that enable strategic planning and data-based decision-making to support MTSS-B (e.g., School-wide Information System), including provision of necessary data entry training, monitoring, and quality control. The district provides sufficient training and institutional technology support to achieve high-quality data entry and reporting.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D6 District professional development</b></p> <p>A districtwide professional development plan collaboratively developed by district and community partners supports MTSS-B implementation, differentiated across schools based on data/need and implementation phase. Professional development includes MTSS-B key messages, school delivery systems, social-emotional learning, youth mental health, and the impact of trauma on learning.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

## NH-MFI District Module

District Leadership and Support, cont.	○	◐	◑	◒	●
<p><b>D7 District equity focus</b></p> <p>Districtwide access and outcome data related to behavioral health and wellness are analyzed for disparities across racial, ethnic, socioeconomic, language, sex, disability status, and other subgroups. The district develops a plan collaboratively with school-level stakeholders to address any observed inequities and reports on progress in subsequent years.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D8 District accountability and outreach</b></p> <p>Districtwide MTSS-B access, fidelity, and outcome data are collected, analyzed, and shared annually with the entire district and local community in a way that is easy to access and understand (e.g., presentations at school/community events, newsletters, digital/social media). District leaders regularly share MTSS-B progress/updates to promote scale-up and dissemination of MTSS-B and advocate for supportive policies at the local and state level (e.g., school board, legislature, state-level child-serving agencies).</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
District-Community Leadership Team	○	◐	◑	◒	●
<p><b>D9 District team structure</b></p> <p>The district team: (1) meets at least monthly; (2) uses structured agendas, roles, and problem-solving operating procedures (e.g., Team-Initiated Problem Solving); and (3) routinely reviews data, updates action plans, and monitors overall MTSS-B implementation progress. The team produces recorded, publicly available agendas and minutes for each meeting.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D10 District team composition</b></p> <p>The district team has: (1) consistent representation (≥80% meeting attendance) from district and school administrators, teachers, school behavioral health, community-based mental health, other child-serving organizations, family, and youth; (2) knowledge and expertise in student academic and behavior patterns, school operations across grades and programs, community data, behavioral health, implementation science, and facilitation/coaching; and (3) decision-making authority about districtwide MTSS-B related policy and procedures and allocation of funding and other resources (e.g., program implementation, professional development, supportive technology and data systems).</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>D11 District team data-based decision making</b></p> <p>The district team reviews existing MTSS-B-related data at least quarterly, including (1) school data (e.g., attendance, grades, suspensions, expulsions, placement in restrictive settings, universal screening data, school climate) and (2) community data (e.g., suicidal ideation/attempts, hospitalizations, child welfare contacts, juvenile justice interactions). The district team uses the data to support strategic planning, including assessing needs/gaps, prioritizing district-wide goals, and choosing appropriate intervention strategies.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

NH-MFI District Module

District-Community Leadership Team, cont.					
<p><b>D12 District team facilitation/coaching</b>                      The district team receives at least 2 hours of coaching/facilitation per month from an external and/or internal coach with expertise in NH's MTSS-B framework. The coach: (1) socializes the district team to the MTSS-B framework, processes, and role of the coach; (2) supports facilitation of district team meetings; (3) guides planning and implementation; (4) supports completion of MTSS-B tools; and (5) provides interactive problem-solving and support.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

# New Hampshire MTSS–B Fidelity Inventory (NH–MFI)

## Behavioral Health Integration Module

School District/LEA:

Date completed:

Facilitator name:

Facilitator role:

### Instructions

The Behavioral Health Improvement Institute has made the NH–MFI freely available as part of the NH MTSS–B Toolkit. Do not alter the tool without their permission.

Please use the following citation in all references to the NH–MFI:

Phillips, M., Fauth, J. (2020). The New Hampshire MTSS–B Fidelity Inventory (NH–MFI). Behavioral Health Improvement Institute, Keene State College.

Download and save a copy of this form *before* completing the NH–MFI.

### Purpose

The NH MTSS–B Fidelity Inventory (NH–MFI) assesses the degree to which districts and schools are implementing the core features of the NH MTSS–B framework and helps district and school teams understand the relative strengths and weaknesses of their MTSS–B implementation. The NH–MFI Behavioral Health Integration Module is one of four modules (District, Schoolwide/Tier 1, Tier 2/3, and Behavioral Health Integration) and is designed to measure the quality of your district’s collaboration and integration with partnering community mental health agencies in depth. Scores should be used to support strategic/action planning, monitor progress, and gauge fidelity to the NH MTSS–B framework.

