



OSWI Fidelity Checklist

Directions: As a team, complete the checklist below to identify your school’s existing practices for each item and the priority for improvement. This tool is intended to guide discussion, goal setting, and action planning. Use the following rating and priority scale:

Rating:

- 0 = Never Present
- 1 = Sometimes Present
- 2 = Usually Present
- 3 = Almost always present

Priority:

- 0 = Not a priority
- 1 = Not currently a priority, but may become a priority in the future
- 2 = A priority worthy of discussion, but not a high priority in the next 3 to 6 months
- 3 = A high priority, and will be working on this in the next 3 to 6 months

School Name:

SAP Best Practice	Rating (0-3)	Priority (0-3)
Build Awareness		
1. The process for accessing Student Assistance Program (SAP) services and the steps using the Student Assistance Team (SAT) when a referral is received is published and distributed to school staff, board members, students, caregivers, and the community.		
2. Information about how and when to contact the SAP with a concern is included on the school’s website.		
3. SAP information distributed to students and caregivers is culturally relevant and available in the caregiver’s primary language.		
4. Brochures, social media postings, website postings, or newsletters are used to build ongoing awareness for the SAP.		
5. All staff members and community service providers receive annual inservice training on SAP identification and referral process, policies, and confidentiality.		
6. Staff receive professional development on wellness topics (e.g., reducing risk factors and enhancing protective factors, school climate and connectedness, identifying signs of difficulty).		
Prevention		



1. The board and administration have implemented policies and procedures for addressing issues of health, safety and welfare that include policies for students (e.g., anti-bullying policies, policies when students harm self or others) and procedural policies for using SAP as the mechanism for help (e.g., policies for crisis situations, policies when students have suicidal thoughts).		
2. Universal assessments are administered to assist in identifying needs and strengths to guide prevention efforts.		
3. A prevention strategic plan is developed.		
4. Services in all three PBIS tiers of support are available to meet the needs of each student.		
5. Prevention support groups are offered and implemented for at-risk students.		
6. Prevention initiative outcomes are evaluated.		
Early Identification		
1. Universal screening or an early warning system is in place to proactively identify students with mental health and substance use risk.		
2. All staff (e.g., administration, teachers, support staff, student services, food service, bus drivers) have been trained in the basic Student Assistance process and know how to identify students and make referrals to the SAP.		
3. Referral forms are available to students, caregivers, and community members.		
Referral Processes		
1. SAP referral procedures and forms have been developed that include a process for accessing services and the steps used by the SAT when a referral is received.		
2. Referral process includes a clear and consistent student data collection and review process.		
3. Caregiver contact attempts and results are recorded in the case file.		
4. Informed written caregiver consent is obtained for the SAP process.		



Teaming		
1. A Student Assistance Team, known as the SAT, is available for problem solving to support students with mental health and substance use needs.		
2. Team members have been identified to serve on the SAT.		
3. A SAP Coordinator for the building is identified.		
4. The SAT consists of school staff from multiple disciplines and county or community agency liaisons.		
5. SAT members receive annual SAT training on the SAP process and services.		
6. Building administrators are involved and support the SAT.		
7. The SAT meets for a minimum of 40 minutes per week/cycle and is provided an additional 40 minutes for SAP case management and intervention activities.		
8. The SAT works closely with other initiatives in the building to address the needs of students. (e.g., MTSS, PBIS, social-emotional, trauma-informed, school climate).		
9. SAP structures and organization are clearly outlined (e.g., members, roles and responsibilities, meeting time and location, referral and screening process).		
10. Confidentiality guidelines for the SAT are well delineated with members demonstrating respect for and understanding of caregivers' and students' privacy rights.		
11. The SAT maintains a student data management system to track student attendance, GPA, failed courses, grade retention, and emotional/behavioral data.		
12. An inter-team communication system is in place for the SAT to communicate and align work with other teams.		
13. An agenda is in place for each meeting and meeting notes document cases reviewed, decisions, plans, and next steps.		
14. The SAT uses a systematic process in monitoring student progress.		



15. Meeting time allows for continuous monitoring of SAP cases.		
16. SAP case assignment and management procedures are documented in writing and understood by all team members.		
Intervention		
1. The SAT uses the problem-solving process to plan interventions for students referred to the SAP.		
2. The SAT uses a decision-making process for matching students with a range of mental health and substance use needs to appropriate services.		
3. Students in need of early intervention receive Tier 2 supports.		
4. Students in need of treatment receive Tier 3 supports.		
5. The SAT uses procedures to identify evidence-informed interventions.		
6. The SAT ensures that mental health and substance use early intervention and treatment (Tiers 2 and 3) services and supports fit the unique strengths, needs, and cultural/linguistic consideration of students and families in the school.		
7. Student interventions, recommendations, and outcomes are regularly assessed for quality and goal attainment.		
Guided Support Services		
1. Procedures promote student access to and compliance with school and community services and treatment recommendations.		
2. School mental health and substance use resources are available and accessible.		
3. Community mental health and substance use resources are available and accessible.		
4. Student follow-up procedure and process promotes student contact and support.		
5. The SAT, working with caregivers and agencies, provides supports for students receiving, or who have received, services from any child-serving agency.		
6. Continuous monitoring of student progress, caregiver involvement, and		



