

Personal Leadership Project: Public Health Leadership Institute

Building the Capacity of “Pods” to meet the Social, Emotional and Behavioral Health Needs of Students in Chicago Public Schools (CPS)

Abstract: The focus of this leadership project was to build the capacity of grade level teams (known as “Pods”) in three Chicago high schools to address the social, emotional and behavioral health needs of students. Through a simultaneous assessment and implementation process, I developed recommendations, materials and resources for implementing a collaborative Pod and Care Team process that can be used by the schools in subsequent years. This project was intended to provide me with leadership opportunities in a number of areas, including: relationship building with key stakeholders, skill development in consultation and process evaluation, system change, and mastery of and communication about a specialized school mental health content area.

Background:

Along with a team of mental health consultants, I am responsible for providing training and supervision on school mental health best practice and evidence-based group interventions to the Care Teams of three schools managed by the Office of School Turnaround. Care Teams are school-based groups composed of school counselors, school social workers, school psychologist, community mental health provider, and an administrator that come together on a weekly basis to collaborate in finding solutions to the problems of at-risk students and families. Care Teams deliver three-levels of interventions to address students’ social, emotional and behavioral needs. Care Teams also collaborate with other school-based resources (such as the Pods) to further support needs of students.

The Pods are grade-level teams of teachers, administrators and a Care Team representative that use a Professional Learning Community to support students who are not succeeding in school. The Pods use a problem-solving process to identify essential student outcomes, gather data regarding student learning, and collaborate to address individual, classroom and grade-level needs of students. Through a bi-weekly meeting, each Pod identifies individual students who are struggling in the classroom. The Pod then develops, implements, and monitors a corresponding support plan for each student. Students who are identified as having a significant social, emotional, and/or behavioral health need are referred to the Care Team.

Building off of the national Response to Intervention (RtI) model, the Office of School Turnaround at Chicago Public Schools utilizes the Pod process to link staff and students with appropriate resources to maximize student learning. While historically RtI has focused more on the academic needs of students, Chicago, along with other districts across the country is using RtI to look at both the academic and behavioral needs of students. By building the capacity of the Pods to address the social, emotional and behavioral needs, students will have greater likelihood at achieving academic success.

Project Description, Objectives and Methodology

The goal of this project was to maximize the effectiveness of current and future grade-level Pods in addressing students’ social, emotional and behavioral health concerns. In order to achieve this goal, the following objectives were established:

- Using the RtI framework, develop recommendations for building a collaborative Pods-Care Team structure that effectively addresses the social, emotional and behavioral needs of students
- Develop interventions and tools that support a collaborative Pods-Care Team structure
- Build competencies of Care Team members to provide leadership and support to Pods.

Intervention Strategies and Methods: The following were the strategies and methods used for simultaneously assessing the Pod process and providing consultation to the Care Team on its role in this process.

1. Information and Data Gathering

- Conducted background research on model (e.g. read current manual and national literature on grade level support teams, meet with key CPS personnel)
- Observed individual Pods and Pod lead meetings
- Reviewed forms currently being used in Pods

2. Assessment

- Led focus group discussion with Care Team members (12.3.10)
- Attended performance management sessions on Pods (1.25.11, 1.26.11)
- Conducted meeting with Care Team Leads to discuss professional development needs (3.21.11)
- Developed and administered Zoomerang survey on Pods to Care Team (4.26.11)

3. Interventions and Tools

- Developed draft “blueprint” for Care Team role in Pods for Care Team manual
- Developed matrix of classroom interventions for common behavioral problems
- Developed resource list for classroom interventions designed to address social, emotional and behavioral problems
- Developed guide for conducting Pod case study in Care Team meetings

Results:

The following are key findings from the assessment strategies listed above:

1. Care Team members need further clarification of their role and key functions in Pods.
 - *88% of Care Team members perceive role in Pods as moderately or highly important, yet Care Team members differ in perception as to whether role is lead or supportive.*
 - *Role of Care Team members is inconsistent between schools and between Pods.*
2. Care Team members need professional development on core functions related to Pods.
 - *According to results on survey, 60% or more Care Team members indicate that they would benefit from professional development on:*
 - a) *Using metrics to initiate data informed discussion about student*
 - b) *Developing and implementing a student support plan*
 - c) *Supporting teachers in implementing classroom interventions*
3. Increased buy-in is needed from Pod leaders and administration for addressing social, emotional and behavioral needs of students.
 - *Care Team members indicate current Pod structure does not allow for sufficient time to discuss behavioral needs of students or to complete paperwork.*
 - *Deans and administrators do not consistently attend Pods.*
 - *Teacher participation in Pods is inconsistent, and there are frequent conflicts with other meetings.*

Conclusion

This project underscores the importance of developing school structures, such as the Pods, that address both the academic and behavioral needs of students. The findings of this project can be helpful to the Office of School Turn Around as it continues to develop rigorous processes to address student needs. Specifically, the findings of the project can inform future strategies for both Pods and Care Team for establishing communication systems, professional development activities, and policies and procedures.

Based on the results outlined above, the following are three key areas recommended for further action:

1. Further Develop Care Team Role in Pods

- Update Care Team manual to include specific information on Pods.
- Utilize case study guide, matrix, and other tools in Care Team meetings to develop skills in: data-informed decision making, developing support plans and identifying appropriate interventions.
- Include Care Team members in classroom management training (e.g. well-managed classroom).

2. Enhance Pod Meeting Structure

- Include sufficient time in agenda for discussing student behavior, completing paperwork, and reporting back on Care Team services.
- Develop strategies for sharing information about student behavior across classrooms and settings.
- Provide training to Pod leaders and Care Team members on effective group facilitation.

3. Increase Administrative Buy-in:

- Mandate attendance of deans and/or other key administrators in Pods
- Develop Pod schedule that avoids conflicts with other school meetings/obligations.
- Schedule presentation to teachers at beginning of year that introduces Care Team services and instructs teachers how to identify students who may need behavioral interventions.
- Utilize across-school professional development days for Care Teams to discuss challenges/successes in pods.
- Update Pod resources and make resources available on-line for all pod members.

As a mental health consultant to the Care Team, this project has had a stronger emphasis on the role of Care Team than on Pods itself. Due to scheduling conflicts that prevented me from having direct access to the Pods, I relied primarily on the Care Team and CPS staff to provide me with relevant information on Pods. Additional information collected directly from Pod members and Pod leadership in each school would be helpful in developing an accurate assessment of the current status of Pods. The Pod “post mortem” discussion scheduled for June 21, 2011 will be an opportunity to gather this additional information to inform future work on Pods.

Leadership Development

The most valuable aspect of this project was having the opportunity to establish myself as a leader in a new position. As a result of this project, I am now the “go to” person on my team for any issues related to Pods. I also now have direct access to the school district staff that oversees the Pod and Care Team process and stronger relationships with the Care Team lead staff. I also am better able to advocate for an expanded role of Care Team (and therefore for our team of consultants) to support the academic and behavioral needs of students in these schools.

In spite of these gains, initiating this project soon after starting a new position presented several leadership challenges. It was difficult to determine a reasonable scope for this project before the parameters of my position had been defined. Not yet having built relationships with colleagues on my team, the school staff, or the district staff also restricted the progress I could make. And, due to the compressed time period for this project, I was limited in the impact I was able to have on the Pod-Care Team process itself and on the extent to which I could develop the anticipated leadership skills.

As I've learned throughout PHLI, leadership is an evolving process. This project, along with other experiences I have on a daily basis, has contributed to my evolution as a leader.