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Mental Health in Elementary Schools: Supporting Students Using a Multi-Tiered System of Support

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Abstract

This Organizational Improvement Plan (OIP) provides a template for addressing the lack of mental health support available to elementary school children. It focuses on the process that will be used at one elementary school to respond to internal and external pressure to provide mental health education. This organizational change is significant and requires a comprehensive change plan. This OIP demonstrates that continuous school improvement coupled with planning and commitment provides a framework, named the hybrid change model, that will ensure successful implementation of this change initiative. This framework includes five stages: study and commit, plan, build capacity, implement and monitor, and continuously improve. Various stakeholders have a role in addressing mental health. Although schools are significant contributors to mental health service delivery, their role is complemented with services provided by others. This plan proposes a multi-tiered system of support model for service delivery. In this model, schools proactively provide mental health education and initial identification and support. If more intensive interventions are required, other professionals are enlisted. This system emphasizes equity and ensures that all children receive education about mental health. Attention is given to leadership styles that are effective in leading similar change initiatives. Ideas for monitoring and evaluating success of the initiative are explored. The importance of communication is recognized, and a detailed plan is presented. Finally, the significance of continuous school improvement in improving results for children is highlighted. Strategies for providing support for others are considered so that mental health can become ubiquitous in education.

Keywords: multi-tiered system of support (MTSS), school mental health, student wellbeing, organizational change, leadership

Executive Summary

The slogan "Mental Health is Health," coined by the Centre for Addiction and Mental Health (2020), captures the essence of why this Organizational Improvement Plan (OIP) is important. Focused on Ellwood Elementary School (EES; a pseudonym), a medium-sized K-8 school in Board X (a pseudonym) in Southern Ontario, this OIP aims to close the gap between the mental health programing currently provided and the mental health support needed to improve student mental health and well-being at the school. EES provides education to a broad spectrum of students from various socioeconomic and cultural backgrounds. The staff at EES have a focus of meeting the developmental needs of all children and have experienced success in supporting students with physical and cognitive deficits. However, one aspect of children's well-being has been left behind—mental health.

While one in five Canadians are expected to experience a mental health problem or illness each year, 70% of mental illness is said to begin in adolescence, and 20% of children are not receiving needed services to support their mental health and well-being (Canadian Mental Health Association, 2021a; Centre for Addiction and Mental Health, 2021; Government of Canada, 2006; Mental Health Commission of Canada, 2013a; Syan et al., 2021). These shocking statistics are the impetus for better supporting students within the elementary school system. Addressing mental health early, and competently, reduces the need for more intensive mental health interventions as children reach adulthood (Koller & Bertel, 2006; Ministry of Children, Community and Social Services, 2012; World Health Organization, 2021). This OIP outlines a holistic, student-centred approach to supporting mental health at EES that ensures mental health becomes part of the ethos of the school. Schools are appropriate and effective organizations for providing the mental health support needed for school-aged children (Moon et al., 2017; Ontario Ministry of Education, 2019). Since teachers at EES subscribe to a culture that holds diversity, inclusion, and equity in high regard, it makes sense that they would be part of the solution to close the gap in mental health programming at EES. However, as teachers are not trained mental health professionals, other experts are needed to support student mental health. This collaborative model that meets the needs of all students at EES is called a multi-tiered system of support (MTSS), and it has been studied extensively and used successfully in education systems around the world (e.g., Bernhardt & Hébert, 2017; Desrochers, 2015; Marsh & Mathur, 2020; Rossen & Cowan, 2014; Weist et al., 2018).

The MTSS is a three-tiered approach with increasing levels of targeted support. Its first tier focuses on school-based prevention and early intervention strategies that target the entire school population. The second tier maintains a focus on prevention while meeting the needs of at-risk students, and the third tier enlists community mental health professionals to provide targeted support to students with the most need. With its focus on equitable intervention strategies, culturally responsive supports, and people within the organization, the MTSS appropriately meets the needs at EES. Additionally, the MTSS has as its foundation critical theory and social justice (Freire, 1970/2018; Levinson et al., 2016; Martinez-Alemán et al., 2015; Wang, 2018), and it fits well with the culture at EES, which operates using tenets of those theories. Using the MTSS to support student mental health reflects the vision of EES that equitable access to education exists for every student.

While the MTSS will address student mental health needs at EES, implementing the model within the school requires considerable organizational change. To be effective and

sustainable, organizational change requires a clearly defined goal, staff who support and understand the need for change, and a change leader within the organization. The goal to improve mental health supports at EES is clear. Helping staff understand the need for change is the role of the change leader who, in this OIP, is the vice-principal at EES. The change leader will use both transformational and distributed leadership to ethically encourage change and provide the necessary support to staff to increase their readiness to accept change (Armenakis & Harris, 2009; Bass, 1990; Leithwood & Jantzi, 2006; Manning & Curtis, 2022; Northouse, 2019).

With the assistance of the school's direction team, the change leader will lead the staff through a change implementation plan, named the hybrid change model, that is designed to support the implementation of the MTSS at EES. In the initial stage of the change model, study and commit, staff at EES will be made aware of the vision for the change and asked to commit, and they will reflect on their learning needs. The second part of the hybrid change model is a cycle based on continuous school improvement, which includes four stages: plan, build capacity, implement and monitor, and continuously improve (Bernhardt, 2018; Bernhardt & Hébert, 2017; Hawley & Sykes, 2007; Park et al., 2013; Smylie, 2009). This chosen framework is relevant to education because it allows for continuous modification of goals and strategies to achieve those goals and better meet students' needs.

Modification of goals and strategies can be achieved only with appropriate monitoring and evaluation. Monitoring is an ongoing process that helps determine whether resources are being used appropriately, whether capacity of staff is sufficient, and whether the organization is working toward the defined goal. Evaluation will occur after each iteration of the hybrid change model to determine stakeholder attitudes and the specific impact the MTSS has had on student mental health. Open communication will facilitate these processes and will be a pillar throughout this change. The ethically focused change leader will ensure that no voices are silenced throughout the process, will value stakeholder input, and will extend communications to caregivers and the school community at EES. With monitoring and evaluation built into the hybrid change model, continuous improvement will be achieved.

The MTSS enhances the concept that mental health is health and is important to all. It provides equitable support to every student. While this OIP focuses on effecting this change at one school, positive results will demonstrate that the cyclical continuous school improvement–based implementation framework can be applied to other changes, both within the school and the board. Additionally, as mental health supports are lacking within the Ontario education system, the framework within this OIP could be used to improve mental health supports at other schools in Board X. Readers of this OIP will come away with a practical plan for introducing a mental health support system in an elementary school.

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This three-year journey began the year I returned to work from maternity leave after giving birth to my beautiful little girl, Alexis. She has been a trooper throughout the whole process, understanding that when Mommy was writing, her days would be filled with trips to the park, pool, and ski hill with Daddy. Alexis, thank you for being the sweet, understanding little girl who would walk into the office to ask me to read you a book or give you one last kiss goodnight. No matter how busy I am, I will always have time to do those things.

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During breaks in the writing process or when I became stuck on an idea, I would listen to the soundtrack to *Hamilton*. The lyrics "why do you write like you're running out of time" are of significance to me as I often felt as though I was writing as if I were running out of time. Now, however, the writing is done, and time remains, so the only question left is, what's next?

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Acronyms

BIPOC (Black, Indigenous, People of Colour)

CAMH (Centre for Addiction and Mental Health)

CMHA (Canadian Mental Health Association)

COVID-19 (Coronavirus Disease 2019)

CSI (Continuous School Improvement)

CYC (Child and Youth Counsellor)

DICE (Duration, Integrity, Commitment, Effort)

EES (Ellwood Elementary School)

EQAO (Education Quality and Accountability Office)

IMHC (Itinerant Mental Health Clinician)

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer, Two-spirited)

MHCC (Mental Health Commission of Canada)

MTSS (Multi-Tiered System of Support)

OCT (Ontario College of Teachers)

OIEL (Ontario Institute for Education Leadership)

OIP (Organizational Improvement Plan)

PDSA (Plan, Do, Study, Act)

PEST (Political, Economic, Social, Technological)

SIP (School Improvement Plan)

SMHO (School Mental Health Ontario)

WHO (World Health Organization)

Chapter 1: Introduction and Problem

Mental health is one of the most neglected areas of public health. The topic is globally pervasive (Centre for Addiction and Mental Health [CAMH], 2021; Patel, 2014), yet no country in the world allocates spending appropriately to address the mental health needs of its population (World Health Organization [WHO], 2011). In Canada, agencies are pushing to recognize mental health on an equivalent basis with physical health (Canadian Mental Health Association [CMHA], 2008; CAMH, 2020). Specifically, children's mental health and well-being is moving to the forefront of the educational landscape. Canadian statistics indicate that 70% of mental health problems have their onset in adolescence and that one in five children who need mental health services do not receive them (CMHA, 2021a; CAMH, 2021; Government of Canada, 2006; Mental Health Commission of Canada [MHCC], 2013a; Syan at el., 2021). It follows that educators who are focused on the success of all students would want to ensure that comprehensive programs that promote student mental health and well-being exist in schools. As marginalized populations often encounter barriers to accessing mental health services (CMHA, 2020a; Government of Canada, 2006; Patel, 2014), efforts to improve existing mental health models in schools need to be equitable; solutions must, therefore, remove systemic barriers and biases so that each student has an equal opportunity to access supports.

This Organizational Improvement Plan (OIP) looks at how mental health services can be provided for students in elementary school. In this chapter, I describe the elementary school in which I am the vice-principal. I present the problem of practice and explain the leadership approaches I will use to implement organizational change. These discussions establish the basis for my proposed solution, which I detail in Chapter 2 and develop an implementation plan for in Chapter 3.

1

Organizational Context

The organizational governance and leadership of education is multi-faceted. The focus of this OIP is Ellwood Elementary School (EES; a pseudonym), a kindergarten to Grade 8 public school operating in the province of Ontario, Canada. In Canada, education is provincially governed, and, in Ontario, the Ministry of Education delivers "early years, child care, and publicly funded education from kindergarten to Grade 12" (Ontario, 2020b, para. 1). To assist in school governance, the province is divided into districts governed by school boards (Ontario Council of Agencies Serving Immigrants, 2015). Boards have no taxing power, and all funding is provided by the province. A provincial funding formula linked to enrolment is used to provide equal opportunities for all students (Ontario Ministry of Education, 2019a). EES receives its direction and financial support from Board X (a pseudonym), which serves over 30,000 students through elementary and secondary schools in both rural and urban settings (Board X, 2020d).

Although the Ontario Ministry of Education prescribes curricula, it does so in fairly general terms, allowing district school boards to define particular directions they want their schools to take. Individuals at Board X who provide this curricular direction work within a standard hierarchical leadership structure, consisting of an elected board of trustees that provides direction to the director of education (Board X, 2020c). The director of education uses superintendents of education as line staff to assist in planning, operation, and supervision of the school system. In addition, the board employs individuals in staff positions to support specific priorities in the schools. Each school is a member of a family of schools for which a particular superintendent is responsible (Board X, 2020c). Principals and vice-principals are charged with implementing ministry and board directives at the school level; however, they have extensive

autonomy in operating their schools, as described by the flexible pathways outlined in the *Ontario Leadership Framework* (Ontario Institute for Education Leadership [OIEL], 2013).

Board X was formed in 1999 (Ontario Regulation, 2008), and EES was built that same year to serve a growing community with diverse needs. The catchment area includes five subsidized housing developments, and many families live on a limited income. The racial demographic is one where approximately 50% of the student population are Black, Indigenous, or People of Colour (BIPOC). In addition, EES has specialized classes for students formally identified with learning disabilities who live both in and outside the school's catchment area. Reflecting on these characteristics has led EES to develop a caring and inclusive vision to propel the organization forward.

Vision, Mission, Values, Purpose, and Goals

Board X (2020e) articulates in its vision that students will achieve educational excellence through dynamic programming delivered by effective staff who are supported by the community. It also highlights that the learning environment is characterized by having empowered administrators. In addition, it supports and advocates for effective communication and mutual compassion and respect in all aspects of its operation.

The motto at EES includes the words *being*, *belonging*, and *contributing* (EES, 2020a). Students are taught to be respectful, resilient, positive members of the school community and to contribute in any way possible. The teachers model these behaviours and incorporate the tenets of the motto into their daily teaching. Our school is a place where all are welcome and everyone learns. Philosophically, Board X and EES are aligned. Each has a student-centred focus that promotes a safe learning environment where educational excellence is the goal. Board X provides a range of services to meet the needs of every child, which complements the welcoming atmosphere at EES.

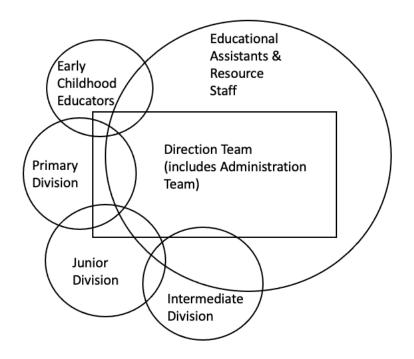
Organizational Structure and Established Leadership Approaches

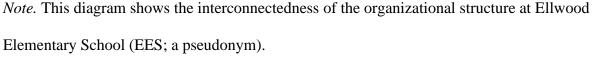
EES is a medium-sized school that caters to a broad range of students and employs a staff of about 50 (EES, 2020b). As stated previously, the school is situated in a densely populated urban area with varied socio-economic status and diverse ethnic population. It has a full-time principal and vice-principal who have worked together at the school for 3 years. This longevity has given the administration time to solidify a leadership style that promotes sharing leadership (as advocated by Armenakis & Harris [2009]; Fullan [2014]; Manning & Curtis [2022]), which will help when instituting change. The school has a formal organizational structure defined by the grades and divided into three divisions: primary (kindergarten to Grade 3), junior (Grades 4 to 6), and intermediate (Grades 7 and 8). Each division subscribes to common school values and goals.

The structural organization at EES is consistent with the functionalist paradigm, which looks at people and their organizations and how they create growth and stability in society (Best, 2003; Fevre et al., 2020; Russell, 2013). The organizational structure for planning and decision making at EES is pictured in Figure 1. Of note is the interconnectedness of the groups within the structure that work together to make decisions. This model encourages the staff to become involved and participate in leadership of various aspects of the organization. Individuals participate in multiple groups and take on diverse roles. In addition to the groups defined by formal function, a broadly representative direction team sets out organizational strategies. Fullan (1985) supports a model where principals interact with teachers, explaining that this cooperation increases innovation. The administration team at EES is comprised of the principal and viceprincipal, who are also active members of the direction team. The administration team provides leadership and support to the other groups in the organizational structure at EES.

Figure 1

Organizational Structure at EES





Supporting Board X's (2020b) equity and inclusion policies and procedures is important at EES. The school is an inclusive organization that provides appropriate supports for children who need them. However, ensuring that every student within the school's diverse population is supported both personally and academically can pose challenges. These challenges include meeting the diverse needs of students, particularly in relation to equally distributing resources and addressing achievement gaps between marginalized students and those who experience fewer biases and barriers (Wan, 2008). Providing equitable resources that meet diverse needs is a tenet of the liberalist ideology (Gutek, 2013; Plazek, 2012). Liberalists believe that education needs to be holistic in nature; this ideology, therefore, supports inclusion of mental health supports within education (Gutek, 2013). Additionally, liberalism values individual student progress and advocates for the provision of choice (Godwin et al., 1998; Gutek, 2013). Because of liberalism's equitable and student-centred values, the EES school administration and staff have adopted this view of education. Moreover, they have committed to serve every child by overcoming the identified challenges within the school's unique population.

This focus on the unique population has led to a number of initiatives, including improving access to information, encouraging inclusivity, and mitigating social and economic challenges. In addition to facilitating access to information by providing multilingual options for all school communications posted on our website, I have encouraged diverse representation on school council, liaised with immigration services to provide new Canadian families with support, ensured safe spaces for children to participate in religious rituals during the school day, championed LGBTQ+ teacher- and student-led initiatives, and implemented our board's *Action Plan on Indigenous Education* (Board X, 2020a).

In addition to racial, religious, and sexual diversity, our students come from very diverse socio-economic backgrounds. The school has developed food and clothing programs and has partnered with community organizations to mitigate social and economic challenges. To address nutrition needs of students from food-insecure families, the school offers breakfast and lunch programs as well as a cooking program that teaches children how to cook nutritionally balanced meals on a budget. EES provides school supplies and winter clothing to children in need, and I have worked with community agencies to support our under-housed families. In addition, I have

forged strong relationships with Family and Children Services, the CMHA, Autism Behavioural Services, and Silent Voice to support our student population at EES.

Board X has mandated its school leaders to make changes they see as appropriate for the communities they serve. The administration team at EES has created a functionally oriented operation that values and promotes staff input and encourages individuals to actively lead the organization. These organizational characteristics have helped define the lens and theoretical framework for this OIP.

Leadership Position and Lens Statement

The change leader's position and the leadership lens of this OIP are the building blocks to the change process. Being in an appropriate role and having the leadership characteristics to address a gap in school performance are key attributes needed for a person to effect organizational change. Demonstrating that one has a sphere of influence within the organization is a starting point. The sphere of influence is particularly important in leading a change initiative (Epstein, 2010; Kaufman, 2011). Nevertheless, choosing an appropriate lens through which to view the change is equally important.

Agency, Power, and Personal Voice

As an administrator at EES and a leader on the school's direction team, I have the capacity to act independently to promote change. Board X's values empower administrators. I have the agency to make changes within EES that will improve situations for children.

Agency is only one component of my position as a leader; I also have power. Northouse (2019) defines power as "the capacity or potential to influence people" (p. 9) and explains the two major kinds of power: positional power and personal power. In my role as a vice-principal, I have positional power because of where I stand in the organization's hierarchy (Bolman & Deal,

2017; Kotter, 1977; Manning & Curtis, 2022; Northouse, 2019). I also recognize that I have personal power, meaning that I am seen as "likable and knowledgeable" (Northouse, 2019, p. 11), because of comments members of my staff have shared with me about my competency, empathy, and organization skills. Because I exhibit both positional power and personal power within my organization, I am part of the sphere of influence (Epstein, 2010) within the school and can, therefore, effect change.

I recognize that power needs to be exerted within an ethical framework. My moral compass is strong and will guide my decisions to be in the best interest of the staff and students at EES. It follows that my leadership practice must be grounded in morality and "infused with integrity, moral purpose, and ethics" (Duignan, 2014, p. 166). Additionally, I must be conscious of white privilege and ensure that my leadership does not preclude the interests of a diverse BIPOC population, a group that has been historically underserved in education (C. James, 2019; Sefa Dei, 2019). I must be an ethical leader in order to be effective and successful (Manning & Curtis, 2022; OIEL, 2013; Tuana, 2014).

Schools are purposeful organizations with mandates to provide academic, civic, social, and personal growth to the children they serve. For EES, the school's main purpose is to educate children in kindergarten to Grade 8. In every initiative EES undertakes, it operates inclusively and purposefully to address children's needs. Elementary schools in Ontario have a defined purpose (Ontario Ministry of Education, 2016) and, as such, reflect the ideas of the functionalist paradigm (Best, 2003; Burrell & Morgan, 1979; Fevre et al., 2020). This paradigm promotes a pragmatic leadership approach and a focus on shared values (Best, 2003; Burrell & Morgan, 1979; Fevre et al., 2020; Gaus et al., 2019), both of which my leadership style incorporates.

Although pragmatic in leading change within EES, I have a liberal view, advocating for education for all, with carefully managed change. I agree with Gutek (2013), who states liberalism demands a "cautious, moderate, and balanced approach" (p. 242), or, as Karier (1972) posits, "reasoned intelligent change" (p. 57). I will use my position as a leader to bring about change in a cautious, careful manner.

Leadership Lens and Leadership Styles

My leadership approach has been shaped both by my personal experiences and by theory. Some of the experiences that have influenced me as a leader occurred well before I had defined my career path. The theoretical lenses through which I view leadership include critical theory and social justice, each having significant ties to mental health. These theories have helped shape my leadership style, which I define as transformational and distributed.

Personal Experiences

Particular events in my past have led to my interest in student mental health and wellbeing and, subsequently, the leadership lens through which I view mental health. When I was an elementary student, a child in my school died by suicide, creating a formative memory that I did not fully understand at the time. In addition, growing up in Northern Ontario exposed me to local reports of suicide by Indigenous people, especially among youth, and suicide continues to be a pervasive concern today (Eggertson, 2015; Forani, 2016; *God's Lake First Nation*, 2019; T. James, 2019; *Wapekeka First Nation*, 2017). Early in my career, one of my elementary students died by suicide. More recently, a student of mine attempted suicide because they felt they could no longer function as a contributing member of society. These are the extreme cases; however, I frequently observe how more common symptoms of mental illness, including anxiety and changes in mood, affect students' academics, social interactions, and demeanors. As an educator, student success is important to me, and my priority is to improve student mental health at EES.

Theoretical Lenses

Currently, education encompasses a neoliberal view that promotes accountability. This has led to the introduction of many accountability measures across Canada with the goal to "improve public education and allay the public's fears that schools are failing our students" (McEwen, 1995, p. 11). Unfortunately, these measures have a negative impact on mental health (Cummins, 2019; Davies & Bansel, 2007; Hall & Pulsford, 2019) as many include inherent barriers and biases that impede the provision of equity for all students (Froese-Germain, 2001). For example, Abawi (2019) draws particular attention to Ontario's Education, Quality and Accountability Office (EQAO) testing, citing that it is culturally biased and misrepresents what racialized students know. Because of these issues with equity, my leadership lens eschews this focus on accountability. Instead, I embrace a more equitable lens as advocated by critical theory.

Max Horkheimer (as cited in Brincat, 2012) first defined critical theory in the 1930s and described emancipation as its central feature. Critical theorists look at ways people are marginalized and endeavour to break this domination by others and create equity (Freire, 1970/2018; Levinson et al., 2016; Paradis, 2020; Sensoy & DiAngelo, 2017). In providing leadership at EES, I encourage staff to focus on the children they serve and be mindful of what the children say and do. Freire (1970/2018) takes this same position, advocating that teachers teach students and students teach teachers. By observing students closely, teachers become aware of conditions that may be causing students to be marginalized. The critical theory lens is particularly important given the demographics at EES. My goal as a leader is to ensure that equity is at the forefront of all we do at EES so that we can work toward emancipation.

Social justice involves building community and developing people (Wang, 2018). It opposes accountability measures that perpetuate systemic barriers. Dantley and Tillman (2010) refine the definition of social justice, stating that it "interrogates the policies and procedures that shape schools and at the same time perpetuate social inequalities and marginalization due to race, class, gender, and other markers of otherness" (p. 19). A social justice perspective is needed to help leaders recognize and change structural inequalities (Sensoy & DiAngelo, 2017), and social justice is of paramount importance to educational change (Shirley, 2018). Two leadership styles are supported by the tenets of critical theory and social justice: transformational leadership and distributed leadership.

Leadership Styles

Transformational leadership focuses on organizational goals through attention to the needs of individual and team followers (Bass, 1990; Northouse, 2019; Van Deventer et al., 2008). According to Leithwood and Jantzi's (2006) work, transformational leadership has a "fundamental aim of fostering capacity development and higher levels of personal commitment to organizational goals on the part of the leaders' colleagues" (p. 204). This focus on the involvement of followers in the leadership process is consistent with a social justice lens that ensures no individual is marginalized and results in a more inclusive school (Urick, 2016). A transformational leader distributes power among those being led, encouraging them to become actively involved in the change process, which improves performance (Manning & Curtis, 2022). Transformational leaders create the climate to effect change.

In distributed leadership, both tasks and leadership are formally shared in the organization (Armenakis & Harris, 2009; Harris, 2013). This arrangement does not mean that everyone is a leader, but as leaders emerge from within the organization, the nominal leader

supports others transitioning to leadership roles. The effect is similar to the power distribution of transformational leadership; however, it differs in that the leadership role is not assigned but is emergent. In distributed leadership, "members of the team take on leadership behaviours to influence the team and to maximize team effectiveness" (Northouse, 2019, p. 373). Amels et al. (2020) advocate for using employee-centric leadership, as found in the distributed leadership style. They claim that those who are experiencing the change need to be involved in all aspects of the change process (Amels et al., 2020). By emphasizing total involvement, including in leadership, distributed leadership supports social justice throughout the organization (Óskarsdóttir et al., 2020). My leadership approach encompasses the tenets of transformational and distributive leadership as I promote active involvement by all staff in change initiatives. Throughout this OIP, my leadership will be guided by equity and inclusion, which are central to critical theory and social justice.