### Administration

The NH–MFI module should be completed a minimum of once per year during the district’s typical planning time (e.g., just prior to the start of or after the close of the school year). In addition, the NH–MFI can be administered again mid-year to gauge ongoing implementation progress, if desired. The module requires approximately 45 minutes to complete. A MTSS–B coach should facilitate administration, helping the team fully understand each item, reality-check their perceptions of implementation, and reach consensus on scoring.

Module	Team	Administration	Facilitator
Behavioral Health Integration	Relevant District-Community Leadership Team (DCLT) members, school-based Advanced Tier team members, and partnering mental health agency staff At minimum, this team should include member(s) from the DCLT who are knowledgeable about existing partnership(s) with their community mental health agency (CMHA); CMHA administrator(s) and clinicians; school behavioral health lead(s); and the behavioral health liaison (if this position exists).	<b>Annually</b> to support annual strategic/action planning using the NH MTSS–B Action Planning Tools  <b>Optional: one additional administration mid-year</b> to gauge ongoing progress	Internal or external MTSS–B coach

## Scoring

Each item on the NH-MFI describes a MTSS-B ideal/gold standard. The relevant team should work through the items one by one, in order. First, each team member – independently – considers the degree to which an item/gold standard is *currently* in place: not at all, a little, somewhat, mostly, or completely – and what evidence they could cite to support that rating. Then, team members share their individual ratings with the team along with an explanation of any evidence supporting those ratings. Especially with teams that are newer to the NH-MFI, the MTSS-B coach can then offer a score (e.g., that sounds like a “2”), inviting the team to agree or disagree and discusses any discrepancies – ultimately generating a single, agreed-upon consensus score for each item. As a general rule, teams should err on the side of being conservative in their scoring – if you’re not sure which response option fits best, or think reality falls right in between two possible response options, choose the lower one. See below for further guidance on what each response option represents in visual/symbolic and quantitative terms.

Response options	Symbol	Score	Percent implemented
Not at all in place	○	0	~0% in place
A little in place	◐	1	~25% in place
Somewhat in place	◑	2	~50% in place
Mostly in place	◒	3	~75% in place
Completely in place	●	4	~100% in place

## Sources and acknowledgements

Development of the NH-MFI was supported by the Office of Student and Educator Wellness, Bureau of Wellness and Nutrition, New Hampshire Department of Education; Midwest PBIS Network; Northeast PBIS Network; Institute on Disability, University of New Hampshire; and the New Hampshire Center for Effective Behavioral Interventions and Supports, Southeastern Regional Education Service Center. The NH-MFI was inspired by and drew from the following tools:

- Algozzine, B., Barrett, S., Eber, L., George, H., Horner, R., Lewis, T., Putnam, B., Swain-Bradway, J., McIntosh, K., & Sugai, G (2019). *School-wide PBIS Tiered Fidelity Inventory*. OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports. Retrieved from: [www.pbis.org](http://www.pbis.org).
- Splett, J. W., Perales, K. & Weist, M. D. (2019). *Interconnected Systems Framework – Implementation Inventory (ISF-II), Version 3*. Unpublished instrument. Gainesville, FL: University of Florida. Retrieved from: <http://www.midwestpbis.org/interconnected-systems-framework/tools>
- Center on Positive Behavioral Interventions and Supports (2019). *Positive Behavioral Interventions and Supports District Systems Fidelity Inventory (DSFI) – Pilot version 0.1*. Eugene, OR: University of Oregon. Retrieved from: <https://www.pbis.org/resource/pbis-district-systems-fidelity-inventory-dsfi-pilot-version-v0-1>

## NH-MFI Behavioral Health Integration Module

Leadership and Support	○	◐	◑	◒	●
<p><b>BH1 District/community mental health agency partnership</b> The district develops a formal partnership with at least one community mental health agency (CMHA) to collaborate on MTSS-B implementation, including development of a tiered, integrated, and coordinated continuum of school- and community-based behavioral health supports and services.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>BH2 Shared values</b> District and partnering CMHA(s) work to develop an integrated behavioral health delivery system that embodies system of care values: family- and youth-driven, community-based, culturally and linguistically competent, and trauma-informed.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>BH3 CMHA leadership</b> District and CMHA leaders with decision-making authority meet at least monthly to develop strategies and policies to advance their partnership and the integrated delivery system. At least one CMHA administrator with decision-making authority (e.g., Executive Director, Children’s Director) from each partnering agency consistently attends (&gt;80% attendance) and actively participates in District-Community Leadership Team (DCLT) meetings.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>BH4 Behavioral health liaison</b> At least one provider from each partnering CMHA serves as a school-based behavioral health liaison. The behavioral health liaison: (1) spends at least 75% of their time embedded as a participating member of one or more schools; (2) actively participates (&gt;80% attendance) in DCLT meetings; (3) provides behavioral health consultation as requested for administrators, teachers, staff, and students; (4) serves as an internal coach and support for school-based behavioral health staff; and (5) provides Tier 3 services on school grounds.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
Systems	○	◐	◑	◒	●
<p><b>BH5 Information sharing</b> District and partnering CMHA(s) develop and implement information sharing procedures for the purpose of coordinated student care between relevant behavioral health providers and school staff. The procedures specify: (1) the types of student information to be regularly shared, by whom, under what circumstances, and with what frequency; and (2) the parent/caregiver information sharing consent process.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>BH6 System-level data use</b> The DCLT reviews relevant CMHA data on the disposition and outcomes (e.g., percent successful referrals, wait time, average length of treatment, frequency and types of services) of facilitated CMHA referrals with their partnering CMHA(s) at least twice per school year. The team uses these data to identify weaknesses and gaps in their Tier 2/3 system(s) and improve their facilitated referral practices and procedures.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