treatment recommendations compliance.		
7. The SAT has a plan in place to assist students returning from treatment with school-based services.		
Cooperation and Collaboration		
1. The SAT or district or building representative has investigated and arranged linkages with services within the community.		
2. Community employed mental health, behavioral health, and/or substance use staff participate regularly on the SAT.		
3. Relevant community service organizations working with students in the school receive information concerning the SAP and services offered.		
4. The SAT has developed guidelines on how caregivers and students will become involved in the SAP process.		
5. Clear and consistent caregiver consent process and procedures are in place.		
Program Evaluation		
1. The SAT has a formal process for reviewing and evaluating practices and procedures.		
2. SAP satisfaction and stakeholder input information is solicited and utilized.		
3. Program evaluation includes input from administrators, staff, students, caregivers, and community members.		
Staff Wellness		
1. A Staff Wellness team is in place.		
2. A Staff Wellness coordinator is identified.		
3. The Staff Wellness team meets bi-weekly for at least 30-40 minutes.		
4. The Staff Wellness team conducts a school employee wellness needs assessment or interest survey.		
5. The Staff Wellness team has a written school employee wellness action		



plan based on the 8 dimensions of wellness.		
6. The Staff Wellness team communicates their plan and goals to upper-level administration and/or school board members to ensure support, allocation of resources, and commitments for implementation.		
7. The Staff Wellness Plan is inclusive of all staff (e.g., food service, bus drivers, support staff, maintenance) and is designed to meet the needs across disciplines and roles.		
8. Activities outlined in the Staff Wellness Plan are inclusive for all religions, abilities, races, ethnicities, gender identities, sexual orientations, and other identity characteristics.		
9. The Staff Wellness Plan includes activities designed to complete at the individual level as well as school-wide.		
10. The Staff Wellness team evaluates their activities and plans and adjusts accordingly based on feedback and recommendations.		

Resource Adapted From:

[Pennsylvania SAP Fidelity Checklist](#)
[PENNSYLVANIA STUDENT ASSISTANCE PROGRAM COMPONENTS AND INDICATORS HANDBOOK](#)
[Student Assistance Program Checklist \(NACOA, 2000\)](#)
[Washington Competency Rubric Assessment](#)
[Student Assistance Program Best Practices Formative Assessment Tool from Prevention First](#)
[SHAPE School Mental Health Quality Assessment, 2019](#)



Goals and Action Planning Template

Directions: As a team, identify your top three priorities from the fidelity checklist above to improve upon and complete the table below. Then, complete the action planning table to plan how you will improve implementation for the priority areas.

Priority Brainstorm

Identify your top three priorities from the fidelity checklist

Priority (items from Fidelity Checklist)	Strategies that Would Help Improve	Resources to Assist	Threats, Barriers, or Challenges
1.			
2.			
3.			

Develop action plans for your priorities from above to outline specific steps to assist your school in improving in that fidelity item. Identify a SMART goal (Specific, Measurable, Attainable, Relevant/Realistic and Time-Bound) and determine specific action steps and resources to accomplish your goal. Identify a timeline, person responsible, and evaluation plan.



Action Plan 1

Priority Area (item from fidelity checklist):

SMART Goal (*goals should be ambitious but attainable and realistic to accomplish in the next 6 months*):

By _____, the school will _____ [implementation outcome] for _____ [population].

Action steps?	Resources needed?	Who?	When?	Evaluation Plan?
1. 2.				



Action Plan 2

Priority Area:

SMART Goal (*goals should be ambitious but attainable and realistic to accomplish in the next 6 months*):

By _____, the school will _____ [implementation outcome] for _____ [population].

Action steps?	Resources needed?	Who?	When?	Evaluation Plan?
1. 2.				



Action Plan 3 (not required but encouraged)

Priority Area:

SMART Goal (goals should be ambitious but attainable and realistic to accomplish in the next 6 months):

By _____, the school will _____ [implementation outcome] for _____ [population].

Action steps?	Resources needed?	Who?	When?	Evaluation Plan?
1. 2.				

Resource Adapted from:
[Student Assistance Program Best Practices Formative Assessment Tool from Prevention First ISF Action Planning Companion Guide](#)
[Maryland School Wellness Scorecard](#)