Leadership Problem of Practice

A leadership problem of practice is a "gap between current and more desirable organizational conditions or practices" (Archbald, 2013, p. 139). At EES, the problem of practice is the gap between the mental health programing currently provided and the mental health support needed to improve student mental health and well-being. As the vice-principal at EES, addressing this problem of practice is within my scope, and I am well positioned to enact change through the positional and personal power I have within the organization. Many sources including studies on mental health education, research from national and international health agencies, government publications, and direct evidence from teachers and students at EES confirm that school mental health programs do not effectively meet the needs of students. The WHO (2018) states that "mental health is an integral and essential component of health" (para. 1). Yet because mental illness is not generally a visible disability, it is often ignored, and because of the stigma associated with mental health, those who struggle with it often do not receive the supports they need (Marquez & Saxena, 2016; Tomlinson & Lund, 2012). Koller and Bertel (2006) identify that children spend most of their days at school and that "mental health is essential to learning as well as to social and emotional development" (p. 199). Mental health concerns are becoming more prevalent among students in Canadian schools (CAMH, 2021; MHCC, 2013b; MHCC, 2013c). Moon et al. (2017) state that "administrators' mental health awareness and knowledge are important factors for increasing opportunities to promote mental health intervention efforts in school settings" (p. 385). School practices need to change so that supporting student mental health becomes part of the culture of the organization.

Given that the staff at EES is committed to ensuring that every student achieves their educational potential, any condition that could interfere with this goal needs to be mitigated. Underachieving students often exhibit behaviour issues, dissatisfaction with school, and lack of engagement in the total school program (Hinshaw, 1992; Hoffmann, 2018). Teachers at EES report that these students also present with mood swings, intense emotions, and difficulty concentrating. When questioned, the students express a litany of concerns that are impacting their lives. Issues they raise include bullying, lack of success at school, problems at home, dissatisfaction with themselves, and feelings of anxiety. These concerns have been identified as possible indicators of a deeper problem: poor mental health (Mayo Clinic, 2020; Ontario, 2020a; Ontario Ministry of Education, 2013; Schulte-Körne, 2016).

Mental health programming is part of *The Ontario Curriculum, Grades 1–8: Health and Physical Education, 2019.* In this guideline, the Ontario Ministry of Education (2019b) asks teachers to promote positive mental health in the classroom "by nurturing and supporting students' strengths and assets" (p. 5) and by identifying students who need additional support. These recommendations have merit; however, teachers who implement the curriculum likely have little professional learning in mental health and will struggle to provide effective programming. The dissonance between the government directive and in-school practice needs to be addressed.

This lack of teacher professional learning illustrates that the alarming issue of mental health is being ignored. Even though research has shown that adult mental health concerns begin in childhood, supports for young people are not readily available (CAMH, 2021; Marquez & Saxena, 2016; *Mental health*, 2017; Mental Health and Addictions Scorecard, 2015; MHCC, 2009; Tomlinson & Lund, 2012). How does EES reach a goal state where there is broader staff participation in delivery of mental health programming that will make mental health a priority and part of the school's ethos?

Framing the Problem of Practice

The concept of mental health is not new, but it has evolved over time. Mental health as an area of academic study was first noted in 1946 (Bertolote, 2008). Prior to that, the concept of "mental hygiene" (Bertolote, 2008, p. 113) was referenced as early as the mid 1800s (Bertolote, 2008). In 1950, the WHO explained that mental hygiene refers to all activities and techniques that encourage and maintain mental health, and it defined mental health as a condition subject to fluctuations due to biological and social factors that supports cooperative relations with others and positive contributions to one's environment (WHO, 1951). The Government of Canada (2020) wrote that mental health involves the state of one's "psychological and emotional wellbeing" (para. 3) and touts its necessity for overall health. In its efforts to ensure that mental

health is given the same priority as physical health, the CAMH (2020) coined the slogan "Mental Health is Health" (para. 1) for its public awareness campaign. Mental health in Canada is now being promoted as a component of health care.

The progress in Ontario to bring mental health into the mainstream delivery of service has been slow, taking over 30 years to gain momentum. In 1983, the *Heseltine Report* recommended a community-based continuum of service delivery (as cited in CMHA, 2020b). Ten years later, Ontario reallocated Ministry of Health and Long-Term Care funds to reverse the previous emphasis on hospital care (CMHA, 2020b). In 2012, the Ontario Ministry of Education partnered with other ministries to create a strategy called *Moving on Mental Health: A System That Makes Sense for Children and Youth* (Ontario Ministry of Children, Community and Social Services, 2012, para. 3). The Ontario Ministry of Education (2013) recognized that "schools and school boards play an important role in promoting awareness, prevention, early intervention, and in connecting students to community services" (p. 4) and, as such, created a document called *Supporting Minds: An Educator's Guide to Promoting Student Mental Health and Well-Being* in order to build capacities within schools in the area of mental health. Mental health has evolved from its initial definition to increased prominence today and, because of the emphasis on delivery at the community level, is now part of a school's role.

Organizational Theories

When considering change within an organization, the nature of the organization will guide the leader's actions. Bolman and Deal (2017) have developed a four-frame model designed to help organizational leaders "find clarity and meaning amid the confusion of organizational life" (p. 40). The four frames are (a) structural, (b) human resource, (c) political, and (d) symbolic. Appendix A illustrates a series of questions used to determine an organization's frame placement. The predominant responses to these questions point to EES as fitting within the human resource frame. Bolman and Deal (2017) recommend six ways to support organizations within the human resource frame: (a) build and implement a human resource strategy, (b) hire the right people, (c) keep them, (d) invest in them, (e) empower them, and (f) promote diversity.

As a vice-principal, I do not entirely control each of these principles. Nevertheless, this model promotes actions such as leading ethically, supporting and providing training for people, and having a philosophy that supports diversity. It is not always possible to control hiring; however, staff retention is important. In my role, I can provide a work environment that supports teachers and improves their job satisfaction. De Sousa Sabbagha et al. (2018) determined that job satisfaction and motivation were positively related to staff retention. Three leadership strategies that increase motivation are (a) providing autonomy, (b) supporting improvement, and (c) involving staff in meaningful purpose (Pink, 2011). EES has this workplace orientation, giving teachers leeway in their endeavours, providing professional learning, and articulating the importance of their jobs in helping children learn.

As a leader, it is important to recognize that staff reactions to change will be varied. Bordia et al. (2003) describe three types of concern about change: strategic, structural, and jobrelated uncertainties. Strategic uncertainty is a concern about the reasons for change and sustainability. Structural uncertainty is a concern for changes in reporting structures or work groupings. Job-related uncertainty refers to worrying whether employment will continue. The nature of the change proposed in this OIP will not impact work groupings or job security. Therefore, the most likely concern will arise from strategic uncertainty. Communicating the reasons for change mitigates employees' concerns of strategic uncertainty (Bordia et al., 2003; Li et al., 2020). Thus, the administration team at EES will need to clearly outline the driving forces behind the change, maintain a strong communication plan, and develop plans with staff to ensure sustainable change.

Relevant External Data

Data from external sources point to the importance of addressing mental health in schools. In a United States study on mood disorders and suicide-related outcomes, researchers found that mood disorder indicators, suicide attempts, and suicide rates rose and that the increases were more pronounced for adolescent girls (Twenge et al., 2019). The authors suggested that the increased use of electronic communication and concomitant decline in face-to-face social interactions may have led to increased numbers of mood disorders. They noted that the increase in major depressive episodes that were observed after 2011 was concurrent with the increase in cell phone ownership that was happening at that time.

The data from the United States are echoed in Canadian research. Wiens et al. (2020) used data from the Canadian Community Health Survey for each year from 2011 to 2018 and focused on young people, aged 12 to 24. They found an increase in those expressing concerns about poor/fair mental health and a rise in the number of individuals being professionally diagnosed. They postulated that their findings could be attributed to improved diagnostic practices, increased mental health literacy (perhaps due to programs in schools), or more acceptance of mental health in the community (Wiens et al., 2020).

These studies outline increases in mental health concerns both in the United States and Canada. In Canada, both the federal and provincial governments have published data supporting the need to address mental health. The federal government reports that one in three Canadians will experience mental illness in their lifetime and that mental illness usually begins during adolescence (Government of Canada, 2017). The Ontario government (Ontario, 2020c) has developed a plan to improve and expand existing services, implement solutions to inadequate mental health support, and improve access to these services in order to better serve the province's one million people who experience mental health problems or addiction every year.

Relevant Internal Data

Public Health X (a pseudonym), in partnership with Board X, conducted a survey of caregivers, teachers, and students within the board in 2019. This survey collected information about youth health and well-being to identify issues that could be addressed by schools, the board, and community organizations (Public Health X, 2020). Although not school-specific, the overall data for Board X indicate that 8.5% of students in Grade 7 had thoughts of suicide in a 12-month period prior to November 2017 (Public Health X, 2020). At the school level, EES's bullying prevention plan includes 2019 data related to instances of bullying, identifying that 30% of students in Grades 4 to 6 and 19% of students in Grades 7 and 8 had been bullied a few times over the previous year (EES, 2020a). While no specific quantitative data on mental health have been collected at the school level, the bullying prevention plan includes a goal of increasing staff confidence in supporting students with mental health and behavioural concerns.

Political, Economic, Social, and Technological Factor Analysis

Much that is written about organizational change focuses on the role of leader behaviour and the influence of theoretical change models. However, the impact of external forces on the organization is equally important. Cawsey et al. (2016) outline external factors with which to analyze an organization's external environment. These factors are political, economic, social, and technological, and form the acronym PEST. A PEST analysis of EES and this problem of practice will determine how these external factors will propel the need for change. The Ontario Ministry of Education and Board X both exert political influence on this problem of practice at EES. The ministry requirements for curriculum delivery dictate an academic framework for schools. Concomitantly, the ministry's draft document *Supporting Minds* reveals a political agenda for building mental health support capacity within the school system (Ontario Ministry of Education, 2013). Board X (n.d.-b.) has committed to supporting student mental health by hiring staff to provide school-level assistance. However, closing the gap identified in the problem of practice is complicated by the ministry's introduction of the new mathematics curriculum, which will limit resources that could have supported the closure of this gap. The COVID-19 pandemic continues to have a significant impact on the education system (Davis, 2020; Schleicher, 2020). The ministry's plan of in-school and distance learning (Ontario Ministry of Education, 2020) is almost unmanageable, and staff at EES are experiencing numerous challenges over which they have little control. Direction and support from the political entities governing EES have both helped and hindered efforts to address the problem of practice.

Funding is the primary economic issue limiting the successful implementation of this OIP. Since school financing is enrolment based (Davis, 2020), the amount of funding for EES is insecure. Although Board X maintains a budget line to pay occasional teachers who take the place of contract teachers to facilitate school-wide capacity building, compensation is not comparable to that of contract teachers, and occasional teachers are in short supply (MacDonald, 2019; Rushowy, 2020). Schools are not-for-profit organizations with limited funding and prescribed budgetary expenses. Although fundraising is possible, the amount of funds raised is often affected by school demographics (Spegman, 2017). Since EES services a diverse socioeconomic community with less disposable income, fundraising is less lucrative at EES than at schools servicing wealthier areas. This insecure funding and limited ability to raise funds put additional pressure on the organization to operate within a tight budget.

Demographic influence is a significant social factor contributing to the need for change. Within Board X, students may attend out-of-area schools for magnet programs, such as French Immersion, International Baccalaureate, or developmental classes (Board X, n.d.-a). An unbalanced movement of students will change the natural demographic at a school and the school's ability to equitably deliver a broad range of programs (Evans, 2020; Saporito, 2003). As EES serves students from out of area in its two specialized learning classes, its population has a higher number of learning-disabled students than some other schools. Combined with the withdrawal of students for academically rigorous magnet programs, this addition of students needing special support significantly changes the natural demographic of the school and creates additional challenges within the problem of practice.

Technological factors could impact the problem of practice both positively and negatively. Technology is available that provides immediate access to mental health professionals, such as the Here 24/7 web and phone hotline (Addictions, Mental Health and Crisis Services Waterloo-Wellington, 2020). Although these technological advances are positive, the detrimental effects of increased social media use on mental health have been widely recorded (Collier, 2013; Schønning et al., 2020). With the ubiquity of smartphones, the negative impact of social media requires serious consideration. The external factors in the PEST analysis must be considered carefully for both their positive and negative influences on the problem of practice.

Guiding Questions Emerging From the Leadership Problem of Practice

Three guiding questions have emerged during the investigation of the problem of practice. They relate to building teacher capacity, developing proactive and reactive strategies to

support mental health, and finding an appropriate model of delivery. These questions provide a frame for developing this OIP, and their answers are explored in Chapter 2.

Building Teacher Capacity

Understanding that teachers have a significant role in this OIP begs the following question: What is necessary to build capacity among teachers to support student mental health? Teachers recognize that their roles are changing with respect to supporting student mental health, and they understand the need to adapt to those changes by increasing their mental health literacy (Graham et al., 2011). At EES, teachers concerned about mental health needs of students have asked for support in this area. One aspect of school leadership is to promote and sustain teachers in their efforts to improve their instructional practices (Drago-Severson, 2012; Hallinger et al., 2019; OIEL, 2013). Community mental health professionals have also expressed that they could work more collaboratively with teachers if teachers had a greater knowledge about mental health (Frauenholtz et al., 2017). In this OIP, teachers and school leaders need to work together to provide the mental health literacy training that teachers and their community partners want.

Proactive and Reactive

Addressing the question of what is required to build capacity will ensure teachers have the knowledge they want in order to provide mental health support. A second question addresses the application of this knowledge: How can EES be proactive, as well as reactive, when dealing with mental health? Since issues relating to mental health exist, waiting for problems to arise makes little sense (Katz et al., 2019). Johnson et al. (2011) assert that, for mental health, teachers need to "recognize the red flags" (p. 11). With respect to physical health, both proactive and reactive strategies are in place at EES. The Ontario government has mandated a proactive effort to address physical well-being for children through daily physical activity and discussion of healthy food choices (Ontario Ministry of Education, 2019b). Reactive strategies also exist to support students' physical health. For example, if a child is identified as being deaf or hard of hearing (DHH), they are provided with support from an itinerant DHH teacher. Mental health and physical health are being championed as equally important (CAMH, 2020). Although not a formally defined process, teachers do react to mental health concerns they notice by alerting school administration and contacting caregivers. However, there is no parallel to the proactive strategies used to address physical health. This OIP addresses this gap in service.

Delivery of Mental Health Programming

The first question addressed the deficits in knowledge about mental health that concern teachers. The second question focused on the lack of proactive delivery of mental health services. The final guiding question addresses program delivery: What models provide effective mental health support? Mental health support systems that exist in schools today range from targeted individual service to a whole-school approach (CMHA, 2021b; Dale, 2019; Graetz et al., 2008). The effectiveness of mental health supports can be measured by three criteria: participants' knowledge of mental health, their attitude toward mental health, and their willingness to ask for help (Salerno, 2016). This OIP will analyze solutions for mental health program delivery that are feasible at EES and will recommend a model that best meets the culture and environment of the school.

Leadership-Focused Vision for Change

Currently, EES has no formal policy or informal articulation of steps to support the mental health literacy of students. This gap in service is addressed by this OIP. As previously explained, functionalism includes pragmatic leadership focused on a defined purpose, and elementary schools follow this paradigm. Functionalists look at organizations in terms of their

contributions to a stable society (Fevre et al., 2020; Russell, 2013). This perspective could be interpreted as maintenance of the status quo. However, at EES, the staff believes that contributing to society means it is unreasonable to leave anyone behind; equity of access to services is paramount (Martin, 2019). Predominant onset of mental health illness in adolescence means that support at the elementary-school level has the potential to reduce negative effects on mental health (MHCC, 2013a). Thus, by improving support for student mental health, our society could see long-term benefits.

The goal in every area of EES's operation is to ensure that no child experiences any impediments to learning. For students who express, or demonstrate through their actions, needing mental health supports, a plan should be put in place to meet their needs. There are two important aspects to implementing this plan. First, identification is necessary and, second, support must be available. This OIP will improve teachers' abilities to identify students in need of mental health support and determine strategies to provide support for identified students.

As a result of this OIP, the school should be a more caring place, where students are comfortable sharing their concerns about mental health and teachers are compassionate listeners. Additionally, addressing mental health may reduce bullying and aggression, mitigate behaviour issues, and improve students' ability to handle personal adversity (Naylor et al., 2009). As mental health is addressed, academics will concomitantly improve (Ferguson & Power, 2014). The goal state for EES is an organization where all students' mental health needs are met so that each student has every opportunity to experience improved well-being and academic success.

Stakeholders

As vice-principal and the change leader in this OIP, I believe bringing mental health into the ethos of EES is important. However, many stakeholders, including the Ministry of Education, Board X, teachers, students, caregivers, and community health providers, hold different perspectives, potentially some in favour of and some opposed to this belief. As these stakeholders could have competing priorities, key needs of each group that this OIP must address will first be identified.

Ministry of Education

The Ontario Ministry of Education defines curriculum areas with prescribed activities and goals for publicly funded schools to deliver (Ontario Ministry of Education, 2016). Although supportive of mental health education, the ministry has been remiss by not providing a comprehensive mental health education curriculum document. Schools are expected to address each of the ministry-defined curriculum areas, leaving little room for mental health education. Gutek (2013) explains the conservative perspective that, if schools take on "non-academic custodial, therapeutic, and social functions, they dilute, weaken, and distort their primary role" (p. 255). As the primary role of a school is to educate students through prescribed ministry curricula, any actions that schools take, such as introducing additional mental health curricula, would be of concern to the ministry.

Board X

Board X is focused on delivering a total educational program, and a focus on mental health must complement the existing academic curriculum. The board recognizes the importance of emotional health and advocates that staff should develop an "understanding of the clear relationship between student well-being, mental health, and achievement in order to increase resiliency and self-advocacy skills" (Board X, 2019, p. 1). In addition, the board hired a social worker, specifically to support mental health of Indigenous students (Board X, n.d.-c), which demonstrates an active commitment to mental health for a particular underrepresented group.

Teachers

Teachers want to support student mental health; however, they lack mental health literacy. Mental health literacy includes knowledge and abilities that enable the recognition and management or prevention of mental health concerns (Jorm et al., 1997; School Mental Health Ontario [SMHO], 2013). Teachers may have concerns over the amount of time required to improve their mental health literacy to the point where they feel they can effectively support student mental health. Improving teacher mental health literacy is a key need for this stakeholder group.

Students

Students, especially those experiencing mental health concerns, are stakeholders who will welcome this initiative. Research by Burke and Grosvenor (2003) emphasized how important an initiative like this is. Their study invited young people to describe their vision of an ideal school. Children indicated wanting a "safe haven" (Burke & Grosvenor, 2003, p. 110) and wanting schools to "counter the effect of stress" (p. 110) in their lives. Improving mental health supports in schools will enhance student well-being. The 2014 Ontario Child Health Study found that almost one quarter of school-aged children were not in good mental health and, of those students, 60% were supported by resources within the school (Waddell et al., 2019). This high level of uptake suggests the need for a comprehensive model of service within the school system (SMHO, 2013).

Caregivers

Caregivers of students at EES are likely to have disparate views about introducing a mental health focus. Some may want the school to address only literacy and numeracy; however, others may see a need for expanded goals, as indicated by a province-wide survey where 88% of

respondents agreed that health-related goals should be addressed by schools (People for Education, 2014). Communicating the link between improved academics and mental health supports will be an important step in garnering caregiver support.

Community Health Providers

Increasing the focus on mental health in schools could result in prevention measures that decrease the need for community mental health service intervention (Mental Health Education Resource Centre, 2021). However, community mental health service providers could be apprehensive about the potential increase in demand of support that may arise as more pressing mental health concerns are identified. Alleviating this concern by demonstrating that early intervention reduces acute service needs will garner support.

Change Drivers

Change drivers are internal and external pressures that encourage organizational change. With respect to EES, three pressures are providing the impetus for change. First, the ubiquity of mental health information has moved mental health into the lexicon of the public. Second, Ontario government policy with respect to mental health is in a state of flux. Third, stakeholders are asking that the profile of mental health be raised. These change drivers need consideration to successfully implement this OIP.

Mental health is becoming part of the public narrative and is increasingly identified and more broadly discussed in society (Comeau et al., 2019; MHCC, 2013b). Schools are also becoming part of the narrative. Various authors report that mental health is becoming an increasingly prevalent and complex concern within schools (Mazzone et al., 2007; MHCC, 2013b; Moon et al., 2017; Ontario Ministry of Education, 2013). The current pandemic has also brought mental health to the fore. The Hospital for Sick Children (2020) recognizes that COVID- 19 restrictions have negatively impacted children's and families' routines and social interactions, which in turn is affecting children's mental health. Teachers at EES have begun to recognize mental health as an area to which they want to contribute.

The Ontario government has articulated policy that encourages adopting a mental health orientation (Ontario Ministry of Health, 2011). Jointly, the Ontario Ministry of Health (2011) and the Ontario Ministry of Education (2013) promote strategies for early intervention and identify a need to build capacity within the school system. Schools should promote positive mental health, identify students who need support, and ensure those in need are connected with the appropriate external agencies that can provide support (Ontario Ministry of Education, 2013). Outlining policy and programming requirements that call for a whole-school approach to support student well-being indicates a clear push by the ministry to change practice. Promoting an environment where members of the school community are accepted and where they feel protected is of paramount importance.

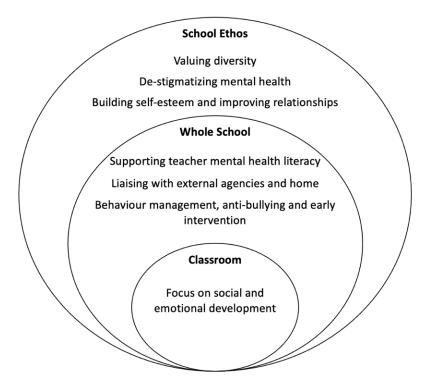
As mental health moves into the public narrative, stakeholders are becoming more vocal on the issue. The Canadian Civil Liberties Association (2017) is concerned with the fact that mental health care is not funded for all Canadians. The Canadian Alliance on Mental Illness and Mental Health (2020) recommends that mental health become part of the framework of health services. It wants improved access to a system that meets every Canadian's needs and that provides a continuum of care to all ages (Canadian Alliance on Mental Illness and Mental Health, 2020). Similarly, the CMHA (2020c) wants good mental health to be a focus in "every workplace, school and neighbourhood" (para. 10), and the CAMH (2019) advocates for mental health and physical health to be treated equally. In its policy on safe schools, Board X (2018) indirectly addresses mental health by considering harassment on the basis of gender identity, sexual orientation, race, colour, or disability as unacceptable. The clear implication of these collective concerns is that mental health needs to be a focus in schools and needs to be treated equally to physical health.

Conceptual Framework

This OIP is centred around a strength-based approach to mental health. This approach focuses on the abilities and strengths of individuals to support their mental well-being, as opposed to deficits and a focus on failures (Xie, 2013). This idea is consistent with tenets of critical theory, which provide for the emancipation of individuals so that they can act autonomously and without barriers (Brincat, 2012; Paradis, 2020). Conceptually, the focus of this OIP is to create an environment at EES that supports mental health. Integral to a conceptual framework is a model or graph indicating what is going to be studied (Gilson & Goldberg, 2015; Maxwell, 2012; Miles & Huberman, 1994). My conceptual framework, shown in Figure 2, is based on Hornby and Atkinson's (2003) model. This model was developed to guide schools in promoting positive mental health. The initial focus will be in the classroom, followed by a whole-school approach to improving mental health supports. Subsequently, the change will permeate the entire school ethos.