## NH-MFI Behavioral Health Integration Module

Systems cont.	○	◐	◑	◒	●
<p><b>BH7 Behavioral health crisis response protocol</b>                      District and partnering CMHA(s) develop and implement a behavioral health crisis response protocol for students on school grounds that specifies: (1) crisis response team members and responsibilities; (2) a description of the types of events that constitute a crisis; (3) guidelines for responding to an immediate crisis (e.g., alerting crisis response team members, stabilizing the student, reaching out to caregivers); (4) guidelines for aftercare of student, staff, and response team members; and (5) guidelines for communication and documentation (e.g., communicating with the community if appropriate, incident documentation).</p>	0: Not at all in place  <input type="checkbox"/>	1: A little in place  <input type="checkbox"/>	2: Somewhat in place  <input type="checkbox"/>	3: Mostly in place  <input type="checkbox"/>	4: Completely in place  <input type="checkbox"/>
<p><b>BH8 CMHA discharge procedure</b>                      Pre- or immediately post-discharge from CMHA services, the partnering CMHA(s) will collaborate with the student's school-based support team to develop a transition plan. The plan identifies the family and school supports needed to sustain and extend the student's gains as a result of treatment. School-based supports commence within 2 weeks of discharge from the CHMA.</p>	0: Not at all in place  <input type="checkbox"/>	1: A little in place  <input type="checkbox"/>	2: Somewhat in place  <input type="checkbox"/>	3: Mostly in place  <input type="checkbox"/>	4: Completely in place  <input type="checkbox"/>
Services	○	◐	◑	◒	●
<p><b>BH9 Tier 3 service array</b>                      District and partnering CMHA(s) develop an integrated service array accompanied by guidance that distinguishes between shorter-term, less intensive Tier 3 services that can be feasibly and effectively implemented on school grounds and longer-term, more intensive services appropriate for delivery at a specialty mental health setting.</p>	0: Not at all in place  <input type="checkbox"/>	1: A little in place  <input type="checkbox"/>	2: Somewhat in place  <input type="checkbox"/>	3: Mostly in place  <input type="checkbox"/>	4: Completely in place  <input type="checkbox"/>
<p><b>BH10 Access to CMHA services</b>                      Partnering CMHA(s) ensure all students, regardless of health insurance status, have access to an intake within 2 weeks of referral to individual services at the CMHA for more intensive services. Necessary and appropriate services are initiated within 4 weeks after referral.</p>	0: Not at all in place  <input type="checkbox"/>	1: A little in place  <input type="checkbox"/>	2: Somewhat in place  <input type="checkbox"/>	3: Mostly in place  <input type="checkbox"/>	4: Completely in place  <input type="checkbox"/>

# New Hampshire MTSS–B Fidelity Inventory (NH–MFI)

## Schoolwide/Tier 1 Module

School District/LEA:

School:

Date completed:

Facilitator name:

Facilitator role:

### Instructions

The Behavioral Health Improvement Institute has made the NH–MFI freely available as part of the NH MTSS–B Toolkit. Do not alter the tool without their permission.

Please use the following citation in all references to the NH–MFI:

Phillips, M., Fauth, J. (2020). The New Hampshire MTSS–B Fidelity Inventory (NH–MFI). Behavioral Health Improvement Institute, Keene State College.

Download and save a copy of this form *before* completing the NH–MFI.

