

# New Hampshire MTSS-B Fidelity Inventory

## Tier 2/3 Module



School District/LEA:

School:

State:

Date Completed:

Name of person facilitating administration of this NH-MFI module:

What is the role of the facilitator?

Is this the School's first administration of the NH-MFI Tier 2/3 Module?    Yes    No

How long has the School been implementing MTSS-B?

## 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 send copies of all completed NH-MFIs to [bhii.ksc@gmail.com](mailto:bhii.ksc@gmail.com) to support validation and ongoing development of the tool. This data will be kept secure and used and reported only in aggregate; no district/school identifying information will be released or reported by BHII.
- 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 delivery system, including teaming and intervention structures and practices. Scores should be used to support strategic/action planning using the corresponding NH MTSS-B Action Planning Tools at the district (D-MAPT) and school (S-MAPT) levels, monitor progress, and gauge fidelity to the NH MTSS-B framework.

## Administration

This module 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, etc.). In addition, the NH-MFI can be administered again mid-year to gauge ongoing implementation progress, if desired. Each module requires approximately 30-40 minutes to complete. An 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
<b>Tier 2/3</b>	<p><b>Advanced Tier/combined Tier 2/3 team</b></p> <p>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.</p>	<p><b>Annually, during typical district/school planning time</b> to support annual strategic/action planning using the NH MTSS-B Action Planning Tools</p> <p><b>Optional: one additional administration</b> mid-year 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, considerably, 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
Considerably in place		3	~75% in place
Completely in place		4	~100% in place

### Sources and acknowledgments

Development of the NH-MFI was supported by the Office of Social and Emotional Wellness, Bureau of Student Wellness, 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>



## Tier 2/3 Module






TO BE COMPLETED BY AN "ADVANCED TIER" TEAM, TIER 2/3 STEERING COMMITTEE, OR COMBINED TIER 2/3 TEAM

Tier 2/3 Team						
<b>A1</b>	<p><b>Tier 2/3 team structure</b></p> <p>A Tier 2/3 team meets at least once per month; uses structured agendas, roles, and problem-solving operating procedures (e.g., Team-Initiated Problem Solving, etc.); and routinely reviews data, updates action plans, and monitors Advanced Tier system implementation progress.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A2</b>	<p><b>Tier 2/3 team composition</b></p> <p>The Tier 2/3 team has (1) consistent (&gt;80% attendance) representation 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 advanced tier related policy and procedures and allocation of funding and other resources (professional development, supportive technology, etc.).</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A3</b>	<p><b>Tier 2/3 team data-based decision making</b></p> <p>The Tier 2/3 team reviews existing data monthly, including school data (discipline, attendance, grades, nurse visits, universal screening, school climate etc.) and community data (substance misuse, wait times for services, suicidal ideation/attempts, hospitalizations, child welfare contacts, juvenile justice interactions, etc.). 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 advanced tier system level.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A4</b>	<p><b>Tier 2/3 team facilitation/coaching</b></p> <p>The Tier 2/3 team receives at least two hours of coaching/facilitation per month from an external and/or internal coach with expertise in NH's MTSS-B framework. The coach socializes the team to the MTSS-B framework, processes, and role of the coach; supports facilitation of Tier 2/3 team meetings; guides planning and implementation; supports completion of MTSS-B tools; and provides interactive problem-solving and support.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place



Tier 2/3 Systems						
<b>A5</b>	<p><b>School single request for assistance</b></p> <p>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 school staff. Requests are made in writing, directed to the designated team/coordinator, and responded to within 3 school days.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A6</b>	<p><b>School data-driven screening</b></p> <p>Explicit criteria, based on an established social-emotional screener and other relevant school data (attendance, grades, office discipline referrals, nurse visits, etc.), 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).</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A7</b>	<p><b>Tier 2/3 intervention selection</b></p> <p>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., the 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.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A8</b>	<p><b>Tier 2/3 intervention implementation</b></p> <p>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 1) ongoing training and coaching from experts in the practice model and 2) timely feedback on fidelity and outcomes.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place



Tier 2/3 Systems continued						
<b>A9</b>	<p><b>School student progress tracking</b></p> <p>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.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A10</b>	<p><b>Tier 2/3 intervention monitoring, improvement, and accountability</b></p> <p>Access and engagement (e.g., number and percentage of students receiving, 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 racial, ethnic, socioeconomic, language, sex, disability status, and other inequities. 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	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A11</b>	<p><b>School facilitated referrals</b></p> <p>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 interorganizational protocols (e.g., release of information) that a) increase the ease and speed with which students can receive services and b) 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 an intake appointment within two weeks of referral.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place



Tier 2/3 Interventions						
<b>A12</b>	<p><b>Tier 2 targeted supports</b></p> <p>Up to 15% of the school population can access school-based Tier 2 targeted supports annually, including small group and daily mentoring/check-in (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 SEL 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) implemented with fidelity to an evidence-based intervention model.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A13</b>	<p><b>Tier 3 Individualized interventions</b></p> <p>Up to 5% 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 and expertise, with access to expert coaching in the evidence-based model, and are implemented with fidelity.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A14</b>	<p><b>Tier 3 Individualized student support teams</b></p> <p>An individualized 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. Teams review progress and update student success plans (see A15) on at least a monthly basis.</p>	0: Not at all in place	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place
<b>A15</b>	<p><b>Tier 3 Individualized student success plans</b></p> <p>A student support team develops 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	1: A little in place	2: Somewhat in place	3: Mostly in place	4: Completely in place