Figure 2

Conceptual Framework Model to Promote Student Mental Health



Note: Adapted from "A Framework for Promoting Mental Health in School," by G. Hornby and M. Atkinson, 2003, *Pastoral Care in Education*, 21(2), p. 3–9 (<u>https://doi-org.proxy1.lib.uwo.ca/10.1111/1468-0122.00256</u>). Copyright 2003 by the National Association

of Pastoral Care in Education.

Organizational Change Readiness

Cawsey et al. (2016) define organizational change readiness as "the degree to which the organization as a whole perceives the need for change and accepts it" (p.134). The prospect of being able to effect a change is enhanced by the level of readiness of the organization for which the change is envisioned (Armenakis et al., 1993; Santhidran et al., 2013; Weiner, 2009). Armenakis et al. (1993) compare readiness to Lewin's (1947) unfreezing step in the change process, which is seen as necessary before change can be considered. If an organization is not

ready for change, it is unlikely to happen, regardless of the leader's actions and change strategies (Armenakis et al., 1993; King & Stevenson, 2017; Weiner, 2009). As readiness is such a key part of the change process within organizations, I will need to look at how to create readiness at EES.

Creating Readiness

Readiness for change is created when the necessity of change is understood, the desired result is known, and the question "why change?" has been answered (Beckhard & Harris, 1987; Cawsey et al., 2016; Fullan & Quinn, 2016). By transparently communicating the vision for change to all employees, this OIP will address these three factors. Transformational and distributed leadership align well with an employee-centric approach to creating a vision (Amels et al. 2020; Cawsey et al., 2016). For this OIP, the stakeholders at EES will develop the vision for change to demonstrate the desired future state of the organization, garner support for the change, and inspire excitement within the organization. The change vision should promote the desired result of better mental health supports for students and improved achievement.

Organizational Change Capacity Tools

Judge and Douglas (2009) reviewed change literature and determined eight dimensions related to organizational change readiness: (a) trustworthy leadership, (b) trusting followers, (c) capable champions, (d) involved mid-management, (e) innovative culture, (f) accountable culture, (g) effective communication, and (h) systems thinking. Each of these dimensions is reflected in the operation of EES.

The administration team has done a good job of building relationships with staff and gaining their trust in an ethical manner. These behaviours are ones that could decrease resistance during a change movement (Jain et al., 2018; Manning & Curtis, 2022). When change at EES is

needed, it is not coerced, and every effort is made to communicate in a clear, consistent manner how the change will positively impact the school.

Armenakis et al. (1993) discuss "influence strategies" (p. 687) and how they increase readiness for change. One of these strategies, active participation, involves providing individuals within the organization the opportunity to see the benefits of the proposed change (Manning & Curtis, 2022). Cawsey et al. (2016) refer to this approach as the need to answer the stakeholders' question "what's in it for me?" (p. 107) in order to prove the organization is ready for change. Teachers at EES may be concerned about the impact change will have on them. Holt, Armenakis, Harris, and Feild (2007) determined that "readiness occurs when the environment, structure, and organizational members' attitudes are such that employees are receptive to a forthcoming change" (p. 290). At EES, teachers recognize that the way student mental health is approached could improve and know that changes would improve the organization.

Historically, change initiatives proposed at EES have been broadly supported by every member of the team. The distributed leadership style that the administration team has practiced has created a cadre of individuals who, if committed to the importance of the change direction, will champion it forward. At the school level, change is ubiquitous as the political entities governing the school frequently pivot, and the staff at EES is often innovative in its response to these changes. Resources at the school level are limited and deadlines are often inflexible, so EES has an accountable culture. Reciprocal, open communication is encouraged among all levels of stakeholders and is modeled by members of the administration team, who have an open-door policy with teachers, caregivers, and students. By recognizing the inter-connectedness of the various stakeholders at EES in its vision statement, EES demonstrates systems thinking and an open system that is influenced by its external environment. Because each of Judge and Douglas's (2009) dimensions exists at EES, the school and its stakeholders are ready for change.

Internal and External Forces Shaping Change

Several forces shape change within EES. Leaders need to be aware of how working in a unionized environment can impact the change process. Some staff members lean toward involving the union, an external force, if they expect changes to impact their working conditions. Therefore, the change should comply with all collective agreements. Although unprecedented, the current COVID-19 situation facing schools is an external factor that is devouring teacher time. This additional strain will mean that the change process will need to be planned with care to ensure efficient use of time. The school council at EES, whose role it is to "improve pupil achievement and to enhance the accountability of the education system to parents" (Ontario Regulation, 2010), is comprised of caregivers, community members, and school staff. Its input will support and shape the direction of the change proposed.

Field Theory and Force Field Analysis

Field theory is discussed in Burnes' (2004) analysis of Lewin's (1947) planned approach to change. The premise of field theory is that a status quo within an organization is kept in equilibrium through the balance of forces acting on it. In order to effect change, that status quo needs to be disrupted by diminishing or strengthening certain forces in order to cause disequilibrium. Adjustments of behaviour of individuals within the organization result from changes in the force field. The force field is comprised of the push and pull forces that act on the organization. The lens of critical theory, which calls for ensuring underrepresented groups are heard and their needs considered, fits well with a force field analysis as each force can be looked at through a critical lens. A force field analysis considers enabling and constraining forces and their effects on an organization's readiness for change. The analysis also helps the change leader determine which forces need to be adjusted to improve organizational readiness and increase the chances of a successful change. Wong-MingJi (2013) discusses that this analysis could be used at the unfreezing stage to provide a shared understanding of enabling and constraining factors.

A force field analysis was applied to determine readiness for change at EES. The following sections discuss both enabling and constraining forces (summarized in Figure 3). Enabling forces are those that indicate EES is ready for this particular change whereas constraining forces are those that need to be addressed to improve readiness.

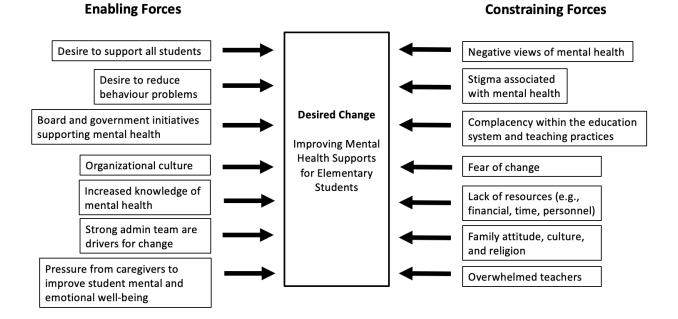
Enabling Forces

Enabling forces are the positive drivers for change. A highly impactful enabling force is the desire teachers have to support their students, particularly since mental health concerns are increasing in children (CAMH, 2021; Jorm et al., 1997; Reinke et al., 2011). As EES staff have identified a desire to support students, the increased knowledge of mental health that they would gain through professional learning serves as an enabling force as well. Other driving forces for change include the desire to reduce behaviour problems in the classroom and the pressure from caregivers encouraging schools to fully support their children's emotional health and well-being (Koller & Bertel, 2006; Perfect & Morris, 2011; Reinke et al., 2011; SMHO, 2013). The administration team at EES is an enabling force because its members support the change and the staff trusts and respects them. Lastly, external pressure, in the form of board and government policies, is driving the change. Together, these forces create a powerful support for this OIP.

Constraining Forces

Enabling forces are acted against by constraining forces, which have the potential to hinder organizational change. Negative views of mental health, including stigma, are a major constraining force (Ferguson & Power, 2014; Reinke et al., 2011) because of individuals' reticence to openly discuss mental health. The attitude, culture, and religious beliefs of families will also affect the change (Reinke et al., 2011), as mental health may not be an appropriate topic of discussion depending on the family. Complacency of teachers and the fear of change are impeding forces (Cawsey et al., 2016; Skaalvik & Skaalvik, 2010). Within the organization as a whole, the lack of resources, including the time to implement new initiatives with appropriate training and money to provide that training, makes effecting a change challenging. A strategy needs to be developed to increase the enabling forces and mitigate the constraining forces to disrupt the status quo within EES.

Figure 3



Force Field Analysis

Note: Adapted from *Organizational Change: An Action-Oriented Toolkit* (p. 196), by T. F. Cawsey, G. Deszca, and C. Ingols, 2016. Copyright 2016 by SAGE Publications, Inc.

Conclusion

The problem of practice, central to this OIP, is that there is a gap between the mental health programing currently provided and the mental health support needed to improve student mental health and well-being at EES. Any solution to closing the identified gap will have a lofty goal of meeting the mental health needs of all students at EES. The motivation for this goal has arisen from both internal and external forces that call for mental health to be part of the school system. My theoretical lenses of critical theory and social justice complement the diversity of EES and have led me to choose transformational and distributed leadership styles that encourage broad involvement in the OIP. These leadership approaches will build capacity within the organization. It is understood that in order to effect organizational change the status quo within the organization needs disrupting. The enabling and constraining forces pertinent to the change need to be augmented and mitigated, respectively, to begin this process. The next chapter will detail the leadership strategies and frameworks for leading the change process. Possible solutions to this problem of practice will also be investigated.

Chapter 2: Planning and Development

In Chapter 1, the problem of practice, addressing mental health, was defined and situated within the target organization. Chapter 2 builds on this background and focuses on the planning and development stages, where consideration is given to how the problem should be addressed. This chapter begins with an explanation of leadership approaches to change and then delves into the change process, leading to the selection of the most appropriate change path model for this OIP. A diagnosis of the organization follows, focusing on what needs to change. Possible solutions are explored, and the best option for this OIP is presented and defended. Finally, the role of ethics in leadership during organizational change is examined.

Leadership Approaches to Change

Previously, I described how functionalism, liberalism, critical theory, and social justice contribute to the overall leadership framework in this OIP and led to my adoption of two leadership styles: transformational leadership and distributed leadership. As a respected viceprincipal tasked with leading school improvement at EES, I will use these styles to address the needed change identified in the problem of practice.

Leadership Beginnings

Having the power and position to enact change is important but needs to be tempered by understanding the effect of privilege, a social construct that benefits members of a dominant group (C. James, 2019; Sefa Dei, 2019; Sensoy & DiAngelo, 2017). As a vice-principal, I have legitimate power, and because of my historical relationship with staff, I also have what Northouse (2019) refers to as referent and expert power. In addition, helping the organization reach its new vision is within my purview as a member of the direction team, which is charged with school improvement. Having the agency to enact change is effective only when coupled with a leadership style that complements the needs of the organization. Transformational leadership focuses on interactions between leaders and followers (Burns, 1978; Downton, 1973) and promotes inclusivity (Urick, 2016). In these interactions, followers are encouraged to become leaders, and leaders develop a higher level of moral responsibility with the goal of satisfying the followers' needs (Burns, 1978; Zhu et al., 2011). In addition, transformational leadership is characterized by a leader who helps followers perform well by promoting changes to their values, norms, and personal interests (Choi et al., 2017). Since this problem of practice aims to change attitudes about mental health, leading to the adoption of a mental health focus throughout EES, transformational leadership is appropriate.

Transformational leadership can be directive or participative (Bass, 2010). My initial approach to implementing this change will be directive, reflecting that the change is initially leader driven. I will follow what Kouzes and Posner (2017) refer to as "the five practices of exemplary leadership" (p. 12) that (a) model the way, (b) inspire a shared vision, (c) challenge the process, (d) enable others to act, and (e) encourage the heart. I care about addressing mental health in schools and will demonstrate my commitment to change through an inclusive lens. By developing a vision for change that is linked to the vision statement of EES, future outcomes will be clear. I will encourage ideas that challenge the Eurocentric view of leadership and will demonstrate flexibility by evaluating and adopting new ideas. Enabling others to act is the only way to accomplish tasks in a flat organization like EES where organizational hierarchy is minimal. To encourage the heart, I will celebrate success throughout this initiative. As the initiative matures, my leadership style will shift from directive to participative. This approach

will encourage staff to actively participate in the change process, as advocated by Manning and Curtis (2022).

Leadership Expectations

Transformational leaders encourage accomplishments beyond expectations, helping followers reach their fullest potentials (Northouse, 2019). This leadership style has also been deemed effective in motivating followers (Bass, 2010; Leithwood & Jantzi, 2006; Manning & Curtis, 2022; Noruzy et al., 2012). When comparing three leadership styles—transactional, transformational, and passive-avoidant—Geier (2016) determined that, in normal situations involving non-critical change, transformational leadership was the dominant predictor of followers' performance. Equally important to motivating followers is organizational performance, which is improved by transformational leadership (DeGroot et al., 2000). Output effectiveness, which is part of organizational performance and refers to the ability of an organization to reach its goals, stems from transformational leadership (Choi et al., 2017; Noruzy et al., 2012). This style of leadership will enhance staff performance and encourage members to fully embrace and contribute to the proposed change.

Transformational leadership conveys trust, challenges followers, develops employees, and supports employee well-being (Jacobs et al., 2013; Manning & Curtis, 2022). It increases both affect-based trust and cognitive trust and, through these, fosters helping behaviour within the organization (Zhu & Akhtar, 2014). This increase in helping behaviour strengthens relationships among staff, encouraging a team atmosphere. Transformational leadership creates a stronger vision and contributes to a team's ability to modify the way members behave (Schippers et al., 2008). At EES, transformational leadership will motivate and energize staff and build a team atmosphere, setting the stage for a transition to a distributed leadership style.

Leadership Follow Through

With distributed leadership, leaders will emerge from the staff at EES. Distributed leadership focuses on the interaction between leaders and followers in a particular situation (Fitzsimons et al., 2011; Spillane, 2005). Given the necessity of leadership sharing in educational organizations, distributed leadership is applicable to school situations (Fitzsimons et al., 2011; Harris, 2009; Leithwood et al., 2009).

Researchers have confirmed the effectiveness of distributed leadership. Choi et al. (2017) determined that distributed leadership encourages teams to reach their goals. Teams with distributed leadership work better together and members are more trusting of each other (Northouse, 2019; Spillane, 2005). EES is functionally organized into an overlapping model of groups, as described in Chapter 1, so addressing team effectiveness is an important step in moving the OIP forward. At EES, the leadership team has created an atmosphere of trust, an attribute necessary for effective organizational change (Bass, 2010; Manning & Curtis, 2022). In a study of teacher perceptions, Adiguzelli (2016) found a "significant correlation between distributed leadership and organizational trust perception" (p. 269). Further, a study in Turkish public schools determined that trust in colleagues and principals increased teachers' readiness for change (Zayim & Kondakci, 2014). The improved teamwork, increased trust, and readiness for change fostered by a distributed leadership approach will empower EES teachers to enact the change proposed in this OIP. Indeed, Camburn & Han (2009) report that "distributing leadership to teachers supports instructional change" (p. 42). Because current programming does not meet student mental health needs, instructional changes are needed at EES and a distributed leadership style will facilitate them.

Beginning the OIP implementation with directed transformational leadership will focus the EES teams on the projected change. A shift to participative transformational leadership will promote a deeper level of involvement by staff. Finally, using a distributed style will energize teams and create a readiness for instituting the change advocated in this problem of practice.

Framework for Leading the Change Process

How does one enact change? This question will be answered by focusing on the nature of the change itself and by outlining the plan of how to proceed with the change. Kotter (2011) posits that change is a process that takes time and requires competent leadership. Understanding the nature of the change and choosing an appropriate change framework are initial steps in leading the change process.

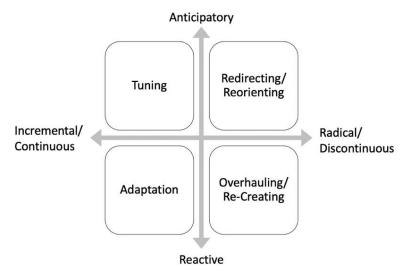
Change Type

Teachers are impacted by frequent changes in education that affect how they teach, what they teach, and how they can support a diverse student body. The frequency of these changes could lead one to assume that teachers are used to change, know how to adapt, and can confidently and purposefully apply changes to their practice. However, Nadler and Tushman's (1989) model, which is used to analyze the change proposed in this OIP, demonstrates that the change to better support mental health may not be as easily implemented as other changes teachers have been asked to make.

Nadler and Tushman (1989) developed a model that is useful in categorizing change (Figure 4). The scope of the change lies on a continuum along the horizontal axis where an incremental/continuous change focuses on individual changes and a radical/discontinuous change affects the entire organization. The positioning of the change, with respect to key influential factors, lies along the vertical axis and can be reactive or anticipatory, where change either occurs as a result of an event or is made in an effort to be proactive, respectively.

Considering that the scope of the proposed change at EES is large and will impact the entire organization, Nadler and Tushman's (1989) model would categorize it as a radical/discontinuous change. Because the proposed change anticipates key influential factors and proactively addresses ongoing and increasing mental health needs of students, it is an anticipatory change. As such, according to Nadler and Tushman's (1989) model, this OIP proposes a redirecting/reorienting change. The core values, culture, and leadership at EES will be maintained throughout the change. The need to proactively enact change is a focal point of this OIP, and EES wants to be part of the solution to provide mental health support to students, as mandated by the Ontario Ministry of Education (2013).

Figure 4



Categorizing Change

Note. Adapted from "Organizational Frame Bending: Principles for Managing Reorientation," by D. Nadler & M. Tushman, 1989, *Academy of Management Executive*, *3*(3), p. 196. Copyright 1989 by Academy of Management.

With this change, I hope to bring a new way of thinking into the ethos of the organization, while using the school's vision of support for all. The complexity of this change type comes with a warning from Cawsey et al. (2016), who state that a reorienting change is time consuming and difficult to lead. Leadership at EES will need to approach this change carefully, listen to the stakeholders' varied perspectives, and provide support that is framed within critical theory and social ideals.

The change to address mental health at EES, as envisioned by this OIP, addresses issues of equity. As such, it supports social justice, which has historically been "a secondary concern or treated superficially" (Rincón-Gallardo, 2018, p. 11). Shirley (2018) describes the social justice movement as one of the most important in the field of educational change in current society. Sensoy and DiAngelo (2017) remind us to "act in service of a more just society" (p. 211). Since all students at EES will benefit from this change, the change will help EES address social justice issues.

In summary, this OIP proposes a major change that proactively addresses an impediment to EES supporting all of its students. This change both anticipates a need and reflects the desire to address mental health in schools. It is an important step in the efforts of EES to operate within a social justice framework.

Approach to Leading Change

In addition to understanding leadership and classifying the change, a change process needs to be considered. To disrupt the status quo at EES, the change process must have a nonlinear approach, a student-centred focus, and a goal of meeting all students' needs (Asghar, 2013; Sensoy & DiAngelo, 2017). A plethora of models provide insight on how to proceed with change. This section analyzes several models for their potential applicability and efficacy for this change initiative and introduces the chosen blended change model.

Appreciative Inquiry Model

A model that promotes the importance of collaborative action is appreciative inquiry. This model has a global focus and encourages human systems to function at their best (Whitney & Trosten-Bloom, 2010). As in distributed leadership, appreciative inquiry discourages a hierarchical approach to change that can mute the voices of those impacted most by the change and instead ensures that every voice is heard (Lewis et al., 2017). This inclusive approach reflects the social justice lens advocated in this OIP. Appreciative inquiry uses a four-dimensional cycle of discovery, dream, design, and destiny (Whitney & Trosten-Bloom, 2010). This cycle measures what is currently happening, what should happen, and how goals can be achieved. Appreciative inquiry is rooted in positivity and avoids deficit-based narratives (Cooperrider & Srivastva, 1987). It provides a positive outcome for the organization by drawing people together to develop creative ideas (Lewis et al., 2017). Although this model would likely disrupt the status quo at EES, its global focus may not address the specific intricacies of change within an educational setting.

Stage Model

John Kotter (1996) developed an approach to leading change detailing eight prescriptive steps that needed to be followed in sequential order and be championed by a core leadership group to effect change. Kotter (2014) later recommended that the steps could run concurrently and continuously, and he recognized the need to use as many individuals within the organization as possible to form an "army of volunteers" (Kotter, 2018, p, 10). Although having a large number of volunteers fits the organizational structure at EES, this model is inappropriate for this

OIP as Kotter (2014) recommends creating a sense of urgency, which would be difficult to establish in a school. Additionally, the linearity of the model does not fit with the needed approach to effect change at EES.

Change Path Model

The change path model described by Cawsey et al. (2016) provides a comprehensive blueprint for effecting change that has similar components to Kotter's (2014) model. It is a fourstep model that includes awakening, mobilization, acceleration, and institutionalization (Cawsey et al., 2016). Awakening calls for an examination of external and internal environments that create forces for and against organizational change. The mobilization step engages others in the change process and sets out a description of the vision for change. The acceleration step involves building momentum and continually engaging and empowering others. Lastly,

institutionalization sets up sustainable change by monitoring and evaluating the enacted change (Cawsey et al., 2016). Although the awakening step is a significant aspect of creating change, like Kotter's (2014) stage model, the linear nature of the change path model does not reflect the style of change needed at EES.

Continuous School Improvement Model

In contrast to Kotter's (2014) and Cawsey et al.'s (1996) linear models, continuous school improvement (CSI) is a cyclical model for change and has an educational focus. CSI is an adaptation of a typical plan, do, study, act (PDSA) cycle (Bernhardt, 2018; Donnelly & Kirk, 2015), which facilitates continuous organizational improvement (Donnelly & Kirk, 2015). The CSI's corresponding steps—plan, implement, evaluate, improve—reflect that change processes within schools are continuously modified (Bernhardt, 2018). CSI has the added benefit of being

student-centred and has a goal of meeting all students' needs (Bernhardt, 2018; Hawley & Sykes, 2007; Park et al., 2013; Smylie, 2009).

The CSI framework focuses on a data-driven decision process. Bernhardt (2018)

develops that framework with five questions:

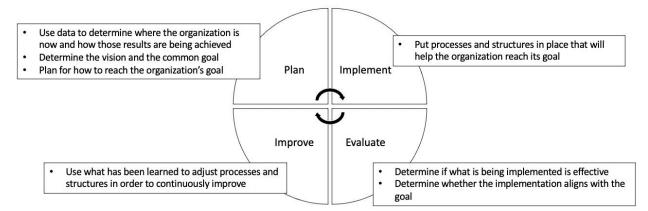
- 1. Where are we now?
- 2. How did we get to where we are?
- 3. Where do we want to be?
- 4. How are we going to get where we want to be?
- 5. Is what we are doing making a difference?

Answers to these questions help define the actions in the CSI cycle. Figure 5 shows an

adaptation of the cyclical CSI model.

Figure 5

Continuous School Improvement Model as a Framework for Leading Change



Note. Adapted from Data Analysis: For Continuous School Improvement (pp. 12-13), by V.

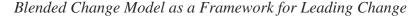
Bernhardt, (2018). Copyright 2018 by Taylor and Francis.

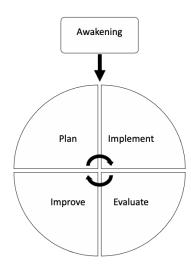
Blended Change Model

Analysis of the appreciative inquiry, stage, change path, and CSI models have led me to decide that a combination of aspects of the change path and CSI models is the most appropriate

framework for leading change in this OIP, and this combination aligns well with the conceptual framework. The awakening stage (Cawsey et al., 2016) complements the CSI model to create a complete framework for leading change that I expect will be effective at EES. A visual representation of this blended change model appears in Figure 6. The awakening stage will first determine why change is needed (Beckhard & Harris, 1987; Cawsey et al., 2016). For EES, awakening means sharing the problem of practice with stakeholders and developing a common understanding that mental health is not being addressed at EES and belief that the school should meet students' mental health needs. At this stage, teachers will commit to supporting the mental health needs of all students at EES. Following this commitment, the actions of plan, implement, evaluate, and improve will guide the organization through the change process.

Figure 6





Note. This model demonstrates how awakening, the first stage of the change path model (Cawsey et al., 2016), complements the cyclical continuous school improvement model.

The need for change is established in the awakening stage, and CSI provides a practical framework for cyclical improvement. In CSI, changes are implemented, then strategies and processes are revised to better meet the objectives of the change (Bernhardt, 2018). For the

change proposed in this OIP, a cyclical model is appropriate as continuous improvement models have been advocated for supporting student mental health (Government of Alberta, 2017).