### Purpose

The NH MTSS–B Fidelity Inventory (NH–MFI) assesses the degree to which districts and schools are implementing the core features of the NH MTSS–B framework and helps district and school teams understand the relative strengths and weaknesses of their MTSS–B implementation. The NH–MFI Schoolwide/Tier 1 Module is one of four modules (District, Schoolwide/Tier 1, Tier 2/3, and Behavioral Health Integration) and is designed to measure the quality of your school-level implementation, including schoolwide leadership, support, teaming, and universal practices. Scores should be used to support strategic/action planning, monitor progress, and gauge fidelity to the NH MTSS–B framework.

### Administration

The NH–MFI should be completed a minimum of once a year, during the district/school’s typical planning time (e.g., just prior to the start of or after the close of the school year). In addition, the NH–MFI can be administered again mid-year to gauge ongoing implementation progress, if desired. Each module requires approximately 45 minutes to complete. A MTSS–B coach should facilitate administration, helping the team fully understand each item, reality-check their perceptions of implementation, and reach consensus on scoring.

Module	Team	Administration	Facilitator
Schoolwide/Tier 1	School MTSS-B steering committee or Tier 1 team At minimum, this should include a building administrator, teacher, school behavioral health staff, community-based mental health clinician, relevant child-serving agency staff, and family and youth representatives.	Annually, during typical district/school planning time to support annual strategic/action planning  Optional: one additional administration mid-year to gauge ongoing progress	Internal or external MTSS-B coach

## Scoring

Each item on the NH-MFI describes a MTSS-B ideal/gold standard. The relevant team should work through the items one by one, in order. First, each team member – independently – considers the degree to which an item/gold standard is *currently* in place: not at all, a little, somewhat, mostly, or completely – and what evidence they could cite to support that rating. Then, team members share their individual ratings with the team along with an explanation of any evidence supporting those ratings. Especially with teams that are newer to the NH-MFI, the MTSS-B coach can then offer a score (e.g., that sounds like a “2”), inviting the team to agree or disagree and discusses any discrepancies – ultimately generating a single, agreed-upon consensus score for each item. As a general rule, teams should err on the side of being conservative in their scoring – if you’re not sure which response option fits best, or think reality falls right in between two possible response options, choose the lower one. See below for further guidance on what each response option represents in visual/symbolic and quantitative terms.

Response options	Symbol	Score	Percent implemented
Not at all in place	○	0	~0% in place
A little in place	◐	1	~25% in place
Somewhat in place	◑	2	~50% in place
Mostly in place	◒	3	~75% in place
Completely in place	●	4	~100% in place

## Sources and acknowledgements

Development of the NH-MFI was supported by the Office of Student and Educator Wellness, Bureau of Wellness and Nutrition, New Hampshire Department of Education; Midwest PBIS Network; Northeast PBIS Network; Institute on Disability, University of New Hampshire; and the New Hampshire Center for Effective Behavioral Interventions and Supports, Southeastern Regional Education Service Center. The NH-MFI was inspired by and drew from the following tools:

- Algozzine, B., Barrett, S., Eber, L., George, H., Horner, R., Lewis, T., Putnam, B., Swain-Bradway, J., McIntosh, K., & Sugai, G (2019). *School-wide PBIS Tiered Fidelity Inventory*. OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports. Retrieved from: [www.pbis.org](http://www.pbis.org).
- Splett, J. W., Perales, K. & Weist, M. D. (2019). *Interconnected Systems Framework – Implementation Inventory (ISF-II), Version 3*. Unpublished instrument. Gainesville, FL: University of Florida. Retrieved from: <http://www.midwestpbis.org/interconnected-systems-framework/tools>
- Center on Positive Behavioral Interventions and Supports (2019). *Positive Behavioral Interventions and Supports District Systems Fidelity Inventory (DSFI) – Pilot version 0.1*. Eugene, OR: University of Oregon. Retrieved from: <https://www.pbis.org/resource/pbis-district-systems-fidelity-inventory-dsfi-pilot-version-v0-1>