One advantage of the blended change model is that it harnesses the existing energy in the organization to address the change. Considerable energy exists at EES, as teachers are willing and eager to support students' emotional well-being. The circularity of the CSI model will allow teachers to hone strategies and continually improve results, which will contribute to feelings of success within the process. Although errors and oversights exist within organizational change, CSI will allow staff at EES the latitude to make mistakes and the opportunity to adjust and correct them. Repeated iterations of the CSI model allow for multiple perspectives to be shared and provide equitable opportunities for every individual to make the process their own as they continually adjust practice to meet student needs (Sensoy & DiAngelo, 2017).

Critical Organizational Analysis

The previous section focused on how to implement change. This knowledge is effective within the change process only if the desired change will reach the organization's goals and close identified gaps. This section analyzes the situation at EES, identifies gaps, and determines what needs changing. Nadler and Tushman's (1989) model to analyze organizations and the blended model for leading change form the basis for this organizational analysis.

Gap Analysis

Chapter 1 analyzed EES's readiness to change, referencing Judge and Douglas's (2009) eight dimensions of change readiness. That analysis described the change dimensions at EES but did not reference mental health. Although these dimensions exist at EES some are more developed than others. Specifically, EES has trustworthy leadership, trusting followers, involved management, innovative culture, and accountable culture. However, with respect to mental health, the dimensions of effective communication, cultivating capable champions, and promoting systems thinking are gaps that need to be addressed. A review of the PEST and force field analyses highlights additional needed changes.

Effective Communication

Effective communication about the change is particularly important (Cawsey et al., 2016; Fullan, 1985; Kouzes & Posner, 2017). Doyle (2002) advocates that being a change leader requires unique skills, particularly interpersonal and communication skills, that the leader may need to develop. Klein (1996) and Lewis (2019) have similar ideas of what forms the basis of a communication strategy. They promote communicating often, in a variety of ways but favouring face-to-face communication, using key leaders for formal communication, identifying and using early adopters, and providing relevant information to stakeholders. Communication throughout this OIP's implementation must be timely, relevant, and clear and must focus on mental health.

Cultivating Capable Champions

Capable champions help move the change process forward (Judge & Douglas, 2009). People who have championed previous changes may or may not be interested in supporting and leading this OIP's initiative. As information about mental health is shared throughout EES, leaders will need to observe peoples' responses carefully. In addition, supportive encouragement (King & Stevenson, 2017) will ensure an equitable opportunity for every staff member to champion this emphasis on mental health. The leaders need to identify and support individuals who will champion this OIP.

Systems Thinking

The EES system is a web of relationships and groups that work together to solve problems and meet student needs. Judge and Douglas (2009) highlight that systems thinking

impacts change readiness. By recognizing internal and external organizational interdependencies and focusing on root causes, leaders can demonstrate their understanding of systems thinking (Kilmann, 1991). For this OIP, the EES system will need to interact with community partner systems. The change proposed in this OIP is an anticipatory discontinuous/radical type (Nadler & Tushman, 1989), and external events will impact the EES system and its partner systems. Throughout the change process, systems thinking needs to remain in the forefront.

A Review of PEST and Force Field Analyses

Both the PEST and force field analyses from Chapter 1 point to changes that this OIP needs to address. The plan must negotiate a balance among competing priorities for teacher time. It should also reduce constraining forces and augment enabling ones. Negative views of mental health and the stigma associated with it exist in society and are constraining forces at EES. Yanos (2018) claims people categorize information to understand phenomena, and in the case of mental health, this effort to understand social behaviour leads to stigma. This deficit-focused view of mental health needs to change. Complacency and fear of change are constraining forces that work against the adoption of new ideas (Ehrich et al., 2015). These mindsets indicate potential acceptance of the status quo and, therefore, inhibit change. Mitigating these forces at EES is a priority. At EES, staff want to support all students. Leaders need to encourage this positive orientation and draw links to student mental health. External pressure to support mental health must be documented, shared, and acted upon.

Diagnosing and Analyzing Needed Changes

The blended change model provides a framework for *how* to lead change within an organization. Cawsey et al. (2016) suggest that knowing *what* to change within an organization is of equal importance. When considering what needs to change, a leader must diagnose existing

problems within the organization and make the needed changes. Considerable organizational analysis must be done to clarify the complexities within organizations. A clear framework for analyzing the dynamic within the organization will ensure that appropriate action can take place. For this OIP, Nadler and Tushman's (1989) congruence model serves as a framework for diagnosing and analyzing needed changes at EES.

Congruence Model

Nadler and Tushman's (1989) congruence model analyzes the entire organization in relation to its external environment. The model looks at input factors, such as the environment, resources, and the organization's history, and how they are transformed within the organization to produce outputs, which are the services designed to meet the goals of the organization. The transformation process includes four components: work, formal organization, informal organization, and people (Nadler & Tushman, 1989). Work refers to the tasks an organization must accomplish. The formal organization defines systems and structures that help accomplish the tasks. The informal organization references norms and relationships that have developed within the organization over time. The people are those who perform the tasks, with consideration given to the formal and informal organization. The leader determines the specific approach to the transformation process by analyzing the competencies, strengths, and needs within the organization. Analyzing how to change at EES using Nadler and Tushman's (1989) framework begins by considering the input factors.

Input factors at EES include the familial and caring environment; time, money, and people; and the historical practice of equitable support for all students. The strategy to approach the change will be guided by two factors: the desire to disrupt the status quo in order to support mental health for all students and the need to provide additional resources to enact this change.

Within the transformation process, the work that must be accomplished is to meet the educational need of every child. The formal organization at EES is defined by the organizational structure for planning and decision making outlined in Chapter 1. This structure will be used to identify employees' roles while accomplishing the work. The administration team at EES can further create formal structures by placing teachers in strategic roles throughout the change process and by outlining specific methods to collect and analyze data on the efficacy of the change.

Cultural norms at EES help define the informal organization. The motto at EES drives the cultural norms that guide behaviour. Strong relationships are a key aspect of the school's culture. This cultural norm will benefit the change process as strong relationships improve communication (Cawsey et al., 2016; Lewis, 1999). Another cultural norm is the staff's desire to see every student succeed, which provides impetus for the change to benefit all students at EES. The administration team will need to identify additional cultural norms that either help or hinder the change. The staff at EES will be doing the defined work within the constructs of the formal systems and structures that are in place as well as the informal processes that are defined by cultural norms and relationships.

The people-centric approach of this OIP necessitates recognizing the potential impact change will have on the staff and employing supportive behaviours to alleviate concerns. The administration team can call on the personal leadership resources identified in the *Ontario Leadership Framework* (OIEL, 2013) as a starting point for this work but will also need to consider its members' privilege and internalized dominance to create a supportive environment (Sensoy & DiAngelo, 2017). Additionally, recognizing what others may be able to contribute to the change will further support stakeholder involvement in the process. For example, having staff members with mental health support skills share their experience with other staff will allow them to act as informal leaders and build mental health capacity in others. Understanding people's strengths and identifying and supporting those who will champion the change provides a supportive culture (Kotter, 2011; Weiner, 2009).

The output for this OIP is improved mental health supports for students at EES. Nadler and Tushman (1989) recommend a focus on stakeholder satisfaction and capacity building when measuring the output of the transformation process. The leadership team will emphasize twoway communication to gauge stakeholder satisfaction and determine overarching and individual supports needed to build capacity.

Using the Blended Change Model to Determine What to Change

The blended change model and Bernhardt's (2018) questions will identify the needed changes. Diagnosing what to change comes specifically from answering three of Bernhardt's (2018) questions: Where are we now? How did we get to where we are? and Where do we want to be? Currently, the level of mental health support for students at EES is insufficient. At EES, ministry initiatives, including focuses on math, language, and special education, have taken priority over the increasing need for mental health awareness. Additionally, with the increased need for mental health support, current systems are no longer meeting the needs of the student population. The goal of this OIP is to support all students' mental health. The blended change model provides direction on what to change, and Nadler and Tushman's (1989) model diagnoses and analyzes those changes.

Possible Solutions to the Problem of Practice

Given the mental health concerns explored in Chapter 1 and the paucity of support currently offered at EES, maintaining the status quo within the organization will not address the needs of this problem of practice. The most poignant argument for disrupting the status quo is the social justice focus of meeting the needs of all students, which the current mental health supports are not doing (CAMH, 2021; Modin et al., 2018). As such, based on resource needs and expected consequences, I developed and evaluated three possible solutions to the problem of practice that change the current practice at EES. The paragraphs that follow explain each solution. Subsequently, I present a preferred model, which I chose based on the value to students, financial commitment, acceptability to stakeholders, and support from research.

Possible Solution 1: School-Based Health Centre

Some researchers assert that teachers do not have the knowledge to assist students whose mental health is affecting their well-being (Koller et al., 2004; Kratochwill & Shernoff, 2003; Whitley et al., 2012). Others report that an insufficient number of mental health professionals work within the school system to support student needs (Reinke et al., 2011). Accordingly, this first solution proposes that a mental health professional be contracted to work in a school-based health centre to provide mental health service to EES on demand or on a timetable.

Johnson et al. (2020) advocate for school-based health centres and state that they "increase access to health care and improve academic achievement for underserved students" (p. 286). School-based health centres have also increased access to mental health services for children, particularly those who are part of a marginalized population (Larson et al., 2017). This application fits well with the tenets of critical theory and social justice, which create a framework for this OIP. Teacher professional development, and therefore their time commitment, for this solution would be minimal as the mental health professional would have the knowledge required to support student mental health.

Despite aligning with many core values of this OIP, this solution poses several challenges related to finances and its reactive approach. In addition to the salary costs of the mental health professional, the school-based health centre would need space within the school for service delivery, which would likely involve additional financial commitment to develop and maintain. Because of these requirements, this solution would be fairly expensive and would need board, and possibly ministry, commitment. Securing financial support would be an arduous process. In addition to financial concerns, this approach is unsuitable as it is reactive rather than proactive: it provides support only to students whose needs are already significant. This narrow provision generates several other problems. First, even though all would be eligible for the service, students with higher levels of mental health needs would receive targeted intervention (Larson et al., 2017) and no global mental health curriculum would be offered. Second, the potential wait time for service could be problematic if demand is high. Third, students requiring support would either need to self-identify or be identified by the teacher in the classroom who, as previously acknowledged, may not be well-equipped to identify student mental health concerns. As a result, students could be missed or wrongly identified, and, even if correctly identified, could be reluctant to become involved in a process that signals to others that they need support.

Although school-based health centres provide support to a subset of students within a school, the challenges of implementing such a centre are significant. I rejected this solution on the basis that the disadvantages discussed do not fit with the core value of EES staff members that all students deserve mental health support.

Possible Solution 2: School-Based Mental Health Response Team

Building rapport with students is a key requirement of supporting their mental health, and teachers are well-positioned to do this (Park et al., 2020). Reportedly, about 40% of teachers are

already actively involved in supporting school-aged children's mental health (Franklin et al., 2012). A fitting second solution would be to coordinate individuals at EES who are already supporting children to form a school-based mental health response team. Diversity on this team could be ensured by hand-selecting representatives from all grade divisions and staff who identify as BIPOC or LGBTQ+. The professional learning needed for this team could be provided economically. Numerous external agencies provide free or low-cost opportunities for capacity building through online or in-person courses that cover a wide range of mental health topics (Children's Mental Health Ontario, 2020; LivingWorks, 2020; MHCC, 2020b). Costs could be further reduced if courses were accessed on teachers' own time versus during the school day, which would incur costs for an occasional teacher. Further capacity building could be done within a professional learning community, which provides a collaborative structure that supports teacher engagement in learning (Donohoo & Katz, 2019). Evidence suggests that professional learning communities create opportunities for teachers to learn from each other, with the ultimate result of benefitting students (Owen, 2014). The administration team at EES would be integral to the success of this solution, both as active participants in the response team and as supporters of the professional learning communities by providing resources and clear expectations (Owen, 2014).

Using existing staff to promote student mental health poses three main challenges. First, the teacher time requirement is significant, particularly for those on the response team. Second, targeted individuals may not want to volunteer for this opportunity. Third, significant research would be needed to select professional development courses that fit with the identified mental health needs at EES and that speak to the diverse student population. Although this solution is cost-effective and impactful, teacher commitment is extensive. Previously identified constraints

to organizational change indicated that teachers are already concerned with workload. Given these significant challenges, I rejected this solution.

Possible Solution 3: Multi-Tiered System of Support

A third possible solution is a school-wide prevention system that would focus on global delivery of mental health education to all students at EES. Termed a multi-tiered system of support (MTSS), this support model's goal is to proactively address student mental health needs (Bernhardt & Hébert, 2017; Desrochers, 2015; Marsh & Mathur, 2020; Rossen & Cowan, 2014; Weist et al., 2018).

Benefits of this solution include ease of professional development, a wide-reaching impact, and school decision-making autonomy. Although it requires commitment from school staff, capacity building can happen during contractually scheduled professional learning opportunities, such as staff meetings and professional development days (Donohoo & Katz, 2019). Experts in mental health who are already employed within the school, such as the child and youth counsellor (CYC) and the itinerant mental health clinician (IMHC), can facilitate these sessions. With an MTSS, mental health would become part of the ethos of the school. This school-based service provides education and intervention along a continuum of need (Foley, 2019). Teachers would take an active role in exploring mental health with their students, and student voice would be critical. The school would build relationships with external providers so that EES students could access their support. Teachers would collaborate with caregivers to create a home-school connection to ensure that strategies and supports focused on at school were being translated into the home environment. A final benefit is that implementing this model is a school-based decision, as no additional board or ministry financial support would be required. This solution, however, does not come without certain drawbacks. Using an MTSS requires a shift in teaching practice to include mental health supports. Some teachers may resist this required change in practice (Holt, Armenakis, Feild, & Harris, 2007; Reinke et al., 2011). There is debate about the extent of teachers' roles in providing mental health education: some think teachers should focus solely on academics in the classroom (Koller & Bertel, 2006; Schmoker, 2018) and would be opposed to the addition of mental health curriculum. Overall, implementing and managing this process could be difficult. A significant amount of effort would be required to motivate staff members to participate, support them in this initiative, and create links to external service providers. Despite these challenges, the MTSS ensures that all students would receive mental health awareness education and learn about available supports; therefore, this approach fits well with the core values of staff members at EES and the social justice perspective of this OIP.

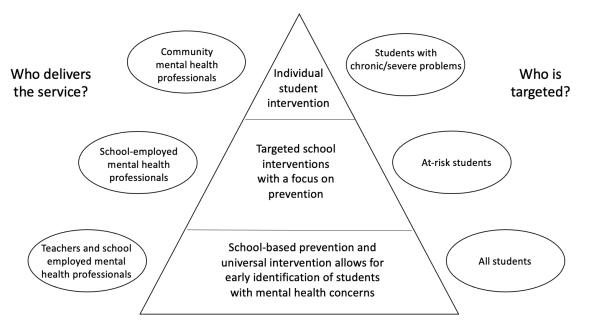
The Preferred Solution for EES

The most pragmatic solution is one that provides the best support to students with the least financial impact to the organization and that is acceptable to internal and external stakeholders. The solution that meets these criteria most fully is the MTSS, which involves and builds capacity of all teaching staff, uses existing support staff, and links to services in the community. This approach is known as a population health model and reflects concern for all students (Graetz et al., 2008; SMHO, 2013; Park et al., 2020; WHO, 2003). It is a three-tiered system of support that incorporates a continuum of strategies, with mental health promotion at the first tier, targeted interventions at the second tier, and individual student intervention via external services at the third tier (Figure 7).

The draft document *Supporting Minds* (Ontario Ministry of Education, 2013) includes a tiered approach to promoting mental health at school; however, its recommendations have not been fully implemented in Board X. Subtle but important differences exist between the preferred solution in this OIP and the model described in the ministry's document. The MTSS model has a broader focus on support from within the school and promotes partnerships with outside agencies to maintain the link between school and clinical student support. Additionally, the MTSS model focuses on a home-school connection whereas the ministry's tiered model (Ontario Ministry of Education, 2013) does not emphasize this important collaboration.

Figure 7

Multi-Tiered System of Support for Student Mental Health



Note. Adapted from "Communication, Planning and Message Development: Promoting School-Based Mental Health Services," by K. Cowan, 2018, *Communique*, 35(1). Copyright 2016 by the National Association of School Psychologists.

The MTSS is an effective mode of service delivery to promote mental health in schools (Desrochers, 2015; Graetz et al., 2008, Rossen & Cowan, 2014). For example, one study found

school-based interventions effective in reducing mental health stigma (Chen et al., 2018). School-based programs also make children more resilient and willing to seek help (Flett & Hewitt, 2013). A literature review on the delivery of mental health services in schools between 1999 and 2010 found little difference in the effectiveness of teacher-delivered service compared to health professional–delivered service (Franklin et al., 2012). The knowledge that EES staff have about their students, including their cultural backgrounds, demographics, and socioeconomic needs, will ensure a social justice approach to intervention as strategies can focus on individual student needs. Clearly, the MTSS is effective in supporting mental health.

Another benefit of the MTSS is its proactive approach. Existing staff at EES with expertise in the area of mental health, the CYC and the IMHC, are easily accessible and available to provide proactive coping strategies to students. Gutkin (2012) promotes proactive measures, like the MTSS, citing problems with the reactive medical model of service delivery. The MTSS proactively provides universal interventions for all students and targeted interventions for students at risk, thereby reducing intensive intervention by professionals.

The financial impact of this solution, while considerable, is not beyond the means of EES. Although there would be a cost to educate teachers on supporting student mental health, the benefit over a number of years is significant when compared to paying a mental health professional's annual salary, as in the school-based health care system. Staggered implementation over a multi-year period could lessen the immediate financial impact. Creative use of professional development days and staff meetings, teacher pairing for mentoring, common planning times, and after-school professional development could all be used at reasonable cost to provide the support teachers need.

Although the MTSS is ideal for students and feasible financially, teachers may be reluctant to embrace it at this time. In a survey of teacher views on supporting mental health, although not asked about their personal mental health concerns, many respondents expressed a need for support of their own emotional health, citing increasing demands they faced (Graham et al. 2011). Another strain is the increasing time pressure on teachers, which is contributing to teacher burnout (Ott et al., 2017). As discussed in the organizational analysis, the extraordinary impact of COVID-19 on schools and the concomitant introduction of a new mathematics curriculum have further compromised teachers' abilities to cope with change. The MTSS implementation plan must carefully balance the competing priorities of addressing mental health needs of students and minimizing additional strain on teachers.

The distributed leadership style will generate broader engagement and allow EES staff to build on individual strengths to contribute to changes they each feel they can accomplish (Armenakis & Harris, 2009). Because under the tenets of distributed leadership, each staff member can be seen as a leader, they can control their involvement in the implementation process and will build momentum by celebrating small successes defined by each staff member's personal accomplishments. Teachers have asked for more education to improve their ability to provide mental health services (Aluh et al., 2018; Froese-Germain & Riel, 2012), and they want to better understand and recognize children's mental health challenges (Reinke et al., 2011). Teachers seem willing to become more involved in mental health; however, their limited capacity for change means that extreme care needs to be taken when implementing change.

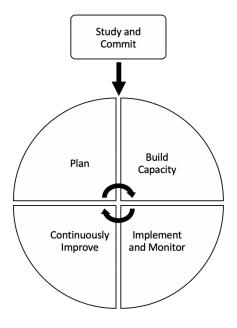
The MTSS could vary in its effect on external stakeholders, such as community agencies that provide mental health support. Although the proactive nature of this system may reduce the necessity of external intervention, it may encourage students to seek support and thus increase demand. The MTSS will improve teachers' knowledge of mental health. Community mental health agencies see this increased understanding as important to improving interactions with schools (Frauenholtz et al., 2017). Since the MTSS is a proven effective way to address mental health, partnerships with community agencies will strengthen. The MTSS will meet children's needs, be financially manageable, and, with careful implementation, be acceptable to both internal and external stakeholders. Therefore, it is the most appropriate model for supporting student mental health at EES.

Revisiting the Blended Change Model

The blended change model was initially proposed as the appropriate framework for leading change in this OIP. A similar framework was developed by Bernhardt and Hébert (2017) to implement a response to intervention, which, in their literature, was used as a support model to improve special education support for students. This support model is synonymous with the MTSS (Bernhardt & Hébert, 2017; Desrochers, 2015; Marsh & Mathur, 2020; Rossen & Cowan, 2014; Weist et al., 2018), and frameworks to implement these systems of support would, therefore, be similar. Bernhardt and Hébert (2017) refer to their framework for leading change specific to education as "Stages of [Response to Intervention] Implementation" (p. 4). The first stage is called study and commit and parallels the awakening stage in the blended change model. The subsequent four stages of implementation, (plan, build capacity, implement and monitor, and continuously improve), are cyclical and parallel the CSI component of the blended change model. The applicability of Bernhardt and Hébert's (2017) stages of implementation to the MTSS has led to a more clearly defined framework for leading change. Additionally, the educational focus of this framework makes it particularly appropriate for this OIP. This hybrid change model, shown in Figure 8, will be used in Chapter 3 to develop the change implementation plan.

Figure 8

Hybrid Change Model



Note. Adapted from *Response to Intervention and Continuous School Improvement: How to Design, Implement, Monitor, and Evaluate a Schoolwide Prevention System* (p. 3), by V. Bernhardt and C. Hébert. Copyright 2017 by Taylor and Francis.

Leadership Ethics and Organizational Change

Organizational change needs to occur in an ethical framework. Manning and Curtis (2022) stress the importance of ethics, claiming that we are entering an era where social responsibility is being promoted and ethical behaviour is warranted. Three areas in which ethics must be considered in this OIP are (a) leadership, (b) implementation, and (c) ethics in relation to the MTSS. Analysis of ethics in each of these areas will provide moral imperative for the organizational change.

Ethical Leadership

Leader behaviour is considered as important as what the leader tries to accomplish (Roberts, 2019). Ethical leaders act fairly and justly, and they are trustworthy, caring, kind, and

honest (Ehrich et al., 2015; Manning & Curtis, 2022; Roberts, 2019). Starratt (2004) posits that ethical leadership is achieved through a moral commitment based on the virtues of responsibility, authenticity, and presence. Each of these characteristics is found in the leadership strategies proposed for this OIP. Transformational leadership is congruent with ethical leadership principles as it is morally grounded and addresses influencing, motivating, and stimulating individuals (Bass & Steidlmeier, 1999; Ciulla, 2004; Manning & Curtis, 2022). Both transformational and distributed leadership emphasize equitable sharing of power and development of others to achieve goals emulating ethical practice.

Ethical leadership fits well within the social justice lens through which this OIP was developed. Starratt (2017) proposed three paradigms of ethics: care, justice, and critique. Shapiro and Stefkovich (2016) propose a fourth paradigm, professional ethics, that complements the aforementioned three. Care focuses on personal ethics, justice addresses fair treatment of others, critique examines power structures within organizations, and professional ethics concentrates on moral aspects inherent within the profession. As the change leader, I need to model each of these areas of ethics throughout the implementation of this OIP. Care is a component of both transformational and distributed leadership as the leader addresses the needs of followers (Leithwood & Jantzi, 2006). Justice is relevant when dealing with teams, and both leadership styles promote active participation by every team member and thus treat members fairly (Bass, 2010). Critique is closely linked to critical theory and social justice as it challenges leaders to address exploitation. Liu (2017) also aligns ethical leadership with critical theory, proposing that they both have an emancipation focus. Professional ethics is reflected in transformational and distributed leadership, which focus efforts on doing what is best for students while promoting professional norms within the organization (National Policy Board for Educational

Administration, 2015; Shapiro & Stefkovich, 2016). This alignment with the paradigms of care, justice, critique, and professional ethics demonstrates that these leadership styles provide an excellent platform for ethical behaviour.

Ethical Implementation of the OIP

Care, justice, critique, and professional ethics are paradigms that require consideration when solving problems within organizations (Shapiro & Stefkovich, 2016). As such, each will be a focus throughout the implementation of this OIP.

Ethic of Care

The ethic of care is demonstrated through loyalty and regard for relationships (Starratt, 2017). The administration team can demonstrate this ethic throughout this OIP's implementation by communicating effectively with stakeholders about the change and showing that their concerns are being heard and addressed. Additionally, since this OIP is student focused, the administration team can demonstrate the ethic of care by honouring each child's dignity (Starratt, 2017) by being sensitive to and inclusive of their diverse needs (Sensoy & DiAngelo, 2017). The focus of the ethic of care on relationships is also a key aspect of capacity building among staff at EES. Focusing on the ethic of care throughout the implementation of this OIP means a significant focus on relationships.

Ethic of Justice

The ethic of justice is concerned not only with doing what is right for the common good of the organization but also with meeting the diverse needs of those within the organization (Shapiro & Stefkovich, 2016; Starratt, 2017). Working within the ethic of justice is crucial to building the circle of support at EES for this OIP. The circle of support involves all those with a role in supporting mental health for students at EES. The administration team needs to frame the involvement of the CYC and IMHC at EES so that their experiences and ideas are valued by teachers and students. Similarly, EES staff interactions with the community and other organizations need to demonstrate the openness of EES to their participation. Honest communication is important to creating an OIP that broadly reflects the culture of the school and community. Starratt (2017) identifies that choices made by the school community as a whole, as well as individuals within the school community, need to reflect a social justice lens. Fitting with this understanding is Stauffer and Turner's (2019) idea that disrupting historical injustices, "in addition to laying a foundation for a healing social justice in the future," (p. 447) is an important part of the moral and ethical framework; therefore, the administration team will consider these ideas within the ethic of justice in this OIP.

Ethic of Critique

As leaders emerge during the OIP's implementation, the ethic of critique will help determine which stakeholder groups, if any, have an advantage over others. Encouragement and support will help ensure tasks are fairly shared and credited. Leaders need to hear and heed all voices (Freire, 2018; Radd & Grosland, 2019; Starratt, 2017). Critique will allow those within the organization to disrupt the status quo of inherent prejudicial practices and recognize the moral issues that arise when the needs of a diverse population are ignored (Sensoy & DiAngelo, 2017; Starratt, 2017). Every member of every group needs to feel that their participation holds as much value as that of others.

Ethics of the Profession

Ethics of the education profession prioritize the interests and needs of the students (Shapiro & Stefkovich, 2016). This prioritization demonstrates a high ethical standard and represents having a strong moral purpose, which involves making a positive difference in the

lives of children (Fullan, 2001; Tuana, 2014). As the leadership team is bound by the ethical standards for the teaching profession outlined by the Ontario College of Teachers (OCT, 2021), it must meet a high ethical standard when closing the gap in this OIP's problem of practice.

The leadership team will need to provide moral direction and motivate and engage teachers through ethical means (National Policy Board for Educational Administration, 2015). Tuana (2014) describes that having "moral hope" (p. 172) is one way to ethically motivate those within an organization. Moral hope works within the premise that all actions are carried out to achieve a moral purpose—in this case, prioritizing student needs. The administration team demonstrates moral hope by its readiness to effect change to promote mental health at EES and meet the needs of every student.

My personal ethical responsibility is an important consideration within this discussion of professional ethics (Shapiro & Stefkovich, 2016). To prioritize the legitimate and diverse needs of students, I need to recognize my privilege as a white, heterosexual female in a position of power to ensure I do not impose my ideals throughout the OIP implementation (Sensoy & DiAngelo, 2017). Imposing my ideals could be what Radd and Grosland (2019) refer to as "desirablizing whiteness" (p. 656), which involves including "racially minoritized students in actions, situations, formats, and settings where they have been absent or underrepresented" (p. 656). The pitfall with this targeted inclusion is that the concept of white supremacy is upheld and that whiteness, the assimilation to white culture, is the desirable state. To combat whiteness, I will need to "identify and examine the related systemic and structural context to discern where and how injustice becomes predictable" (Radd & Grosland, 2019, p. 671) by considering inherent prejudices related to mental health support in schools. By recognizing my privilege, I will attempt to combat whiteness by shifting the power dynamics within the organization.

Ethics in Relation to the MTSS

Ethics are engrained in the MTSS. Bernhardt and Hébert (2017) outline the importance of staff commitment in an MTSS and expect implementation with "integrity and fidelity" (p. 7), meaning that the OIP contains accurate information and is implemented ethically. Importantly, student privacy and confidentiality must be respected within the circle of support to facilitate open communication (Rodger et al., 2018). Conversely, students must be aware that codes of conduct and laws require both teachers and mental health professionals to break confidentiality in certain situations, such as when a child needs protection (*Child, Youth and Family Services Act*, 2017).

Inclusion and equity, two other components of ethics, are also promoted within the MTSS. These components are realized by including the entire student population in the first tier of support and by ensuring fewer students, particularly those in minority populations, move to the second tier of support and become labelled as at risk (Bernhardt & Hébert, 2017). When discussing mental health in the classroom, teachers can ensure inclusivity by using a non-biased approach when presenting material (Sensoy & Oslam, 2017). Additionally, when identifying students who might need support above the tier-one level, teachers must respect the needs of a marginalized population.

Conclusion

This section on planning and development has led me to select a framework for leading the change process, has provided an organizational analysis that highlights areas of impact within EES, and has introduced a solution to the problem of practice. I selected a unique combination of awakening and CSI as the framework for leading the change process, subsequently defined as the hybrid change model. The organizational analysis highlighted the broad impact that change can have on an organization. The transformational and distributed leadership styles I chose will be instrumental in mitigating this impact. I chose an MTSS as a solution to the problem of practice for its socially just impact, its success reported in the research, and its applicability to supporting student mental health initiatives. Ethics were explored in relation to leadership and participation in the change process. Principles of ethics will permeate both the implementation of the OIP and the MTSS. This chapter lays the foundation for Chapter 3, where a comprehensive explanation of the implementation, evaluation, and communication plans will complete this OIP.

Chapter 3: Implementation, Evaluation, and Communication

The contextual analysis, theoretical and conceptual basis, and framework for leading the change process for the chosen solution were explored in the first two chapters. Chapter 3 describes how the hybrid change model, presented in Chapter 2, will be used to bring the MTSS into practice at EES. This chapter outlines a change implementation plan that includes strategies to engage teachers in the hybrid change model and encourage their leadership. In addition to addressing capacity building among staff, Chapter 3 explores community outreach and provides strategies to track the progress of the hybrid change model. It also outlines a comprehensive communication plan. Given the emphasis on stakeholder involvement in the hybrid change model, the change implementation plan will consider stakeholder needs and feedback. This chapter also identifies and predicts potential issues and develops solutions. This OIP culminates with a future orientation of how the expected success of this initiative can be built upon going forward.

Change Implementation Plan

The problem of practice in this OIP identifies the gap between the mental health programing currently provided and the mental health support needed to improve student mental health at EES. In order to close this gap and create a climate that is responsive to all students' mental health needs, the solution must build on the social justice orientation of EES. The MTSS has an asset-based orientation, and it not only meets the identified need to address mental health but also aligns with the critical theory and social justice on which this OIP is built. In addition, literature advocates for using an MTSS to support student mental health (Desroches, 2015; Ontario Ministry of Education, 2020; Rossen & Cowan, 2014). This support model has a whole-school focus and fits within cost considerations, and its implementation is within the scope of

school-level decision making and within the agency of the school administration. The appropriateness of the MTSS for the change at EES is clear, and its successful implementation using the hybrid change model is the desired outcome.

While implementing the hybrid change model as a framework for leading change, my roles will be, as Cawsey et al. (2016) suggest, emotional champion and developmental strategist. Full leader commitment is a key factor in effective change (Armenakis & Harris, 2009; Miazga, 2017). My vision of what needs to happen and my engagement in the change will help implement this OIP and demonstrate my commitment to this process. Introspective analysis of my own strengths as a change leader have led me to recognize that, in order to prepare the staff at EES for this change, I need to do what Mintzberg and Westley (2001) advocate: think first. Cawsey et al. (2016) refer to thinking first as a "prelude to action" (p. 301), which will precede the study and commit stage of the hybrid change model.

Prelude to Action

For this OIP, the prelude to action will consist of three steps: prepare, share, and announce. Being prepared allows leaders to see opportunities and enhances their accountability (Llopis, 2014). In the case of this OIP, preparation includes gathering evidence that supports the need for change in mental health support at EES. In addition, information will be gathered that supports the importance of addressing mental health in schools and research that demonstrates that the MTSS is the most effective support model for EES. Having this information will prepare me to share with staff what is not working and why this new support model is the best way to proceed; these two details are important when informing staff that an organizational change is coming (Kislik, 2018). Additionally, MTSS experts and mental health professionals who are available and willing to support the change initiative at EES will need to be identified. Information on other educational institutions that have increased mental health supports in schools, and the leaders responsible for those changes, can provide additional perspectives on the proposed change.

Following this preparation step, I will engage in two-way communication to share ideas with relevant individuals and agencies. First, I will contact the CYC and IMHC, as these individuals have an overall perspective of mental health at EES. Concomitantly, I will discuss my intention to address mental health at EES with the school superintendent and principal to enlist their support. Finally, I will engage local community mental health agencies that will provide mental health support at the top tier of the MTSS to garner their input. These conversations will allow for sharing of ideas and assist in developing the announcement of the proposed change.

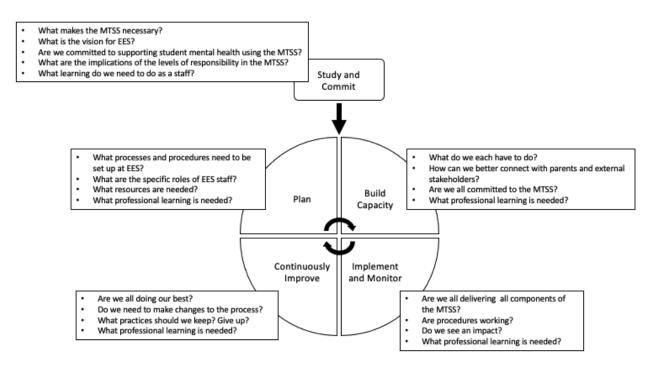
The final step in the prelude to action is to announce the proposed change. Using the ideas garnered throughout the sharing process, the administration team will announce the proposed change at a whole-team meeting, as recommended by Kislik (2018). Once all EES staff are aware of the change, the change plan will be presented to school council. The goal of these communications will be to share the rationale for the proposed change. Once the change is announced and promoted, the prelude to action will be complete. The administration team will then lead the staff through the steps of the hybrid change model with the goal of implementing the MTSS at EES.

Stages of Implementation

The hybrid change model presented in Chapter 2 is a reasonable framework to use when enacting change within an organization. This section discusses the model's application to the MTSS at EES. The hybrid change model sets out goals for each of its five stages. These stages are designed to move from a study and commit stage, where total staff commitment is garnered, through a cyclical process that, when implemented effectively, allows for continuous evaluation and modification to meet the changing needs of students and staff (Bernhardt & Hébert, 2017). Figure 9 contains guiding questions that provide the structure to implement the MTSS.

Figure 9

Questions Guiding Change in the Hybrid Change Model



Note: This model references the multi-tiered system of support (MTSS) that will be used at Ellwood Elementary School (EES; a pseudonym) to improve student mental health.

The hybrid change model requires individuals at EES to be involved in different capacities, depending on the stage. Appendix B outlines responsibilities at each stage and presents a 12-month plan for implementation. Progressing through the five stages of the hybrid change model will require those leading the change at any particular stage to act with integrity and fidelity (Bernhardt & Hébert, 2017) and focus on the ethics of care, justice, critique, and professional ethics (Shapiro & Stefkovich, 2016; Starratt, 2017). By weaving these elements into each stage, the change will progress with the focus on critical theory and social justice (Shapiro & Stefkovich, 2016; Starratt, 2017; Stauffer & Turner, 2019) outlined in Chapter 1.

Study and Commit

The hybrid change model begins with an opportunity for staff to study the proposed change and commit to its implementation. This study and commit stage will provide staff at EES time to investigate school data (Bernhardt & Hébert, 2017) and understand why the MTSS is a good fit for EES. Although I will develop a solid understanding of this information during the prelude to action, staff will need to develop a shared vision of the proposed change and commit to supporting it. Staff will be encouraged to bring their ideas to the process. Recommended strategies for influencing people and groups include education, communication, participation, support, and negotiation (Armenakis & Harris, 2009; Cawsey et al., 2016; Fullan, 2014). Clear and open communication is integral to this step in the hybrid change model. My distributed leadership style will promote and encourage broad participation (Armenakis & Harris, 2009; Camburn & Han, 2009; Harris, 2009). The direction team will complement my leadership, creating a system of support that will model sensitivity to staff mental health and well-being and create a caring and empathetic culture (SMHO, 2013). Each staff member will be asked write down one personal goal for the change initiative, thus demonstrating their commitment. The administration team will meet one-on-one with staff to discuss their goals and gauge individual commitment levels. For those concerned about the initiative and perhaps reluctant to participate, the administration team will dialogue with those individuals to determine how they can be better supported. After completing this stage, all staff will understand the pyramidal MTSS model for supporting student mental health and will commit to delivering the instruction that is part of the model's first tier.

Plan

In the plan stage, plans, processes, and procedures for the support model will be developed (Bernhardt & Hébert, 2017). To begin this stage, the direction team will develop a plan for professional learning that considers teachers' learning styles. The team will audit existing materials designed to support student mental health and update them to include researchbased strategies and relevant pedagogy (SMHO, 2013). Relevant policies and procedures will be consulted to assist with planning, as advocated by Hoyle et al. (2008), and new policies and procedures will be created as needed. These materials will explain educators' roles in supporting student mental health and will present ideas on creating a positive classroom environment, having open conversations about mental health in the classroom to reduce stigma, and talking with parents about mental health (Ontario Ministry of Education, 2013). The goal is that, with appropriate planning, the MTSS implementation will move forward with little frustration and stakeholder resistance.

Build Capacity

In the build capacity stage, professional learning will continue and expectations for all staff will be established. Hoyle et al. (2008) advocate for ongoing, embedded professional learning to build capacity. Capacity building is most effective when members of the entire organization are involved and when the leader takes an active role and learns with the staff (Katz et al., 2018; Robinson et al., 2009). Staff development that changes teacher practice and student outcomes will help change teacher attitudes and beliefs (Donohoo & Katz, 2019; Reupert, 2019). The administration team will develop a roadmap that will help teachers determine next steps for struggling students (SMHO, 2013). This tool will help change teacher practice and embed consistency in mental health protocols within the school. The conceptual framework outlined in

Chapter 1 defines this as the classroom implementation stage. Therefore, all teachers will begin to include education about mental health in their classrooms. Discussions in classrooms will use shared language to ensure consistency (SMHO, 2013). Teachers will be encouraged to support each other and bring personal clarity to the MTSS model.

Implement and Monitor

The implement and monitor stage will follow the build capacity stage and will focus on developing high-quality instruction and assessing effectiveness of procedures and interventions. Continued professional learning opportunities will promote student achievement and improve school climate (Fullan, 2006; Hirsh, 2011). To facilitate teacher involvement, professional learning will be scheduled during the school day, common teacher planning times, or previously scheduled staff meetings (Stoll et al., 2006). Specific capacity building activities will include best practice workshops where teachers will learn about research-based strategies to support student mental health. At these administration team–led workshops, teachers will be presented with ideas for helping students manage stress, including chunking assignments (SMHO, 2013). In addition, the importance of active playground supervision for mitigating bullying (SMHO, 2013) will be discussed.

As outlined in the conceptual framework, the whole school will now focus on mental health and building relationships. EES will expand its ethos to value diversity, de-stigmatize mental health, build self-esteem, and improve relationships. Building healthy relationships supports good mental health and reduces bullying (Bickmore, 2011; Garner, 2019). Relevant to the social justice lens of this OIP, building relationships to address bullying decreases risks for marginalized students (Bickmore, 2011). This relationship-building strategy is reflected in the MTSS approach. In addition to building relationships within EES, the school will strengthen

relationships with external agencies and student homes through an expanded communication strategy that shares information relevant to each stakeholder.

Monitoring procedures will help assess weaknesses and strengths in the implementation process and will help determine which processes and practices should be continued and which should be re-evaluated. Each staff member will revisit their goal from the plan stage and staff will be encouraged to continue setting small goals throughout implementation of the hybrid change model. Setting small goals will facilitate monitoring, as Katz et al. (2018) explain that larger goals are difficult to monitor and can lead to abdication of the monitoring process.

Continuously Improve

In the continuously improve stage, staff at EES will evaluate the impact of the MTSS and share ideas for improvement. In the case of this OIP, continuous improvement requires determining if the MTSS is being implemented accurately and consistently and if the program is being differentiated as necessary to meet students' needs. Differentiating ensures that needs of marginalized individuals are being met through culturally competent practice (Orlando et al., 2018). The administration team will provide resources to staff on how best to support students. A portion of EES's budget will be allocated to create quiet corners in classrooms to promote positive mental health (CMHA, 2021b). A school-wide campaign to educate students on appropriate cellphone use will target cyberbullying, which disproportionately affects marginalized students (Ontario Ministry of Education, 2009). Small-scale changes are needed to support Park et al.'s (2013) idea that continuous improvement is iterative and gradual. Staff will be asked to choose one idea from EES's bullying prevention plan (EES, 2020a) to implement in their classroom and report on its success. Proper execution of this stage ensures relevance of the MTSS to the goals of EES.

At the culmination of the continuously improve stage, the hybrid change model will begin again with the planning stage. The cyclical nature of the hybrid change model, where continuous improvement is the focus, "helps empower those within a system to see themselves as the drivers of change" (Schwartz, 2018, para. 32). Empowerment is an intrinsic motivator for many, and this type of motivation is considered a key contributor to successful school improvement (Beatty, 2016; De Sousa Sabbagha et al., 2018; Schwartz, 2016).

Stakeholder Reactions

Stakeholders are less familiar with the proposed change than the change leader, and their negative or neutral reactions may result from a lack of deep understanding. Therefore, leaders must recognize that stakeholders will need time to adjust to the idea and internalize its implications. After presenting the MTSS as a solution to the problem of practice and sharing supporting research, informal discussions will help the administration team gauge and address stakeholder responses. While stakeholders in this OIP will have varying degrees of involvement and influence, actively engaging them in planning at the beginning of the change process is considered best practice (Lauer, 2021; Lines, 2004; Simoes & Esposito, 2014). Reactions of teachers, caregivers, and external stakeholders need consideration.

Teachers

Developing a clear understanding of what is to be addressed and why will help teachers see how both they and the organization will benefit from the change, which in turn will increase the likelihood of teacher support (Cawsey et al., 2016; Lauer, 2021). Positive reactions are possible, and they could help identify champions for the proposed change (Avey et al., 2008; Vakola, 2016). The energy of innovators and early adopters will propel the change forward. Teachers may also be ambivalent to the proposed change. Ambivalence should not be interpreted as resistance (Cawsey et al., 2016). Leaders will help individuals who are unsure of the proposed change better understand its purpose and benefits. Their concerns may also help leaders better tailor the change for EES. Individuals need time to internalize the change and align their interpretations (Balogun & Johnson, 2016). Time will be provided for the staff at EES to get excited about the change.

Negative reactions, including active resistance to change, are also possible. Vakola's (2016) study indicated active resistance could result from satisfaction with the existing system, concerns with the proposed change, distrust in management, and lack of confidence in one's abilities. Having referent power, as discussed in Chapter 2, means that trust already exists. Additionally, because this change will address the mental health needs of students, teachers will likely support the idea as they tend to have a student-centred focus given their chosen profession. However, other issues may arise: teachers may be concerned about the effectiveness of the proposed solution, wary of changes because of past failures, and/or anxious about their ability to implement the change into their classroom practice. For those who question the use of the MTSS, strategies include providing more data, arranging learning opportunities led by a professional well-versed in this type of support model, visiting a classroom using the process, and/or discussing alternatives they support. Listening to specific concerns about classroom implementation will help identify what capacity building opportunities teachers want.

To mitigate negative reactions and remove barriers to the proposed change, Donohoo and Katz (2019) suggest using collective efficacy: the adoption by those in the organization of a shared belief in the capability to achieve a common goal (Bandura, 1997). When collective efficacy is lacking, teachers' perceptions, motivation, and experiences are affected (Donohoo &

Katz, 2019). A perceived issue of lacking time to learn about and implement proposed changes could be seen as a lack of efficacy and could lead to negative teacher reactions. This perceived time constraint could be mitigated by scheduling professional learning opportunities within the teachers' workday and developing a timetable for introducing the change with teacher input.

Caregivers

Caregivers may also have varying reactions to the proposed change. Caregivers whose children are most affected by mental health may have positive reactions and may even want to provide input, which will be considered respectfully. On the other hand, caregivers may have concerns about the possible impact on academic curriculum or in relation to their family's cultural or religious background. To allay concerns about the curriculum, the administration team can demonstrate that the proposed change is being integrated into ministry-mandated academic curriculum. For caregivers concerned about alignment with family values, new understandings can develop from open conversations that address cultural differences and challenge biases (Sensoy & DiAngelo, 2017; Wang, 2018). The Settlement Worker in Schools, whose role it is to support newcomer families in conjunction with Immigrant Services, could help bridge this gap. To further promote caregiver cooperation and share responsibility, Parekh (2013) suggests including caregivers, when possible, in the classroom (Parekh, 2013). In a similar vein, the Toronto District School Board (2017a; 2017b) promotes inclusion of BIPOC families by helping caregivers develop a sense of belonging and ensuring all voices are heard and opinions valued. Caregiver reactions can be addressed through active listening and by promoting collaboration.

External Stakeholders

Initial discussions about mental health with external stakeholders have already yielded stakeholder support; however, as the plan develops, new ideas or concerns may arise. Providing

an opportunity to discuss these issues will help shift those with negative reactions to more positive ones (Vakola, 2016). It will be important to respect that external stakeholders are in charge of their organizations and that it is they who will decide their level of commitment to the EES change plan. To ensure that their opinions are addressed, open communication channels between EES and these organizations will be maintained.

Identifying Change Agents

Change agents are those who will take on leadership roles throughout the implementation of the hybrid change model. A feature of distributed leadership is that change agents evolve during the change implementation process and are not selected by the change leader (Harris, 2013; Northouse, 2019). Although early adopters may emerge as initial change agents, I will ensure equity of opportunity for others to become change agents at their own pace.

Change agents may also be in that position by the nature of their role in the school. The CYC is a change agent because they will provide expertise on student mental health to EES staff. The Elementary Teachers' Federation of Ontario union representative is also a change agent by nature of their role and will help ensure that union protocols are followed and demands on staff are appropriate. Including the school's equity and inclusion lead as a change agent will ensure the MTSS is implemented through an equitable lens. The CYC, the union representative, and the school's equity and inclusion lead may wish to take active leadership roles or be involved peripherally by supporting others. The direction team will provide ongoing leadership, and its members will act as change agents throughout the implementation process. Whether a change agent evolves during the implementation process or already exists because of their role in the organization, they will need to be engaged in the change process and empower others to achieve the goal of this OIP.

Supports and Resources

Professional learning is an important part of successful change (Antinluoma et al., 2018; Donohoo & Katz, 2019; Dudar et al., 2017) and is included in every stage of the hybrid change model. As part of the change implementation plan, the administration team at EES needs to support teachers' professional learning in a variety of ways (Dudar et al., 2017). This support could include purchasing books or online resources for self-directed learning, providing release time to visit other schools that have implemented similar changes, bringing in an expert to assist in planning, and/or holding a professional development day focused on mental health. Release time will allow teachers within the school to observe each other and share best practices (Donohoo & Katz, 2019). Though the school budget may hold funds for much of this support, seed money from Board X may be needed to offset expenses. Discussing creative ideas to obtain extra financial support will be part of the process of identifying and meeting support needs.

Implementation Hurdle

Significant to this OIP's implementation is the amount of stress due to workload that teachers are experiencing (Ott et al., 2017). There is limited flexibility at EES to alleviate workload, but strategic planning can help make the most of available time. For example, timetables can allow for common planning times for same-grade teachers so that they can work together to develop classroom resources. The administration team can further reduce time required to plan and produce resources by providing staff with materials that could be used in the classroom. In addition, the implementation timetable could be adjusted as necessary.