NH-MFI Schoolwide/Tier 1 Module					
Schoolwide Leadership and Support					
<p><b>S1 School administrator buy-in</b>                      School administrators are knowledgeable, engaged, and visible champions of MTSS-B. They place social, emotional, and behavioral wellness at the center of a “whole student” vision of education and learning as articulated in a school vision/mission statement and/or improvement plan. Administrators regularly demonstrate understanding and support of MTSS-B in internal and external communications such as school publications, school board/district-level presentations, staff and parent meetings, etc.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S2 School teacher &amp; staff buy-in</b>                      Teachers and staff are knowledgeable, engaged, and visible supporters of MTSS-B. All teachers/staff demonstrate their understanding and support by actively participating in MTSS-B implementation as appropriate to their role, including integration of social-emotional curricula into schoolwide practices, lesson plans, and classroom management techniques; participation on MTSS-B-related teams and committees; participation in related professional development, etc.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S3 School fiscal support</b>                      School administrators prioritize and resource MTSS-B in the school budget as allowable, including adequate funding/resources for professional development, internal and external MTSS-B and behavioral health coaching, human resources, stipends for team participation and other implementation tasks, data systems, curricula, and other materials.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S4 School human resource support</b>                      Staff recruitment and selection procedures such as position announcements, evaluative criteria, and hiring decisions prioritize MTSS-B knowledge, experience, and interest/buy-in. Job descriptions include sufficient dedicated time for MTSS-B-related roles, training, and duties.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S5 School technology and data</b>                      The school acquires and effectively uses schoolwide and other data platforms and technologies that enable strategic planning and data-based decision-making to support MTSS-B (e.g., School-wide Information System), including provision of necessary data entry training, monitoring, and quality control. The school provides sufficient training and institutional technology support to achieve high-quality data entry and reporting.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S6 School professional development</b>                      Professional development is collaboratively developed by school and community partners to address data-identified needs. All staff are trained on MTSS-B key messages, school delivery systems, social-emotional learning, youth mental health, and the impact of trauma on learning. Staff implementing evidence-based practices receive sufficient professional development to support high-fidelity implementation.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

NH-MFI Schoolwide/Tier 1 Module					
Schoolwide Leadership and Support, cont.					
<p><b>S7 School equity focus</b>                      Schoolwide access and outcome data related to behavioral health and wellness are analyzed for disparities across racial, ethnic, socioeconomic, language, sex, disability status, and other subgroups. The school develops a plan to address any observed inequities and reports on progress in subsequent years.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S8 School accountability and outreach</b>                      Schoolwide MTSS-B access, fidelity, and outcome data are collected, analyzed, and shared annually with the school, district, and local community in a way that is easy to access and understand (e.g., presentations at school/community events, newsletters, digital/social media). School leaders regularly share MTSS-B progress/updates to promote scale-up and dissemination of MTSS-B and advocate for supportive policies at the local level (e.g., with other child-serving agencies).</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
Schoolwide/Tier 1 Team					
<p><b>S9 Tier 1 team structure</b>                      The Tier 1 team: (1) meets at least once per month; (2) uses structured agendas, roles, and problem-solving operating procedures (e.g., Team-Initiated Problem Solving); and (3) routinely reviews data, updates action plans, and monitors Tier 1 implementation progress.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S10 Tier 1 team composition</b>                      The Tier 1 team has: (1) consistent representation (<math>\geq 80\%</math> attendance) at meetings from school administrators, teachers, school behavioral health, community-based mental health, other child-serving organizations, family, and youth; (2) expertise in student academic and behavior patterns, school operations across grades and programs, community data, behavioral health, implementation science, and facilitation/coaching; and (3) within district-wide parameters, decision-making authority about schoolwide MTSS-B related policy/procedures and allocation of funding and resources (e.g., program implementation, professional development, supportive technology and data systems).</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S11 Tier 1 team data-based decision making</b>                      The Tier 1 team reviews existing MTSS-B-related school data (e.g., discipline, attendance, grades, nurse visits, universal screening data, school climate) and community data (e.g., suicidal ideation/attempts, hospitalizations, child welfare contacts, juvenile justice interactions) monthly. The team uses these data to support action planning, including monitoring Tier 1 implementation progress, identifying schoolwide needs/gaps, and choosing appropriate Tier 1 programs/supports.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

NH-MFI Schoolwide/Tier 1 Module					
Schoolwide/Tier 1 Team, cont.					
<p><b>S12 Tier 1 team facilitation/coaching</b></p> <p>Tier 1 team receives at least 2 hours of coaching/facilitation per month from an external and/or internal coach with expertise in NH's MTSS-B framework. The coach: (1) socializes the Tier 1 team to the MTSS-B framework, process, and role of the coach; (2) supports facilitation of team meetings; (3) guides planning and implementation; (4) supports completion of MTSS-B tools; and (5) provides interactive problem-solving and support.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
Tier 1 Systems					
<p><b>S13 Tier 1 program/support selection</b></p> <p>Tier 1 programs and supports are selected based on local data/context (e.g., students' behavioral health needs, cultural characteristics) and scholarly evidence (i.e., evidence-based practices, whenever possible). The team selects Tier 1 programs using a structured, documented decision-making process (e.g., Hexagon Tool). The team conducts an annual review of the evidence associated with existing Tier 1 programs, discontinuing those that are found to be ineffective, redundant, and/or unnecessary.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S14 Tier 1 program/support access</b></p> <p>All students, regardless of age, income, disability status, behavioral health needs, etc., receive the full suite of Tier 1 programs and supports.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S15 Tier 1 program/support implementation</b></p> <p>All Tier 1 programs and supports are implemented with fidelity. They are delivered by staff with the appropriate credentials and expertise, who receive both ongoing training and coaching from experts in the intervention model and timely feedback on fidelity and student outcomes.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S16 Tier 1 accountability</b></p> <p>Access, fidelity, and outcome data at the schoolwide/Tier 1 level are collected and analyzed for disparities across racial, ethnic, socioeconomic, language, disability status, sex, and other subgroups. Data are shared with the entire school staff annually in a way that is easy to access and understand.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
Tier 1 Programs/Supports					
<p><b>S17 School universal social emotional learning (SEL) curriculum</b></p> <p>A universal SEL curriculum that is aligned with schoolwide behavioral expectations is integrated into the overall curriculum at the schoolwide and classroom levels with fidelity. All teachers demonstrate competence in implementing the SEL curriculum in their classrooms, with ongoing professional development and coaching support. The SEL curriculum is integrated into all academic subject areas and school routines.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