Building Momentum

Impediments to success will be easier to navigate if momentum builds throughout the change process. Kouzes and Posner (2017) discuss the importance of celebrating small wins to

build momentum. The definition of a win will be different for each individual at EES, as staff will become comfortable with the change and its implementation at different rates. Staff who recognize that the change will positively impact the students and who have the confidence to move forward likely will not fear the change (Whitaker, 2003) and will immediately begin to implement the MTSS in the classroom. The attempts of these early adopters will be celebrated and shared with all staff, which will encourage more participation.

It is expected that after the build capacity stage in the hybrid change model, all staff will have attempted to implement mental health learning in their classrooms. To continually build momentum, those who are engaged and enthusiastic about the change can help those who are still struggling to see the benefits. Positive encouragement will motivate and build momentum, as those who are recognized and celebrated will have a bigger desire to achieve at a high standard (Kouzes & Posner, 2017). Anyone in a leadership role will also need to recognize that, to build momentum, motivation needs to be tailored to the individual and diversified to meet the specific needs of each staff member (Owens & Valesky, 2007).

Limitations

Limitations exist in the change implementation plan in relation to both the MTSS and the hybrid change model. Although research validates the MTSS for supporting student mental health (Reupert, 2019; SMHO, 2013; Vaillancourt et al., 2013; Weist et al., 2018), determining its effectiveness at EES may be difficult. Relevant data would need to be collected once the MTSS has been implemented, which could be challenging for two reasons. First, although a cohort study that assesses causality (e.g., Song & Chung, 2010) would clearly demonstrate the MTSS's impact, application of such a study would be difficult. Analyzing the effect of the MTSS on a specific cohort over a number of years would require the MTSS to remain

unchanged, which is the antithesis of the cyclical nature of the hybrid change model. Second, the effectiveness of the MTSS could be affected by staffing changes. Such changes pose two challenges: that capacity will need to be built among new staff, which could interrupt the MTSS delivery, and that this capacity building may come from existing staff rather than mental health professionals, which could decrease the effectiveness of the MTSS delivery (Cook et al., 2015).

Not having a finite goal creates another limitation. The model's cyclical framework means that the target goal is always being redefined to ensure continuous improvement (Bernhardt, 2018; Hawley & Sykes, 2007; Nash, 2011; Smylie, 2009). This lack of a finite goal means that staff may become fatigued or discouraged throughout the change process. The administration team will motivate staff by highlighting accomplishments and successes along the way.

Change Process Potentiality of Success, Monitoring, and Evaluation

Many sources report that 70% of change initiatives fail (Arnéguy et al., 2018; Beer & Nohria, 2000; Hammer & Champy, 2001; Miller, 2002; Senturia et al., 2008). Moving forward with a change plan that could not succeed would be irresponsible; therefore, metrics should be used that help determine the potentiality of success for a particular change initiative prior to its implementation. Even if the potential for success exists, ongoing monitoring and evaluation is necessary to ensure the initiative's continued success. Monitoring and evaluating mental health programs is "critical to facilitating learning and providing accountability to stakeholders" (Augustinavicius et al., 2018, p. 1). Monitoring, by using the inherent measures in the CSI cycle and by applying a PDSA to the study and commit stage, will be used to gauge progress within the change. Evaluation will occur at the end of each iteration of the hybrid change model to determine the effectiveness of the change plan.

Measuring Potentiality of Success

Two metrics can be applied to determine the potentiality of success. Sirkin et al. (2014) developed the duration, integrity, commitment, and effort (DICE) model to measure whether change will advance as planned, and Levin and Fullan's (2008) model outlines principles for successful education reform. Used together, these metrics will provide comprehensive direction on how to improve the likelihood of success of the hybrid change model.

DICE Model

Sirken et al.'s (2014) DICE model measures whether a proposed change will advance as planned. Each of the four factors in the DICE framework is rated on a 4-point scale (detailed in Appendix C), with commitment split into senior-management commitment and employee commitment. A weighting factor of 2 is applied to integrity and senior-management commitment, highlighting the importance of those factors in a project's success. The lower the total score, the more likely the project is to succeed. A score below 14 suggests the project is very likely to succeed, a score above 14 but below 17 implies there are risks to the project's success, and a score over 17 indicates that the project is not likely to succeed (Sirken et al., 2014). This analysis can reveal a need to modify aspects of the OIP, especially during the study and commit and plan stages of the hybrid change model. To lower the DICE score and improve chances of successful change, I can garner staff commitment, review the project frequently, and provide teachers with support to motivate them and improve their skills. As it progresses, the change can be measured on this scale and modifications made to improve its chances of success.

Successful Education Reform

Another method to evaluate an educational change is to compare it to the principles for successful education reform defined by Levin and Fullan (2008). These principles include (a) a

few ambitious goals, (b) a motivational focus, (c) engagement, (d) capacity building, (e) balancing the key focus with other interests, (f) using resources effectively, and (g) transparent communication. When applying these principles to this OIP, the likelihood of success is apparent. This OIP addresses each principle of education reform. First, this OIP has one ambitious goal, to improve student mental health support at EES, which is achievable with appropriate supports. Second, motivating staff is an important step in the study and commit stage of the hybrid change model. Third, the leadership styles used in this OIP have a motivational focus and will lead to multi-level engagement. Fourth, the supportive tenets of the hybrid change model will help build teacher capacity in the area of mental health. Fifth, careful planning will help balance the key focus and other interests. Sixth, as previously discussed, an MTSS uses the limited available resources wisely and effectively. Finally, within the change plan, two-way communication with internal and external stakeholders is a priority and increases the transparency of communication.

Monitoring

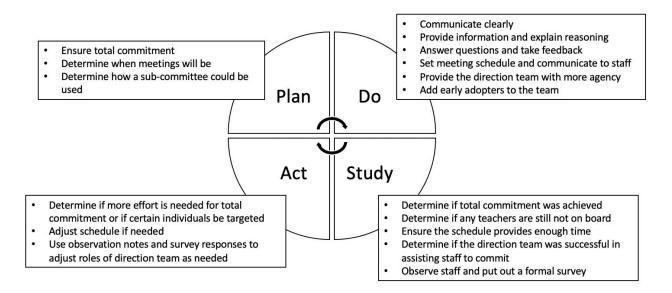
PDSA is a model that monitors a process and guides improvement. Because CSI is a PDSA model customized for education (Bernhardt, 2018; Park et al., 2013; Smylie, 2009), monitoring is embedded into this component of the hybrid change model (i.e., plan, build capacity, implement and monitor, and continuously improve). However, processes for monitoring the study and commit stage, which is not part of the CSI cycle, need to be implemented. This stage is pivotal in engaging staff as it helps create a shared goal with which all staff agree (Bernhardt & Hébert, 2017). If the study and commit stage is not properly implemented, the initiative is at risk of failure. Therefore, to monitor this stage and ensure its purpose is being achieved, a PDSA analysis can be applied to this component of the hybrid change model. Figure 10 shows an example of this application. By monitoring this small

component of the hybrid change model, sustained improvement in the overall change is expected

(Donnelly & Kirk, 2015).

Figure 10

Plan, Do, Study, Act Application to Study and Commit



Note. This model demonstrates how a plan, do, study, act cycle can be applied to the study and commit stage of the hybrid change model.

Evaluation

The effectiveness of this OIP will be evaluated by using formalized processes, measuring teacher attitudes, monitoring student outcomes, and listening to student voice. The formal processes involve a three-pronged approach, which includes the EES School Improvement Plan (SIP), teacher annual learning plans, and team meetings. A survey of staff will be used to determine their attitudes toward the change. The administrative team will track the effect on student behaviour and academics. Students will be invited to share their perceptions of the change, completing the evaluative process.

Formalized Processes

Administrators in Board X are responsible for developing a SIP that is guided by the *Board Improvement Plan for Student Achievement* (Parent Involvement Committee, n.d.). One of the pillars of EES's SIP focuses on the well-being of staff and students (EES, 2021). Administrators must report to their school superintendent on the progress of reaching the goals outlined in the SIP. As such, the SIP will outline the goals for the change, and they will be evaluated in quarterly discussions with the superintendent.

Each year, teachers are required, by Ministry of Education directives, to complete a learning plan as part of the teacher performance appraisal process (Ontario Ministry of Education, 2010). The annual learning plan, which is designed to support teacher learning and growth, will require teachers to set goals related to the mental health initiative and evaluate their success, collaboratively with the EES administration.

Lastly, team meetings will provide data to help evaluate this OIP. At EES, team meetings occur when concerns about students arise or when information sharing is needed for students transitioning between grades or schools. Team meeting participants generally include any individuals who can speak to the student's current strengths and needs and those who need this information for future programing. Analyzing the provided mental health supports will help determine the appropriateness of the interventions that have occurred, and the effectiveness of the MTSS on individual students will be measured. The three prongs—SIP, annual learning plan, and team meetings—create a comprehensive group of formalized evaluation processes.

Attitudinal Survey

Donohoo and Katz (2019) caution that a change can be achieved only when the majority of teachers support and implement it. An attitudinal survey of staff will reveal staff perception of

mental health and help to evaluate teacher commitment. Results of the survey can help measure whether a shift from deficit thinking about mental health to a focus on supporting student strengths has occurred. A shift of this nature is critical to the success of this OIP as it implies a change in attitude, habits, and culture and, thus, a more consequential and sustainable change (Chiodo & Kolpin, 2018; Coburn, 2003; Donohoo & Katz, 2019). If survey results indicate a strong belief in their mutual ability to implement this change, collective efficacy among staff exists. Collective efficacy results in a higher implementation rate of new strategies and procedures geared toward supporting students (Donohoo & Katz, 2019; Goddard et al., 2004).

Student Outcomes and Voice

Formal evaluation strategies and teacher attitudes do not consider the impact of this change on students. Chapter 1 highlighted expected outcomes of the change if student mental health were to be a focus in the school setting. Naylor et al. (2009) suggested that bullying and aggression would reduce, student capacity to handle adversity would improve, and inappropriate behaviours would decrease. In addition, Ferguson and Power (2014) found that academics would improve if mental health supports for elementary students improved. Observing these trends at EES after implementing the MTSS will infer that the plan worked. Bullying frequency and student capacity to handle adversity will be measured using a student survey, similar to the one initiated at EES for the bullying prevention plan (EES, 2020a). This survey will be developed with input from the CYC and IMHC, who can offer their advice as mental health professionals to elicit responses that will guide changes to the next iteration of the hybrid change model. Teachers and the administration team will track the prevalence of inappropriate behaviour to determine if it has changed. Academic performance will be documented through the Ontario provincial report card.

Evaluating impact directly by considering student voice is also key in change efforts. Listening, collaborating, and providing opportunities for leadership are all ways to include student voice, and this kind of support can lead to sustained change initiatives, improved academics, and decreased social injustices (Mitra, 2018). As such, a survey that allows students to share their opinions and provide feedback will be another component of the evaluation process.

Communicating the Need for Change and the Communication Plan

Effective communication is integral to the success of any organizational change. Lewis (2019) references the importance of communication right from the beginning of the change process and claims that it is "key in triggering all change" (p. 23). Communication needs to be at the forefront, from the beginning to the end of the change process (Beatty, 2016). Both the content and process of the communication contribute to its effectiveness (Goodman & Truss, 2004). This section begins by discussing communication approaches specific to the situation at EES then details a communication plan that includes all stakeholders.

Communicating the Change at EES

For this OIP, the communication process begins in the prelude to action with the initial change announcement and continues through each iteration of the hybrid change model. I will drive effective communication designed to engage stakeholders in the change process through consistent messaging that will reduce uncertainty, solicit stakeholder input, and support leadership.

Consistent Messaging to Reduce Uncertainty

Consistent messaging will ensure effective communication (Beatty, 2016; Cawsey et al., 2016; SMHO, 2013), and controlling message content and delivery will reduce uncertainty about

the proposed change (Lewis, 2019). In the prelude to action, consistent messaging is achieved by ensuring all staff hear the same message at the announcement of the proposed change. As uncertainty can result either from not having enough information or from being provided with too much (Lewis, 2019), controlling the content of this initial message will increase staff knowledge without overwhelming, as advocated by Klein (1996). Face-to-face communication also reduces uncertainty and is preferable to written communication (Goodman & Truss, 2004; Klein, 1996; Lewis, 2019); the in-person format of a staff meeting aligns with this recommendation. Ensuring the message is credible will further reduce uncertainty. Credibility will be enhanced by having the superintendent and the EES administration team engaged in this initial meeting. This strategy follows one of Klein's (1996) key principles of communication, which is having the commitment and support of all those within the hierarchy of the organization.

Communication content plays a role in the effectiveness of the change. Clearly expressing the objective of the change in terms of outcomes rather than tasks is important at this juncture (Johnson, 2017) and will minimize the chance of staff feeling overwhelmed. Anticipating and responding to staff questions helps alleviate initial staff concerns (Johnson, 2017). Appendix D outlines four questions by Johnson (2017) and responses applicable to this OIP that will be shared at the initial meeting of EES staff. At this first meeting, staff will have a brief opportunity to ask additional questions; however, staff will be encouraged to internalize the announcement and form questions for subsequent meetings. A timetable for future discussion, capacity building opportunities, and feedback will be provided (Appendix E).

In addition to communicating with the staff at EES, the administration team will also communicate with students' caregivers at the outset of this change plan. Communication to caregivers will begin with a presentation at a monthly school council meeting. The presentation will focus on the reasons for the change and the expected outcomes. Caregivers will have an opportunity to ask questions, and the administration team will assure them that updates will be given and further discussion opportunities granted at future meetings. Following the initial sharing with caregivers, communication will continue to provide information and become interactive to solicit input.

Soliciting Input

Soliciting input from stakeholders during the communication process has a multitude of benefits: it empowers stakeholders, creates a positive climate, and provides opportunities for voices to be heard (Lewis, 2019). Sagie et al. (2001) posit that soliciting input also increases acceptance of the change, promotes stakeholder satisfaction, and improves stakeholders' feelings of control. Sensoy & DiAngelo (2017) invite members of the dominant group, of which I am a part, to act as allies. When soliciting input, being an ally includes inviting others to share different perspectives and facilitating dialogue that is inclusive rather than exclusive (Sensoy & DiAngelo, 2017). Seeking decisional input in a genuine way ensures others' voices are valued (Lewis, 2019). Getting feedback from stakeholders does not mean simply providing them with an avenue to share their ideas; rather, it means involving them in the decision-making process and using their input to adjust the change plan as needed. If, as a leader, I say I am going to value stakeholder input, I must demonstrate this. This act is an example of behavioural integrity, which creates alignment between a leader's words and actions (Simons, 2002).

Supportive Leadership

Transformational and distributed leadership, because of their emphasis on stakeholder involvement in the change process, provide extensive opportunity for stakeholders to be heard (Leithwood & Jantzi, 2006; Northouse, 2019). Teachers will have opportunities to lead and to focus the organizational change to better meet the needs of students and themselves. These leadership styles empower stakeholders and create a trusting climate within the organization.

Trusting relationships are foundational to cohesion between staff and the administration team at EES. Trust is also an important leadership attribute (Manning & Curtis, 2022), particularly with respect to organizational change (Düren, 2016; Judge & Douglas, 2009), because it garners support. Maintaining trust throughout the communication process will invite open communication, reduce uncertainty, and ensure a positive climate. Because disrupting the status quo is necessary to effect this change, I need to be comfortable pushing staff to think outside the box without going so far as to damage trusting relationships. The OCT (2021) identifies care, respect, trust, and integrity as four ethical standards that educators must uphold. It follows that, for this OIP to succeed, communication needs to be ethical, and honesty and integrity need to be maintained. As the change leader, I will need to let staff know that I do not have an answer to every question but that I will make every effort to find the requested information. My leadership styles form the basis for a communication plan based on trust.

Communication Plan

When considering the communication needs for EES, a communication plan will increase the success of the change and show that stakeholders are valued. Beatty (2016) formulated a list of questions to help develop communication plans that foster successful change (Appendix F). These questions create a framework for the communication plan for this OIP.

Roles and Responsibilities

Defining roles and responsibilities for communication creates clarity within the organization. Because I am the change leader in this OIP, I will have primary responsibility for

communicating the change. The principal and superintendent will have supporting roles, as they will understand the change and demonstrate their commitment to the hybrid change model and the MTSS. This commitment of the formal leadership team, comprised of the EES administration and the superintendent, will foster support from EES staff (Klein, 1996). Having a core group of staff, such as the direction team, who are familiar with leading change is an advantage when implementing a mental health initiative (SMHO, 2013). Members of the EES direction team will assist with communication, particularly in small-group and one-to-one interactions. As the change progresses, others who become invested will take on more communication roles and responsibilities. The CYC and IMHC will also be key communicators, providing expert support, as they have significant knowledge of student mental health. Together, these diverse roles will allow for consistent, effective, and comprehensive communication.

Guidelines and Objectives

In educational change, communication helps stakeholders recognize the need for change, plan and develop solutions to a problem, connect with each other during the implementation stage, and integrate the change into the school ethos (Dannefer et al., 1998). In a communication plan, guidelines will ensure accurate and consistent communication and objectives will provide direction for the communication.

As mentioned previously, communication needs to be respectful and accurate (Beatty, 2016, SMHO, 2013), and the leader needs to maintain integrity by matching words to actions (New Zealand Ministry of Education, 2021; Simons, 2002). As vice-principal, I will model respectful communication within all staff interactions. To maintain accuracy and clarity, I will communicate all pivotal procedural information and maintain a central file of all formal written communication. I will demonstrate integrity by doing what I say and saying what I do.

In addition to following these guidelines, communications should meet defined objectives to ensure efficiency and clarity. For this OIP, the initial announcement and all subsequent communications should provide evidence to support the change and promote its implementation (Hunt, 2007). Because this OIP asks teachers to expand their scope beyond the traditional role of imparting academic information, communication must justify this change in role.

Stakeholder Influence, Involvement, and Communication

Communication must occur with EES staff, the EES community, and community mental health partners. During a change, interactions between the change leader and the affected stakeholders help achieve shared goals (Fullan, 1985). I will foster these interactions at EES by informing stakeholders and soliciting feedback. Beatty (2016) promotes using a map to divide stakeholders into groups based on the scope of their influence and the impact the change has on them (Figure 11). The stakeholders in this OIP vary in these metrics. As the change leader, my influence is high, and I will experience significant impact. Individuals on the direction team have a high degree of influence because they are in a leadership role and are involved in many planning and implementation aspects of the change. They will be highly impacted because they have to change their teaching practices. Because they are "decision makers, planners, and doers" (Beatty, 2016, p. 119), two-way communication with them is important.

Figure 11

EES Stakeholder Map of Influence and Impact



Note. This diagram maps how stakeholders at Ellwood Elementary School (EES; a pseudonym) influence and are impacted by the proposed organizational change. Adapted from *The Easy, Hard and Tough Work of Managing Change* (p. 119), by C. Beatty, 2016. Copyright 2016 by Queen's University IRC.

Staff at EES who are not on the direction team do not have as much influence as the change leader or the direction team members, but they will be impacted by the change. Two-way communication will be important to ensure staff have a voice. Members of the EES community, including caregivers, school council, and school neighbours, have a low degree of influence and will not be significantly impacted; therefore, communication with that stakeholder group will be informative with less emphasis on feedback. This communication with the school community will contribute to their engagement with educational reform (Hunt, 2007), and consulting authentically with caregivers fosters mental health and well-being for students (SMHO, 2013). Finally, community partners may influence the process because of their expert knowledge but

may not be directly impacted by the change; therefore, information will be shared and their input sought when appropriate.

Messaging

Messaging needs to be clear and concise. When communicating, focusing on outcomes of the proposed change helps stakeholders see its benefits (Johnson, 2017). Answers to the questions why? what? and how? will clarify the change message (Johnson, 2017). In addition, differentiating the messaging for specific audiences will help address each group's needs and interests (Lewis, 2019; SMHO, 2013). For example, teachers will need to hear a persuasive argument as to why they should change their practices. They will need to understand that they are not required to be mental health professionals; rather, their role will fall within the first tier of the MTSS, which focuses on prevention and intervention. To satisfy this role, teachers are required only to increase their mental health literacy (SMHO, 2013). In contrast to teacher messaging, messages to caregivers will share what is being done in the school, affirm that educational objectives are being maintained, and explain that the goal is to better support students.

Consistency in Communication

Consistent communication leaves little room for confusion. Lewis (2019) outlines two types of communication that should be used during organizational change that promote consistency: formal and informal. She explains that formal communication is done by the organizational leader, uses official channels, and consists of declarations and policy related to the change whereas informal communication is more spontaneous and does not need to be initiated by the organizational leader (Lewis, 2019). At EES, the principal and vice-principal are the organizational leaders. They communicate formally with stakeholders, including the direction team, CYC, IMHC, school council, and community partners. Documenting formal communications ensures consistency. Informal communication can occur among all of the aforementioned groups. Certain groups and individuals will have more opportunity for informal communication. For example, the CYC will be the primary communicator with community partners, and members of the direction team will interact more informally with teaching staff than will the administration team. At biweekly meetings, the administration team, CYC, IMHC and direction team members will review informal communications to confirm their content is consistent. Consistency of communication will be further supported by using shared language, with the same terms and definitions used by all (SMHO, 2013).

Media

Communication needs to be ubiquitous. Klein (1996) advocates for redundant communication, and Lewis (2019) recommends repeating messages and disseminating information widely. To ensure pervasive communication, multiple media will be used in different ways to communicate with stakeholder groups. Although face-to-face communication is preferred, electronic communication will augment in-person communication. A staff website and calendar will provide non-verbal communication, while formal and informal discussions will allow for face-to-face interactions. The EES community will be able to access updates through the EES website, and Board X will receive verbal and written reports.

The staff website, maintained by the change leader, will include a mental health initiative page. There, staff will be able to access information about the change initiative at their leisure. This information will include documents that outline the need for change and that support the hybrid change model. In addition, the page will offer an interactive forum where staff can pose questions and receive answers. The administration team will monitor the forum daily and provide timely feedback. Communication will be enhanced by staff being privy to the discussions initiated by other staff members. A schedule of meetings and deadlines will help staff manage their time. A calendar marking these events will be posted on the website and in the staffroom, and electronic calendar invites will remind staff of the dates.

In addition to written communication on the staff website and calendars, in-person communication opportunities will exist for staff. Open communication will include both formal and informal opportunities, such as scheduled meetings and drop-in conversations. The administration team will host an office hour and invite staff to share their successes and struggles in a judgement-free environment. This platform will allow for authentic feedback and bestpractice discussions with colleagues. Furthermore, one-to-one meetings will be offered to staff who prefer that milieu. Informal opportunities for communication, such as everyday discussions (Klein, 1996; Kotter, 2011; Lewis, 2019), will further indicate to staff the administration team's commitment to open communication. Regular classroom visits will enhance informal communication. Because people appreciate timely feedback, the administration team will visit classrooms each day and provide brief feedback, including one positive observation from the classroom visit and one suggestion for a next step or question about a practice. With an invitation to discuss the feedback, this strategy will facilitate two-way communication and maintain an honest, trusting relationship.

Communication with the EES community will also be multi-faceted. Beyond the initial announcement, ongoing communication with school council will be at the monthly meeting. The administration team will highlight progress and garner feedback. The wider school community will be able to read about milestones and successes both on the school website and in the

monthly newsletter, where a mental health section will be a standard feature. Members of the school community will be invited to contact the school with questions or concerns.

Updates will be shared with Board X through informal in-person updates and formal written communication with the EES superintendent. To ensure continued support for the initiative from Board X, the EES administration team will meet with the superintendent directly during their monthly visits. In addition, formal quarterly reports will be provided to the superintendent, who has the agency to share with appropriate individuals at the board.

Assessing and Improving Effectiveness

When meeting with stakeholders, feedback regarding the communication process will be solicited. The number and type of questions stakeholders are asking will reveal the effectiveness of the communication process. For example, stakeholders asking questions that have already been answered in a previous communication will indicate that communications have been unclear, and steps will be taken to improve clarity. If communication efforts are not meeting expectations, an improved cadre of communication methods will be developed.

Next Steps and Future Considerations

Using the hybrid change model to implement the MTSS at EES over a period of one year will provide staff with the tools to improve mental health for students. However, to create sustainable change and maximize benefits to student mental health, consideration needs to be given to next steps and future plans.

Next Steps

With each iteration of the change cycle, the impact of changing demographics, curriculum updates, and changes in staff and school administration will need to be considered. Goals will need to be revised to ensure continued relevance. Additionally, new support strategies that target the changing student demographic at EES should be investigated. Roles and responsibilities of mental health service providers change, and new community partnerships will need to be explored. In Board X, school administrators are often moved to new schools after 2 or 3 years.

To ensure sustainability, the MTSS and the hybrid change model must become part of the school culture, and appropriate transition planning must occur when the current change leader is replaced (King & Stevenson, 2017). New administrators will receive a mental health transition binder, prepared by the current administration team, that outlines mental health goals achieved and provides suggestions for next steps. The direction team will develop a school-specific mental health policy to formalize the work that has been done. This working document will include guiding questions that promote longevity of the change plan initiative. While a change in leadership may initially appear as a detriment to the program, staff commitment will mitigate the effect of leadership changes. In addition, reciprocal opportunities to learn and grow will become available to both the staff and new leader.

Future Considerations

Although the hybrid change model focuses on one change at EES—improving mental health supports for students—the CSI component (plan, build capacity, implement and monitor, and continuously improve) of the hybrid change model is versatile (Anderson & Kumari, 2009; Park et al., 2013) and could be adapted to other change initiatives at EES. As staff will be familiar with this cyclical process, implementing a new change would be relatively straightforward. The expected positive outcomes resulting from this change process will further confirm this model's efficacy for enacting and supporting sustainable change. As improving outcomes for all children is a focus at EES, CSI will be an excellent path for addressing future

educational change initiatives. The premise in the hybrid change model of having all staff commit to an educational goal enhances student performance and creates equity in the classroom (Newmann, 2007).

In addition to facilitating future changes at EES, the expected success of using the hybrid change model to implement the MTSS could provide a pathway for other schools within the jurisdiction of Board X to support mental health. Anderson and Kumari (2009) claim that continuous improvement models produce positive change and improve teaching practices and student learning. By developing expertise with the hybrid change model, the board will have a cadre of individuals who can provide leadership when schools are looking to successfully institute a change. With the help of the school's superintendent, the administration team at EES will make other schools aware of this model's success in creating school change and could act as a resource for other schools wishing to follow this path.

The Ministry of Education and Board X have identified a need to focus on improving student mental health. EES can become a leader in the board and help other schools develop strategies to address mental health based on the premise of the MTSS. Working with the Board X communications officer, administrators at EES should consider publicizing the school's experience of this change for internal board communication documents and consider sharing the process and results more broadly within the education community.

Knowledge Mobilization

While this OIP focuses on improving mental health supports for students in elementary school, the hybrid change model and the tiered approach of the MTSS are applicable to organizations operating beyond education. Using the hybrid change model as part of a strategic planning process will help organizations identify goals and objectives and provide a roadmap for

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effecting change. The MTSS can be used to address the human resource needs of individuals in any organization. The research in this OIP provides a template for any organization wanting to change attitudes, behaviours, and practices, particularly when wanting to improve conditions for marginalized groups or individuals.

OIP Conclusion

This OIP aims to close the gap between the mental health programming currently provided and the mental health support needed to improve student mental health and well-being at EES. A plethora of literature demonstrates why mental health is important, why it should be addressed in schools, and how it could be addressed. All relevant educational entities, which include the Ontario Ministry of Education, Board X, and EES, are committed to promoting and supporting positive mental health for students. The change leader, using transformational and distributed leadership to empower those within the organization, will lead the staff at EES through an application of the hybrid change model to implement the MTSS, a support model that has been lauded for its efficacy in improving mental health for school-aged children. Implementation through lenses of critical theory and social justice will mitigate the effects of privilege with the aim of supporting those in marginalized populations. The hope is that all students at EES will experience improved mental health and its related benefits.

References

- Abawi, Z. (2019). Decolonizing educational assessment: Ontario elementary students and the EQAO. *Canadian Journal of Education*, 42(4), III–VI.
- Addictions, Mental Health and Crisis Services Waterloo-Wellington. (2020). *Here* 24/7. https://here247.ca
- Adiguzelli, Y. (2016). Examining the relationship between distributed leadership and organizational trust according to opinions of teachers. *Education and Science*, 41(185), 269–280.
- Aluh, D., Dim, O., & Anene-Okeke, C. (2018). Mental health literacy among Nigerian teachers. Asia-Pacific Psychiatry, 10(4), e12329. <u>https://doi.org/10.1111/appy.12329</u>
- Amels, J., Krüger, M., Suhre, C., & van Veen, K. (2020). The effects of distributed leadership and inquiry-based work on primary teachers' capacity to change: Testing a model. *School Effectiveness and School Improvement*, *31*(3), 468–485.
 https://doi.org/10.1080/09243453.2020.1746363
- Anderson, S., & Kumari, R. (2009). Continuous improvement in schools: Understanding the practice. *International Journal of Educational Development*, 29(3), 281–292. https://doi.org/10.1016/j.ijedudev.2008.02.006
- Antinluoma, M., Illomäki, L., Lahti-Nuuttila, P., & Toom, A. (2018). Schools as professional learning communities. *Journal of Education and Learning*, *7*(5), 76–91.
- Archbald, D. (2013). Vision and leadership: Problem-based learning as a teaching tool. *Journal of Leadership Education, 12*(2), 136–147.

- Armenakis, A. A., & Harris, S. G. (2009). Reflections: Our journey in organizational change research and practice. *Journal of Change Management*, 9(2), 127–142. <u>https://doi.org/10.1080/14697010902879079</u>
- Armenakis, A. A., Harris, S. G., & Mossholder, K. W. (1993). Creating readiness for organizational change. *Human Relations*, 46(6), 681–703.

https://doi:10.1177/001872679304600601

Arnéguy, E., Ohana, M., & Stinglhamber, F. (2018). Organizational justice and readiness for change: A concomitant examination of the mediating role of perceived organizational support and identification. *Frontiers in Psychology*, 9, 1172–1172.

https://doi.org/10.3389/fpsyg.2018.01172

Asghar, J. (2013). Critical paradigm: A preamble for novice researchers. *Life Sciences Journal*, *10*(4), 3121–3127.

https://www.academia.edu/6372226/Critical_Paradigm_A_Preamble_for_Novice_Resear chers_

- Augustinavicius, G., Green, M., Lakin, D., & Tol, W. (2018). Monitoring and evaluation of mental health and psychosocial support programs in humanitarian settings: A scoping review of terminology and focus. *Conflict and Health*, *12*(1), 1–9.
 https://doi.org/10.1186/s13031-018-0146-0
- Avey, J., Wernsing, T., & Luthans, F. (2008). Can positive employees help positive organizational change? Impact of psychological capital and emotions on relevant attitudes and behaviors. *The Journal of Applied Behavioral Science*, 44(1), 48–70.
 https://doi.org/10.1177/0021886307311470

Balogun, J., & Johnson, G. (2016). From intended strategies to unintended outcomes: The impact of change recipient sensemaking. *Organization Studies*, 26(11), 1573–1601. https://doi.org/10.1177/0170840605054624

Bandura, A. (1997). Self-efficacy: The exercise of control. W.H. Freeman and Company.

Bass, B. (1990). From transactional to transformational leadership: Learning to share the vision. *Organizational Dynamics*, 18(3), 19–31. <u>https://doi.org/10.1016/0090-2616(90)90061-6</u>

Bass, B. (2010). Two decades of research and development in transformational leadership. *European Journal of Work and Organizational Psychology*, 8(1), 9–32. <u>https://doi.org/10.1080/135943299398410</u>

Bass, B., & Steidlmeier, P. (1999). Ethics, character, and authentic transformational leadership behavior. *The Leadership Quarterly*, *10*(2), 181–217. <u>https://doi.org/10.1016/s1048-9843(99)00016-8</u>

Beatty, C.A. (2016). Communicating during an organizational change. Queen's University IRC.

- Beckhard, R., & Harris, R. (1987). Organizational transitions: Managing complex change (2nd ed.). Addison-Wesley.
- Beer, M., & Nohria, N. (Eds.). (2000). Cracking the code of change. *Harvard Business Review*. https://hbr.org/2000/05/cracking-the-code-of-change

Bernhardt, V. (2018). Data analysis: For continuous school improvement. Routledge. https://doi.org/10.4324/9781315101026

Bernhardt, V., & Hébert, C. (2017). *Response to intervention and continuous school improvement*. Taylor and Francis. <u>https://doi.org/10.4324/9781315268804</u>

Bernosky, J. (2015). Clarity in communications (or how to avoid a royal misunderstanding). American Water Works Association, 107(8), 12–13. <u>https://doi.org/10.5942/jawwa2015.107.0120</u>

Bertolote, J. (2008). The roots of the concept of mental health. *World Psychiatry*, 7(2), 113–116. https://doi/org/10.1002/j.2051-5545.2008.tb00172

Best, S. (2003). A beginner's guide to social theory. Sage Publications.

- Bickmore, K. (2011). Policies and programming for safer schools: Are "anti-bullying" approaches impeding education for peacebuilding? *Educational Policy*, 25(4), 648–687. <u>https://doi.org/10.1177/0895904810374849</u>
- Board X [@boardx]. (n.d.c). Tweets [Twitter profile]. Twitter. Retrieved October 2, 2020.
- Board X. (2018). *Safe schools policy*. [Citation information withheld for anonymization purposes].
- Board X. (2019). *Board improvement plan for student achievement 2019/2020*. [Citation information withheld for anonymization purposes].
- Board X. (2020a). 2020-2021 Board action plan (BAP) on Indigenous education. [Citation information withheld for anonymization purposes].
- Board X. (2020b). *Safe, equitable and inclusive schools*. [Citation information withheld for anonymization purposes].
- Board X. (2020c). *Senior administration*. [Citation information withheld for anonymization purposes].
- Board X. (2020d). Students. [Citation information withheld for anonymization purposes].
- Board X. (2020e). *Vision and guiding principles*. [Citation information withheld for anonymization purposes].

Board X. (n.d.-a). Programs. [Citation information withheld for anonymization purposes].

- Board X. (n.d.-b). *Student support and program services staff*. [Citation information withheld for anonymization purposes].
- Bolman, L., & Deal, T. (2017). *Reframing organizations: Artistry, choice and leadership* (6th ed.). Jossey-Bass.
- Bordia, P., Hobman, E., Jones, E., Gallois, C., & Callan, V. (2003). Uncertainty during organizational change: Types, consequences, and management strategies. *Journal of Business and Psychology*, 18(4), 507–532.

https://doi.org/10.1023/b:jobu.0000028449.99127.f7

- Brincat, S. (2012). On the methods of critical theory: Advancing the project of emancipation beyond the Early Frankfurt School. *International Relations*, 26(2), 218–245. <u>https://doi.org/10.1177/0047117811423648</u>
- Burke, C., & Grosvenor, I. (2003). The school I'd like: Children and young people's reflections on an education for the 21st century. ProQuest Ebook Central. <u>https://ebookcentralproquest.com.proxy1.lib.uwo.ca</u>
- Burnes, B. (2004). Kurt Lewin and the planned approach to change: A re-appraisal. *Journal of Management Studies*, 41(6), 977–1002. <u>https://doi-org.proxy1.lib.uwo.ca/10.1111/j.1467-6486.2004.00463x</u>
- Burnes, B. (2009). Reflections: Ethics and organizational change—time for a return to Lewinian values. *Journal of Change Management*, 9(4), 359–381. https://doi.org/10.1080/14697010903360558

Burnes, B., & By, R. (2012). Leadership and change: The case for greater ethical clarity. *Journal of Business Ethics*, *108*(2), 239–252. https://doi.org/10.1007/s10551-011-108802

Burns, J. (1978). Leadership. Harper & Row.

Burrell, G., & Morgan, G. (1979). Sociological paradigms and organisational analysis: Elements of the sociology of corporate life. Ashgate Publishing Company. <u>http://sonify.psych.gatech.edu/~ben/references/burrell_sociological_paradigms_and_orga_nisational_analysis.pdf</u>

- Camburn, E., & Han, S. (2009). Investigating connections between distributed leadership and instructional change. In A. Harris (Ed.), *Distributed leadership: Different perspectives* (pp. 25–46). Springer.
- Canadian Alliance on Mental Illness and Mental Health. (2020). *Mental health action plan: Better access and system performance for mental health services in Canada.* <u>https://www.camimh.ca/wp-content/uploads/2020/07/Mental-Health-Action-Plan-_-One-Pager_v4.pdf</u>
- Canadian Civil Liberties Association. (2017). *The current state of mental health in Canada.* https://ccla.org/current-state-mental-health-canada/
- Canadian Mental Health Association. (2008). *Recommendations for preventing and managing co-existing chronic physical conditions and mental illnesses*. <u>https://ontario.cmha.ca/wp-</u> <u>content/uploads/2008/12/cmha_chronic_disease_policy_paper_2008.pdf</u>
- Canadian Mental Health Association. (2020a). Equity. https://ontario.cmha.ca/equity/
- Canadian Mental Health Association. (2020b). History of mental health reform.

https://ontario.cmha.ca/provincial-policy/health-systems-transformation/history-ofmental-health-reform/

Canadian Mental Health Association. (2020c). *What is it really?* <u>https://cmha.ca/blogs/mental-health-what-is-it-really</u>

- Canadian Mental Health Association. (2021a). *Facts about mental illness*. <u>https://cmha.ca/fast-facts-about-mental-illness</u>
- Canadian Mental Health Association. (2021b). *Mental health resources in schools*. https://ontario.cmha.ca/documents/mental-health-resources-in-schools/
- Cawsey, T. F., Deszca, G., & Ingols, C. (2016). *Organizational change: An action-oriented toolkit* (3rd ed.). Sage Publications.

Centre for Addiction and Mental Health. (2019). *Annual report: 2018–2019*. <u>https://www.camh.ca/-/media/images/all-other-images/annual-report-2018-</u> <u>2019/camh_annual-report_2018-</u>

19.pdf?la=en&hash=5B3C801DF55B334133ED542C5ACE50C34730415F

Centre for Addiction and Mental Health. (2020). Mental health is health.

https://www.camh.ca/en/driving-change/mental-health-is-health

Centre for Addiction and Mental Health. (2021). The crisis is real.

https://www.camh.ca/en/driving-change/the-crisis-is-real

- Chen, S., Sargent, E., & Stuart, H. (2018). Effectiveness of school-based interventions on mental health stigmatization. In A. Leschied, D. Saklofske, & G. Flett (Eds.), *Handbook of school-based mental health promotion* (pp. 127–142). Springer, Cham. <u>https://doi.org/10.1007/978-3-319-89842-1_8</u>
- Child, J. (2015). Organization: Contemporary principles and practices. John Wiley & Sons, Inc. Child, Youth and Family Services Act, SO (2017). c. 14, s. 1.

https://www.ontario.ca/laws/statute/17c14

Children's Mental Health Ontario. (2020). Professional resources. https://cmho.org/professionalresources/ Chiodo, D., & Kolpin, H. (2018). Both promising and problematic: Reviewing the evidence for implementation science. In A. Leschied, D. Saklofske, & G. Flett (Eds.). *Handbook of school-based mental health promotion* (pp. 11-31). Springer, Cham.

https://doi.org/10.1007/978-3-319-89842-1_2

Choi, S. B., Kim, K., & Kang, S.-W. (2017). Effects of transformational and shared leadership styles on employees' perception of team effectiveness. *Social Behavior and Personality: An International Journal*, *45*(3), 377–386.

https://link.gale.com/apps/doc/A497198154/AONE?u=lond95336&sid=AONE&xid=387 f5add

- Ciulla, J. (2004). Ethics and leadership effectiveness. In J. Antonakis, A. Cianciolo, & R. Sternberg (Eds.), *The Nature of Leadership* (pp. 302–327). Sage Publications.
- Cleary, B. (2015). Design thinking and PDSA: Don't throw out the baby. *The Journal for Quality and Participation*, *38*(2), 21–12.
- Coburn, C. (2003). Rethinking scale: Moving beyond numbers to deep and lasting change. *Educational Researcher*, *32*(6), 3–12.

https://doi.org/10.3102/0013189X032006003

- Collier, R. (2013). Social media and mental health. *Canadian Medical Association Journal*, *185*(12), E577. <u>https://doi.org/10.1503/cmaj.109-4567</u>
- Comeau, J., Georgiades, K., Duncan, L., Wang, L., & Boyle, M. H. (2019). Changes in the prevalence of child and youth mental disorders and perceived need for professional help between 1983 and 2014: Evidence from the Ontario child health study. *The Canadian Journal of Psychiatry*, 64(4), 256–264. <u>https://doi.org/10.1177/0706743719830035</u>

Cook, C., Lyon, A., Kubergovic, D., Browning Wright, D., & Zhang, Y. (2015). A supportive beliefs intervention to facilitate the implementation of evidence-based practices within a multi-tiered system of supports. *School Mental Health*, 7(1), 49–60.

https://doi.org/10.1007/s12310-014-9139-3

- Cooperrider, D., & Srivastva, S. (1987). Appreciative inquiry in organizational life. In R.
 Woodman & W. Pasmore (Eds.), *Research in organizational change and development*, *Vol. 1*, (pp. 128–169). <u>https://doi.org/10.1108/S1475-9152(2013)000004001</u>
- Corsi, G. (2020). "Education has no end": Reconciling past and future through reforms in the education system. *Educational Philosophy and Theory*, 52(6), 688–697.

https://doi.org/10.1080/00131857.2019.1707658

- Cowan, K. (2018). Communication, planning and message development: Promoting schoolbased mental health services. *Communique*, *35*(1).
- Cuban, L. (1990). Reforming again, again, and again. *Educational Researcher*, *19*(1), 3–13. https://doi.org/10.3102/0013189X019001003
- Cummings, S., Bridgman, T., & Brown, K. (2015). Unfreezing change as three steps: Rethinking Kurt Lewin's legacy for change management. *Human Relations*, 69(1), 33–60. https://doi.org/10.1177/0018726715577707

Cummins, I. (2020). Mental health social work reimagined. Policy Press.

Dale, M. (2019). Mental health education and literacy in schools: The Australian experience.
In J. Martin (Ed.), *Mental Health Policy, Practice, and Service Accessibility in Contemporary Society* (pp. 205–225). IGI Global. <u>https://doi.org/10.4018/978-1-5225-7402-6.ch011</u>

- Dannefer, E., Johnston, M., & Krackov, S. (1998). Communication and the process of educational change. *Academic Medicine*, 73(9), S16–23. <u>https://doi.org/10.1097/00001888-199809000-00031</u>
- Dantley, M., & Tillman, L. (2010). Social justice and moral transformative leadership. In C.
 Marshall & M. Oliva (Eds.), *Leadership for social justice: Making revolutions in education* (2nd ed., pp. 19–34). Allyn & Bacon.
- Davis, A. (2020). 2020–21 grants for student needs funding [Memorandum]. Ontario Ministry of Education. <u>https://efis.fma.csc.gov.on.ca/faab/Memos/B2020/B08_EN.pdf</u>
- Davies, B., & Bansel, P. (2007). Neoliberalism and education. International Journal of Qualitative Studies in Education, 20(3), 247–259. https://doi.org/10.1080/09518390701281751
- DeGroot, T., Kiker, D., & Cross, T. (2000). A meta-analysis to review organizational outcomes related to charismatic leadership. *Canadian Journal of Administrative Sciences*, 17(4), 356–372. <u>https://doi.org/10.1111/j.1936-4490.2000.tb00234.x</u>
- De Sousa Sabbagha, M., Ledimo, O., & Martins, N. (2018) Predicting staff retention from employee motivation and job satisfaction. *Journal of Psychology in Africa*, 28(2), 136– 140. <u>https://doi.org/10.1080/14330237.2018.1454578</u>
- Desrochers, J. (2015). The best mental health programs start with all students. *Phi Delta Kappan*, 96(4), 34–39. https://doi.org/10.1177/0031721714561444
- Donnelly, P., & Kirk, P. (2015). Use the PDSA model for effective change management. *Education for Primary Care*, 26(4), 279–281. https://doi.org/10.1080/14739879.2015.11494356

- Donohoo, J., & Katz, S. (2019). *Quality implementation: Leveraging collective efficacy to make "what works" actually work.* Corwin Press.
- Downton, J. (1973). *Rebel leadership: Commitment and charisma in the revolutionary process*. Free Press.
- Doyle, M. (2002). From change novice to change expert: Issues of learning, development and support. *Personnel Review*, *31*(4), 465–481. <u>https://doi.org/10.1108/00483480210430373</u>
- Drago-Severson, E. (2012). New opportunities for principal leadership: Shaping school climates for enhanced teacher development. *Teachers College Record*, *114*(3), 1–44.
- Dudar, L., Scott, S., & Scott, D. (2017). Accelerating change in schools: Leading rapid, successful, and complex change initiatives. Emerald Publishing Limited. https://doi.org/10.1108/S1479-366020160000027006
- Duignan, P. A. (2014). Authenticity in educational leadership: History, ideal, reality. *Journal of Educational Administration*, 52(2), 152–172. <u>https://doi:10.1108/JEA-01-2014-0012</u>
- Düren, P. (2016). Change communication can be so simple! The empathic change communication style. *Library Management*, *37*(8), 398–409.

http://dx.doi.org.proxy1.lib.uwo.ca/10.1108/LM-01-2016-0006

- Education Quality and Accountability Office. (2017). *Mandate*. <u>https://www.eqao.com/en/about-eqao/about-the-agency/mandate</u>
- Eggertson, L. (2015). Aboriginal youth suicide rises in Northern Ontario. *Canadian Medical Association Journal, 187*(11). E335–E336. <u>https://doi.org/10/1503/cmaj.109-5108</u>
- Ehrich, L., Harris, J., Klenowski, V., Smeed, J., & Spina, N. (2015). The centrality of ethical leadership. *Journal of Educational Administration*, 53(2), 197–214. https://doi.org/10.1108/JEA-10-2013-0110

- Ellis, R., & McClintock, A. (2009). *If you take my meaning: Theory into practice in human*. Bloomsbury Academic.
- Ellwood Elementary School. (2020a). *Bullying prevention plan*. [Citation information withheld for anonymization purposes].
- Ellwood Elementary School. (2020b). *Our school*. [Citation information withheld for anonymization purposes].
- Ellwood Elementary School. (2021). *School improvement plan*. [Citation information withheld for anonymization purposes].
- Elving, W. J. L. (2005). The role of communication in organisational change. Corporate Communications: An International Journal, 10(2), 129–138. https://doi.org/10.1108/13563280510596943
- Epstein, J. (2010). School/family/community partnerships: Caring for the children we share. *Phi Delta Kappan*, 92(3), 81–96. <u>https://doi.org/10.1177/003172171009200326</u>
- Evans, S. (2020). When schools choose: Evaluation and educational inequality. *Sociological Quarterly*, *61*(4), 727–747. <u>https://doi.org/10.1080/00380253.2019.1711248</u>
- Ferguson, B., & Power, K. (2014). *Broader measures of success: Physical and mental health in schools*. <u>https://peopleforeducation.ca/wp-content/uploads/2017/06/MWM-health.pdf</u>
- Fevre, R., Guimarães, I., & Zhao, W. (2020). Parents, individualism and education: Three paradigms and four countries. *Review of Education*, 8(3), 693–726. https://doi.org/10.1002/rev3.3204
- Fitzsimons, D., James, K., & Denyer, D. (2011). Alternative approaches for studying shared and distributed leadership. *International Journal of Management Reviews*, 13(3), 313–328. <u>https://doi.org/10.1111/j.1468-2370.2011.00312.x</u>

Flett, G., & Hewitt, P. (2013). Disguised distress in children and adolescents "flying under the radar": Why psychological problems are underestimated and how schools must respond. *Canadian Journal of School Psychology*, 28(1), 12–27.

https://doi.org/10.1177/0829573512468845

- Foley, D. (2019). Bridging the mental health RTI theory to practice gap: Preliminary investigation into current practices, facilitators and barriers. *International Journal of Technology and Inclusive Education*, 8(1), 1337–1346.
 https://doi.org/10.20533/ijtie.2047.0533.2019.0163
- Forani, J. (2016, April 10). Attawapiskat in state of emergency following rash of suicide attempts. The Star. <u>https://www.thestar.com/news/canada/2016/04/10/attawapiskat-in-</u> state-of-emergency-following-rash-of-suicides.html
- Franklin, C., Kim, J., Ryan, T., Kelly, M., & Montgomery, K. (2012). Teacher involvement in school mental health interventions: A systematic review. *Children and Youth Services Review*, 34(5), 973–982. <u>http://doi.org/10/1-16/j.childhyouth.2012.01.027</u>
- Frauenholtz, S., Mendenhall, A., & Moon, J. (2017). Role of school employees' mental health knowledge in interdisciplinary collaborations to support the academic success of students experiencing mental health distress. *Children and Schools, 39*(2), 71–79. <u>https://doi.org/10.1093/cs/cdx004</u>
- Freire, P. (2018). *Pedagogy of the oppressed* (M. Ramos, Trans.). Bloomsbury Academic. (Original work published 1970)
- Froese-Germain, B. (2001). Standardized testing + high-stakes decisions = educational inequity. *Interchange*, *32*(2), 111–130. <u>https://doi.org/10.1023/A:1011985405392</u>

- Froese-Germain, B., & Riel, R. (2012). Understanding teachers' perspectives on student mental health: Findings from a national survey. <u>https://files.eric.ed.gov/fulltext/ED544259.pdf</u>
- Fullan, M. (1985). Change processes and strategies at the local level. *The Elementary School Journal*, 85(3), 391–421. <u>https://doi.org/10.1086/461411</u>

Fullan, M. (2001). Leading in a culture of change. Jossey-Bass.