NH-MFI Schoolwide/Tier 1 Module					
Tier 1 Programs/Supports, cont.					
<p><b>S18 School health education and prevention</b> All students receive health education programming consistent with state and federal guidelines. All students, as appropriate to their developmental level, are exposed to mental health literacy and suicide, violence, and substance misuse prevention programming through the health education curriculum and/or separate initiatives.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S19 School behavioral expectations</b> A schoolwide positive behavioral expectations and behavior acknowledgment system is implemented with fidelity. The school has five or fewer positively stated behavioral expectations posted in visible locations in the school and examples tailored to specific locations (behavior matrix). Expected behaviors are taught at school and classroom levels. All staff and most students can list the expectations. All staff use a consistent, equitable process to acknowledge positive behavior.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S20 School restorative disciplinary practices (RPs)</b> Restorative disciplinary policies and processes are implemented with fidelity. RPs emphasize a relational, trauma-informed approach to student behavior and favor restorative and inclusive rather than punitive and exclusionary practices. Discipline policies provide clear guidance regarding use of RPs in response to problem behaviors. Teachers receive support in deciding when to employ RPs vs. other disciplinary measures. Use of RPs in response to discipline is monitored for impact.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>S21 Tier 1 behavioral health consultation</b> All teachers have access to expert behavioral health consultation to support implementation of all classroom-level behavioral health and social-emotional programming and procedures, including SEL curricula and positive schoolwide behavior expectations. Behavioral health support can be provided by school- and/or community-based behavioral health staff.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

# New Hampshire MTSS-B Fidelity Inventory (NH-MFI)

## Tier 2/3 Module

School District/LEA:

School:

Date completed:

Facilitator name:

Facilitator role:

### Instructions

The Behavioral Health Improvement Institute has made the NH-MFI freely available as part of the NH MTSS-B Toolkit. Do not alter the tool without their permission.

Please use the following citation in all references to the NH-MFI:

Phillips, M., Fauth, J. (2020). The New Hampshire MTSS-B Fidelity Inventory (NH-MFI). Behavioral Health Improvement Institute, Keene State College.

Download and save a copy of this form *before* completing the NH-MFI.

### Purpose

The NH MTSS-B Fidelity Inventory (NH-MFI) assesses the degree to which districts and schools are implementing the core features of the NH MTSS-B framework and helps district and school teams understand the relative strengths and weaknesses of their MTSS-B implementation. The NH-MFI Tier 2/3 Module is one of four modules (District, Schoolwide/Tier 1, Tier 2/3, and Behavioral Health Integration) and is designed to measure the quality of your advanced tier intervention system, including teaming and intervention structures and practices. Scores should be used to support strategic/action planning, monitor progress, and gauge fidelity to the NH MTSS-B framework.

### Administration

The NH-MFI should be completed a minimum of once a year, during the district/school's typical planning time (e.g., just prior to the start of or after the close of the school year). In addition, the NH-MFI can be administered again mid-year to gauge ongoing implementation progress, if desired. Each module requires approximately 45 minutes to complete. A MTSS-B coach should facilitate administration, helping the team fully understand each item, reality-check their perceptions of implementation, and reach consensus on scoring.

Module	Team	Administration	Facilitator
Tier 2/3	<b>Advanced Tier/combined Tier 2/3 team</b> At minimum, this should include a building administrator, teacher, school behavioral health staff, community-based mental health clinician, relevant child-serving agency staff, and family and youth representatives.	<b>Annually, during typical district/school planning time</b> to support annual strategic/action planning  <b>Optional: one additional administration mid-year</b> to gauge ongoing progress	Internal or external MTSS-B coach

## Scoring

Each item on the NH-MFI describes a MTSS-B ideal/gold standard. The relevant team should work through the items one by one, in order. First, each team member – independently – considers the degree to which an item/gold standard is *currently* in place: not at all, a little, somewhat, mostly, or completely – and what evidence they could cite to support that rating. Then, team members share their individual ratings with the team along with an explanation of any evidence supporting those ratings. Especially with teams that are newer to the NH-MFI, the MTSS-B coach can then offer a score (e.g., that sounds like a “2”), inviting the team to agree or disagree and discusses any discrepancies – ultimately generating a single, agreed-upon consensus score for each item. As a general rule, teams should err on the side of being conservative in their scoring – if you’re not sure which response option fits best, or think reality falls right in between two possible response options, choose the lower one. See below for further guidance on what each response option represents in visual/symbolic and quantitative terms.

Response options	Symbol	Score	Percent implemented
Not at all in place	○	0	~0% in place
A little in place	◐	1	~25% in place
Somewhat in place	◑	2	~50% in place
Mostly in place	◒	3	~75% in place
Completely in place	●	4	~100% in place

## Sources and acknowledgements

Development of the NH-MFI was supported by the Office of Student and Educator Wellness, Bureau of Wellness and Nutrition, New Hampshire Department of Education; Midwest PBIS Network; Northeast PBIS Network; Institute on Disability, University of New Hampshire; and the New Hampshire Center for Effective Behavioral Interventions and Supports, Southeastern Regional Education Service Center. The NH-MFI was inspired by and drew from the following tools:

- Algozzine, B., Barrett, S., Eber, L., George, H., Horner, R., Lewis, T., Putnam, B., Swain-Bradway, J., McIntosh, K., & Sugai, G. (2019). *School-wide PBIS Tiered Fidelity Inventory*. OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports. Retrieved from: [www.pbis.org](http://www.pbis.org).
- Splett, J. W., Perales, K. & Weist, M. D. (2019). *Interconnected Systems Framework – Implementation Inventory (ISF-II), Version 3*. Unpublished instrument. Gainesville, FL: University of Florida. Retrieved from: <http://www.midwestpbis.org/interconnected-systems-framework/tools>
- Center on Positive Behavioral Interventions and Supports (2019). *Positive Behavioral Interventions and Supports District Systems Fidelity Inventory (DSFI) – Pilot version 0.1*. Eugene, OR: University of Oregon. Retrieved from: <https://www.pbis.org/resource/pbis-district-systems-fidelity-inventory-dsfi-pilot-version-v0-1>

## NH-MFI Tier 2/3 Module

Tier 2/3 Team	○	◐	◑	◒	●
<b>A1 Tier 2/3 team structure</b> The Tier 2/3 team: (1) meets at least once per month; (2) uses structured agendas, roles, and problem-solving operating procedures (e.g., Team-Initiated Problem Solving); and (3) routinely reviews data, updates action plans, and monitors Tier 2/3 system implementation progress.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A2 Tier 2/3 team composition</b> The Tier 2/3 team has: (1) consistent representation (≥80% attendance) at meetings from school administrators, teachers, school behavioral health, community-based mental health, other child-serving organizations, family, and youth; (2) expertise in student academic and behavior patterns, school operations across grades and programs, community data, behavioral health, implementation science, and facilitation/coaching; and (3) decision-making authority about Tier 2/3-related policy and procedures and allocation of funding and other resources (e.g., professional development, supportive technology).	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A3 Tier 2/3 team data-based decision making</b> The Tier 2/3 team reviews existing data monthly, including school data (e.g., discipline, attendance, grades, nurse visits, universal screening, school climate) and community data (e.g., substance misuse, wait times for services, suicidal ideation/attempts, hospitalizations, child welfare contacts, juvenile justice interactions). The team uses data to support action planning that includes identifying Tier 2/3 needs/gaps, informing system intervention strategies, and monitoring progress at the Tier 2/3 system level.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A4 Tier 2/3 team facilitation/coaching</b> The Tier 2/3 team receives at least 2 hours of coaching/facilitation per month from an external and/or internal coach with expertise in NH's MTSS-B framework. The coach: (1) socializes the team to the MTSS-B framework, processes, and role of the coach; (2) supports facilitation of Tier 2/3 team meetings; (3) guides planning and implementation; (4) supports completion of MTSS-B tools; and (5) provides interactive problem-solving and support.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
Tier 2/3 Systems	○	◐	◑	◒	●
<b>A5 School single request for assistance</b> A single request for assistance process managed by a designated team or coordinator is used to respond to all student academic, social-emotional, and behavioral health needs. The request for assistance process is understood and accessible to all staff. Requests are made in writing, directed to the designated team/coordinator; and responded to within 3 school days.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

## NH-MFI Tier 2/3 Module

Tier 2/3 Systems, cont.	○	◐	◑	◒	●
<b>A6 School data-driven screening</b> Explicit criteria, based on an established social-emotional screener and other relevant school data (e.g., attendance, grades, office discipline referrals, nurse visits), are used to identify and stratify students' social-emotional/behavioral health needs at least twice annually (i.e., Tier 1, Tier 2, Tier 3, community mental health).	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A7 Tier 2/3 intervention selection</b> Tier 2/3 school- and community-based behavioral health interventions are selected based on local data (e.g., students' behavioral health needs, cultural characteristics) and scholarly evidence (i.e., evidence-based, when possible). The team selects new interventions using a structured, documented decision-making process (e.g., Hexagon Tool). The team conducts an annual review of the evidence associated with existing Tier 2/3 interventions, discontinuing those that are found to be ineffective, redundant, and/or unnecessary.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A8 Tier 2/3 intervention implementation</b> All Tier 2/3 school- and community-based behavioral health interventions are implemented with fidelity. They are delivered by staff with appropriate credentials and expertise who receive both ongoing training and coaching from experts in the practice model and timely feedback on fidelity and outcomes.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A9 School student progress tracking</b> Progress on individualized student goals and outcomes is tracked at the individual level for all students receiving Tier 2/3 services. These data are examined monthly to determine response to intervention and to adjust services/supports as necessary.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A10 Tier 2/3 intervention monitoring, improvement, and accountability</b> Access and engagement (e.g., number and percentage of students receiving services, attendance rates), fidelity, and outcomes (e.g., student wellness, behavior) are tracked at the aggregate level for all Tier 2/3 interventions to improve existing and inform future selection of Tier 2/3 interventions. These data are analyzed for disparities across racial, ethnic, socioeconomic, language, sex, disability, and other subgroups. Data are shared with the entire school staff annually in a way that is easy to access and understand.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<b>A11 School facilitated referrals</b> A facilitated referral pathway between the school and community mental health partner(s) is established for students with Tier 3 behavioral health needs who require more specialized or intensive interventions than can be offered on school grounds. The pathway: (1) establishes inter-organizational protocols (e.g., release of information) that increase the ease and speed with which students can receive services and facilitate timely and effective communication and follow-up; and (2) provides supportive problem-solving to families to reduce barriers and increase access to care. At least 50% of students referred for community-based behavioral health services receive and attend their first appointment within 2 weeks of referral.	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>

## NH-MFI Tier 2/3 Module

Tier 2/3 Interventions	○	◐	◑	◒	●
<p><b>A12 Tier 2 targeted supports</b>                      15-20% of the school population can access school-based Tier 2 targeted supports annually, including small group and daily mentoring/check-in (e.g., Check In/Check Out, Check and Connect) interventions. Students are able to access Tier 2 supports within one week of referral. Tier 2 supports: (1) build off/reinforce the social-emotional learning curriculum and positive behavioral expectations; (2) are (co)facilitated and/or supervised by at least one staff with advanced (master's or doctoral) behavioral health training; and (3) are implemented with fidelity to an evidence-based intervention model.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>A13 Tier 3 individualized interventions</b>                      5%-8% of the school population can access evidence-based, individualized behavioral health services offered by school or contracted staff on school grounds annually. Students are able to access Tier 3 services within one week of referral. Individualized interventions are provided by staff with advanced behavioral health training, expertise, and access to expert coaching in the evidence-based model, and are implemented with fidelity.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>A14 Tier 3 individualized student support teams</b>                      An individualized student support team is developed for each student identified with Tier 3 behavioral health needs. The team consists of the student, one or more caregivers, school/community behavioral health provider(s), and teachers and other school staff of the family's choice. Student support teams review progress and update student success plans (see A15) on at least a monthly basis.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>
<p><b>A15 Tier 3 individualized student success plans</b>                      A student support team develops student success plans for each student receiving Tier 3 services. The plan is developed based on individualized student data along with the expertise of all members of the team, with special emphasis on youth/family voice and choice. The plan describes: (1) strengths and needs; (2) the meaning/function of problem behavior; (3) major academic and quality of life goals and strategies; and (4) benchmarks for success.</p>	0: Not at all in place <input type="checkbox"/>	1: A little in place <input type="checkbox"/>	2: Somewhat in place <input type="checkbox"/>	3: Mostly in place <input type="checkbox"/>	4: Completely in place <input type="checkbox"/>