- Fullan, M. (2006). Change theory: A force for school improvement. *Centre for Strategic Education: Seminar Series Paper*, 157, 3–15. <u>http://michaelfullan.ca/wp-content/uploads/2016/06/13396072630.pdf</u>
- Fullan, M. (2014). The principal: Three keys to maximizing impact. Jossey-Bass.
- Fullan, M. & Quinn, J. (2016). Coherence: The right drivers in action for schools, districts, and systems. Ontario Principals' Council.
- Garner, S. (2019). Mental health in education: Building good foundations. Routledge.
- Gaus, N., Tang, M., & Akil, M. (2019). Organisational culture in higher education: Mapping the way to understanding cultural research. *Journal of Further and Higher Education*, 43(6), 848–860. <u>https://doi.org/10.1080/0309877X.2017.1410530</u>
- Geier, M. (2016). Leadership in extreme contexts: Transformational leadership, performance beyond expectations? *Journal of Leadership and Organizational Studies*, 23(3), 234–247.
 <u>https://doi.org/10.1177/1548051815627359</u>
- Gilson, L., & Goldberg, C. (2015). Editors' comment: So, what is a conceptual paper? Group and Organization Management, 40(2), 127–130. https://doi.org/10.1177/1059601115576425

Goddard, R., Hoy, W., & Woolfolk Hoy, A. (2004). Collective efficacy beliefs: Theoretical developments, empirical evidence, and future directions. *Educational Researcher*, 33(3), 3–13. <u>https://doi.org/10.3102/0013189X033003003</u>

- God's Lake First Nation calls state of emergency over suicide crisis. (2019, August 29). CBC News. <u>https://www.cbc.ca/news/canada/manitoba/gods-lake-first-nation-suicides-</u> 1.5265279
- Godwin, K., Kemerer, F., Martinez, V., & Ruderman, R. (1998). Liberal equity in education: A comparison of choice options. *Social Science Quarterly*, *79*(3), 502–522.
- Goodman, J., & Truss, C. (2004). The medium and the message: Communicating effectively during a major change initiative. *Journal of Change Management*, 4(3), 217–228. <u>https://doi.org/10.1080/1469701042000255392</u>
- Government of Alberta. (2017). *Working together to support mental health in Alberta schools*. <u>https://education.alberta.ca/media/3576206/working_together_to_support_mental_health.</u> <u>pdf</u>
- Government of Canada. (2006). *The human face of mental health and mental illness in Canada* 2006. https://www.phac-aspc.gc.ca/publicat/human-humain06/pdf/human face e.pdf
- Government of Canada. (2017). *About mental illness*. <u>https://www.canada.ca/en/public-health/services/about-mental-illness.html</u>
- Government of Canada. (2020). *About mental health*. <u>https://www.canada.ca/en/public-health/services/about-mental-health.html</u>
- Graetz, B., Littlefield, L., Trinder, M., Dobia, B., Souter, M., Champion, C., Boucher, S.,Killick-Moran, C., & Cummins, R. (2008). Kids matter: A population health model tosupport student mental health and well-being in primary schools. *The International*

Journal of Mental Health Promotion, 10(4), 13–20.

https://doi.org/10.1080/14623730.2008.9721772

- Graham, A., Phelps, R., Maddison, C., & Fitzgerald, R. (2011). Supporting children's mental health in schools: Teacher views. *Teachers and Teaching*, 17(4), 479–496. <u>https://doi.org/10.1080/13540602.2011.580525</u>
- Gutek, G. L. (2013). *Philosophical, ideological and theoretical perspectives on education* (2nd ed.). Pearson Education.
- Gutkin, T. (2012). Ecological psychology: Replacing the medical model paradigm for schoolbased psychological and psychoeducational services. *Journal of Educational and Psychological Consultation*, 22(1–2), 1–20.

https://doi.org/10.1080/10474412.2011.649652

- Hall, R., & Pulsford, M. (2019). Neoliberalism and primary education: Impacts of neoliberal policy on the lived experiences of primary school communities. *Power and Education*, 11(3), 241–251. <u>https://doi.org/10.1177/1757743819877344</u>
- Hallinger, P., Liu, S., & Piyaman, P. (2019). Does principal leadership make a difference in teacher professional learning? A comparative study China and Thailand. *Compare*, 49(3), 341–357. <u>https://doi.org/10.1080/03057925.2017.1407237</u>
- Hammer, M. & Champy, J. (2001). Reengineering the corporation: A manifesto for business revolution. Harper Business.
- Harris, A. (2009). Distributed leadership: What we know. In A. Harris (Ed.), *Distributed leadership: Different perspectives* (pp. 11–24). Springer.

Harris, A. (2013). Distributed leadership: Friend or foe? *Educational Management Administration and Leadership*, 41(5), 545–554.

https://doi.org/10.1177/1741143213497635

- Hawley, W., & Sykes, G. (2007). Continuous school improvement. In W. D. Hawley (Ed.), *The keys to effective schools: Educational reform as continuous improvement* (pp. 153–172).
 Corwin Press. <u>https://doi.org/10.4135/9781483329512.n10</u>
- Hinshaw, S. (1992). Externalizing behavior problems and academic underachievement in childhood and adolescence: Causal relationships and underlaying mechanisms.
 Psychological Bulletin, 111(1), 127–155. <u>https://doi.org/10/1037/0033-2909.111.1.127</u>
- Hirsh, S. (2011). Building professional development to support new student assessment systems. Arabella Advisors. <u>https://learningforward.org/wp-</u> <u>content/uploads/2017/08/building-professional-development.pdf</u>
- Hoffmann, J. (2018). Academic underachievement and delinquent behavior. *Youth and Society*, 52(5), 728–755. <u>https://doi.org/10/1177/004411x18767035</u>
- Holt, D., Armenakis, A., Feild, H., & Harris, S. (2007). Readiness for organizational change: The systematic development of a scale. *The Journal of Applied Behavioral Science*, 43(2), 232–255.
- Holt, D., Armenakis, A., Harris, S., & Feild, H. (2007). Toward a comprehensive definition of readiness for change: A review of research and instrumentation. *Research in Organizational Change and Development*, *16*, 289–336. <u>https://doi.org/10.1016/S0897-3016(06)16009-7</u>

- Hoyle, T. B., Samek, B. B., & Valois, R. F. (2008). Building capacity for the continuous improvement of health-promoting schools. *Journal of School Health*, 78(1), 1–8. <u>https://doi.org/10/1111/j.1746-1561.2007.00259.x</u>
- Hornby, G., & Atkinson, M. (2003). A framework for promoting mental health in school. *Pastoral Care in Education*, 21(2), 3–9. <u>https://doi-org.proxy1.lib.uwo.ca/10.1111/1468-0122.00256</u>
- Hospital for Sick Children. (2020, June 1). Four leading child mental health research teams join forces to understand impact of COVID-19 pandemic.

http://www.sickkids.ca/AboutSickKids/Newsroom/Past-News/2020/child-mental-healthcovid-19.html

Hunt, F. (2007). Communications in education. https://files.eric.ed.gov/fulltext/ED501789.pdf

Inter-Agency Standing Committee (2007). IASC guidelines on mental health and psychosocial support in emergency settings. IASC.

https://interagencystandingcommittee.org/system/files/legacy_files/guidelines_iasc_ment al_health_psychosocial_june_2007.pdf

- Jacobs, C., Pfaff, H., Lehner, B., Driller, E., Nitzsche, A., Stieler-Lorenz, B., Wasem, J., & Jung, J. (2013). The influence of transformational leadership on employee well-being: Results from a survey of companies in the information and communication technology sector in Germany. *Journal of Occupational and Environmental Medicine*, 55(7), 772–778. https://doi.org/10.1097/JOM.0b013e3182972ee5
- Jain, P., Asrani, C., & Jain, T. (2018). Resistance to change in an organization. IOSR Journal of Business and Management, 20(5), 37–43. <u>http://www.iosrjournals.org/iosr-jbm/papers/Vol20-issue5/Version-7/E2005073743.pdf</u>

James, C. (2019). Black leadership and white logic: Models of community engagement. In T. Kitossa, E. Lawson, & P. Howard (Eds.), *African Canadian leadership* (pp. 19–53). University of Toronto Press. <u>https://doi.org/10.3138/9781487531409-003</u>

James, T. (2019, November 23). State of emergency declared on Makwa Sahgaiehcan First Nation after suicides, attempts. Saskatoon Star Phoenix. <u>https://thestarphoenix.com/news/local-news/state-of-emergency-declared-on-makwa-sahgaiehcan-first-nation-after-suicides-attempts</u>

- Johnson, C., Eva, A., Johnson, L., & Walker, B. (2011). Don't turn away: Empowering teachers to support students' mental health. *The Clearing House: A Journal of Educational Strategies, Issues and Ideas,* 84(1), 9–14. <u>https://doi.org/10.1080/00098655.2010.484441</u>
- Johnson, E. (2017). How to communicate clearly during organizational change. *Harvard* Business Review. <u>https://hbr.org/2017/06/how-to-communicate-clearly-during-</u> organizational-change
- Johnson, V., Ellis, R., & Hutcherson, V. (2020). Evaluation a strategy for implementation and sustainability of school-based health centres in three disparate communities. *The Journal* of School Health, 90(4), 286–294. https://doi.org.10.1111/josh.12875
- Jorm, A. F., Korten, A. E., Jacomb, P. A., Christensen, H., Rodgers, B., & Pollitt, P. (1997).
 "Mental health literacy": A survey of the public's ability to recognise mental disorders and their beliefs about the effectiveness of treatment. *The Medical Journal of Australia*, *166*(4), 182–186. <u>https://doi.org/10.5694/j.1326-5377.1997.tb140071.x</u>
- Judge, W., & Douglas, T. (2009). Organizational change capacity: The systematic development of a scale. *Journal of Organizational Change Management*, 22(6), 635–649. <u>http://dx.doi.org.proxy1.lib.uwo.ca/10.1108/09534810910997041</u>

- Kanter, R., Stein, B., & Jick, T. (1992). *The challenge of organizational change: How companies experience it and leaders guide it.* Free Press.
- Karier, C. (1972). Liberalism and the quest for orderly change. *History of Education Quarterly*, *12*(1), 57–80. https://doi.org/10.2307/367148
- Katz, J., Mercer, S., & Skinner, S. (2019). Developing self-concept, coping skills, and social support in Grades 3–12: A cluster-randomized trial of a combined mental health literacy and dialectical behavior therapy skills program. *School Mental Health*, *12*(2), 323–335. https://doi.org/10.1007/s12310-019-09353-x
- Katz, S., Dack, L. A., & Malloy, J. (2018). The intelligent, responsive leader. Corwin Press.
- Kaufman, B. (2011). Leadership strategies: Build your sphere of influence. *Business Strategy Series*, *12*(6), 315–320. <u>https://doi.org/10.1108/17515631111185950</u>
- Kilmann, R. (1991). Managing beyond the quick fix. Jossey-Bass.
- King, F., & Stevenson, H. (2017). Generating change from below: What role for leadership from above? *Journal of Educational Administration*, 55(6), 657–670. https://doi.org/10.1108/jea-07-2016-0074
- Kislik, L. (2018, August 9). How to tell your team that organizational change is coming. *Harvard Business Review*. <u>https://hbr.org/2018/08/how-to-tell-your-team-that-organizational-change-is-coming</u>
- Klein, S. (1996). A management communication strategy for change. *Journal of Organizational Change Management*, 9(2), 32–46. <u>https://doi.org/10.1108/09534819610113720</u>
- Koller, J. R., & Bertel, J. M. (2006). Responding to today's mental health needs of children, families and schools: Revisiting the preservice training and preparation of school-based personnel. *Education and Treatment of Children*, 29(2), 197–217.

- Koller, J. R., Osterlind, S., Paris, K., & Weston, K. (2004). Differences between novice and expert teachers' undergraduate preparation and ratings of importance in the area of children's mental health. *International Journal of Mental Health Promotion*, 6(2), 40–45. https://doi.ort.10.1080/14623730.2004.9721930
- Kotter, J. (1977). Power, dependence, and effective management. *Harvard Business Review*, 5(4), 125–136.
- Kotter, J. (1996). Leading change. Harvard Business School Press.
- Kotter, J. (2011). Leading change: Why transformation efforts fail. In W. Kim, J. Kotter & R.
 Mauborgne (Eds.), *HBR's 10 Must Reads of Chance Management* (pp. 1–16). Perseus Book LLC.
- Kotter, J. (2014). *Accelerate: Building strategies agility for a faster-moving world*. Harvard Business Review Press.
- Kotter, J. (2018). *Eight steps to accelerate change in your organization*. https://www.kotterinc.com/wp-content/uploads/2019/04/8-Steps-eBook-Kotter-2018.pdf
- Kouzes, J. M., & Posner, B. Z. (2017). *The leadership challenge: How to get extraordinary things done in organizations* (6th ed.). Jossey-Bass.
- Kratochwill, T., & Shernoff, E. (2003). Evidence-based practice: Promoting evidence-based interventions in school psychology. *School Psychology Quarterly*, 18(4), 389–408. <u>https://doi.org/10.1521/scpq.18.4.389.27000</u>

- Langton, N., Judge, T., & Robbins, S. (2010). Organizational behaviour: Concepts, controversies, applications. Pearson Canada.
- Larson, S., Chapman, S., Spetz, J., & Brindis, C. (2017). Chronic childhood trauma, mental health, academic achievement, and school-based health centre mental health services. *The Journal of School Health*, 87(9), 675–686. <u>https://doi.org/10.1111/josh/12541</u>
- Lauer, T. (2021). Change Management: Fundamentals and Success Factors. Springer. https://doi.org/10.1007/978-3-662-62187-5_9
- Leithwood, K., & Jantzi, D. (2006). Transformational school leadership for large-scale reform: Effects on students, teachers, and their classroom practices. *School Effectiveness and School Improvement, 17*(2), 201–227. <u>https://doi.org/10.1080/09243450600565829</u>
- Leithwood, K., Mascall, B., & Strauss, T. (2009). *Distributed leadership according to the evidence*. Routledge.
- Levin, F., & Fullan, M. (2008). Learning about system renewal. *Educational Management*, *Administration and Leadership*, *36*(2), 289–303.

https://doi.org/10.1177/1741143207087778

- Levinson, B., Gross, J., Hanks, C., Dadds, J., Kumasi, K., Link, J., & Metro-Roland, D. (2016). Beyond critique: Exploring critical social theories and education. Taylor & Francis.
- Lewin, K. (1947). Frontiers in group dynamics: Concept, method and reality in social science; social equilibria and social change. *Human Relations*, *1*(1), 5–41.
- Lewis, L. (1999). Disseminating information and soliciting input during planned organisational change: Implementers' targets, sources, and channels for communicating. *Management Communication Quarterly*, 13(1), 43–75.

- Lewis, L. (2019). *Organizational change: Creating change through strategic communication*. John Wiley & Sons, Inc.
- Lewis, S., Passmore, J., & Cantore, S. (2017). *Appreciative inquiry for change management:* Using AI to facilitate organizational development. Korgan Press.
- Li, J., Sun, R., Tao, W., & Lee, Y. (2021). Employee coping with organizational change in the face of a pandemic: The role of transparent internal communication. *Public Relations Review*, 47(1), 101984. <u>https://doi.org/10.1016/j.pubrev.2020.101984</u>
- Lines, T. (2004). Influence of participation in strategic change: Resistance, organizational commitment and change goal achievement. *Journal of Change Management*, *4*(3), 193–

215. <u>https://doi.org/10.1080/1469701042000221696</u>

Liu, H. (2017). Reimagining ethical leadership as a relational, contextual and political practice. *Leadership (London, England)*, *13*(3), 343–367.

https://doi.org/10.1177/1742715015593414

LivingWorks. (2020). LivingWorks ASIST. https://www.livingworks.net/asist

Llopis, G. (2014). *Preparation for effective leadership begins with five simple rules*. Forbes. <u>https://www.forbes.com/sites/glennllopis/2014/09/09/preparation-for-effective-</u> leadership-begins-with-5-simple-rules/?sh=59d8f4e86014

MacDonald, M. (2019, January 9). *Teacher supply goes from glut to scarcity in a few short years*. University Affairs/Affaires Universitaires.

https://www.universityaffairs.ca/news/news-article/teacher-supply-goes-from-glut-toscarcity-in-a-few-short-years/

Manning, G., & Curtis, K. (2022). The art of leadership. McGraw Hill LLC.

- Marquez, P. V., & Saxena, S. (2016). Making mental health a global priority. *Cerebrum*, 2016, *cer*-10–16.
- Marsh, M., & Mathur, S. (2020). Mental health in schools: An overview of multitiered systems of support. *Intervention in School and Clinic*, 56(2), 67–73. https://doi.org/10.1177/1053451220914896
- Martin, J. (2019). *Mental health policy, practice, and service accessibility in contemporary society*. IGI Global.
- Martinez-Alemán, A., Pusser, B., & Bensimon, E. (Eds.). (2015). *Critical approaches to the study of higher education: A practical introduction*. Johns Hopkins University Press.
- Maxwell, J. (2012). *Qualitative research design: An interactive approach* (3rd ed.). Sage Publications.
- Mayo Clinic. (2020). *Mental illness*. <u>https://www.mayoclinic.org/diseases-conditions/mental-</u> illness/diagnosis-treatment/drc-20374974
- Mazzone, L., Ducci, F., Scoto, M. C., Passaniti, E., D'Arrigo, V. G., & Vitiello, B. (2007). The role of anxiety symptoms in school performance in a community sample of children and adolescents. *BMC Public Health*, (7), 347. <u>http://doi.org/10.1186/1471-2458-7-347</u>
- McEwen, N. (1995). Accountability in education in Canada. *Canadian Journal of Education*, 20(1), 1–17.
- Mental Health and Addictions Scorecard and Evaluation Framework Research Team. (2015). *The mental health of children and youth in Ontario: A baseline scorecard*. Institute for Clinical Evaluative Sciences. <u>https://www.ices.on.ca/flip-</u> <u>publication/MHASEF_Report_2015/files/assets/basic-html/page5.html</u>

Mental Health Commission of Canada. (2009). *Toward recovery and well-being*. A framework for a mental health strategy for Canada.

https://www.mentalhealthcommission.ca/sites/default/files/FNIM_Toward_Recovery_an

d_Well_Being_ENG_0_1.pdf

Mental Health Commission of Canada. (2013a). *Making the case for investing in mental health in Canada*. <u>https://www.mentalhealthcommission.ca/sites/default/files/2016-</u> <u>06/Investing_in_Mental_Health_FINAL_Version_ENG.pdf</u>?

Mental Health Commission of Canada. (2013b). Opening minds interim report.

 $\underline{https://www.mentalhealthcommission.ca/sites/default/files/opening_minds_interim_repor$

<u>t_0.pdf</u>

Mental Health Commission of Canada. (2013c). School-based mental health in Canada: A final report.

https://www.mentalhealthcommission.ca/sites/default/files/ChildYouth_School_Based_

Mental Health Canada Final Report ENG 0.pdf

Mental Health Commission of Canada. (2020b). MHFA standard (virtual).

https://www.mhfa.ca/en/course-type/mhfa-standard-virtual

Mental Health Education Resource Center. (2021). Early intervention.

https://www.mherc.mb.ca/page.php?id=13

Mental health supports in schools lacking, students say in survey. (2017, December 12). CBC

News. https://www.cbc.ca/news/canada/kitchener-waterloo/student-survey-caitlin-ennis-

ontario-student-trustees-1.4444241

Miazga, M. (2017). The "4 C's" of leadership. Supply House Times, 60(6), 42.

https://www.supplyht.com/articles/100688-the-4-cs-of-leadership

- Miles, M. B., & Huberman, A. M. (1994). Qualitative data analysis: An expanded sourcebook (2nd ed.). Sage Publications, Inc.
- Miller, D. (2002). Successful change leaders: What makes them? What do they do that is different? *Journal of Change Management*, 2(4), 359–368. <u>https://doi.org/10.1080/714042515</u>
- Mintzberg, H., & Westley, F. (2001). Decision making: It's not what you think. *MIT Sloan Management Review*, 42(3), 89–92.
- Mitra, D. (2018). Student voice in secondary schools: The possibility for deeper change. *Journal of Educational Administration*, 56(5), 473–487. <u>https://doi.org/10.1108/JEA-01-2018-0007</u>
- Modin, B., Plenty, S., Låftman, S., Bergström, M., Berlin, M., Gustafsson, P., & Hjern, A.
 (2018). School contextual features of social disorder and mental health complaints—a multilevel analysis of Swedish sixth-grade students. *International Journal of Environmental Research and Public Health*, 15(1), 156–167.
 https://doi.org/10.3390/ijerph15010156
- Moon, J., Williford, A., & Mendenhall, A. (2017). Educators' perceptions of youth mental health: Implications for training and the promotion of mental health services in schools. *Children and Youth Services Review*, 73, 384–391.

https://doi:10.1016/j.childyouth.2017.01.006

- Nadler, D., & Tushman, M. (1989). Organizational frame bending: Principles for managing reorientation. *Academy of Management Executive*, *3*(3), 194–204.
- Nash, R. (2011). Harness the power of reflection: Continuous school improvement from the front office to the classroom. Corwin Press.

- National Policy Board for Educational Administration. (2015). The professional standards for educational leaders. <u>https://www.npbea.org/wp-content/uploads/2017/06/Professional-</u> <u>Standards-for-Educational-Leaders_2015.pdf</u>
- Naylor, P. B., Cowie, H. A., Walters, S. J., Talamelli, L., & Dawkins, J. (2009). Impact of a mental health teaching programme on adolescents. *The British Journal of Psychiatry*, 194(4), 365–370. <u>https://doi.org/10.1192/bjp.bp.108.053058</u>

New Zealand Ministry of Education. (2021). *Effective communications*. <u>https://www.educationalleaders.govt.nz/Managing-your-school/Guides-for-managing-your-school/Effective-communications</u>

Newmann, F. (2007). Improving achievement for all students: The meaning of staff-shared understanding and commitment. In W. D. Hawley (Ed.), *The keys to effective schools: Educational reform as continuous improvement* (pp. 33–50). Corwin Press. <u>https://wwwdoi-org.proxy1.lib.uwo.ca/10.4135/9781483329512.n3</u>

Northouse, P. G. (2019). Leadership: Theory and practice (8th ed.). Sage Publications.

Noruzy, A., Dalfard, V., Azhdari, B., Nazari-Shirkouhi, S., & Rezazadeh, A. (2012). Relations between transformational leadership, organizational learning, knowledge management, organizational innovation, and organizational performance: An empirical investigation of manufacturing firms. *International Journal of Advanced Manufacturing Technology*, 64(5–8), 1073–1085. https://doi.org/10.1007/s00170-012-4038-y

Ontario. (2020a). *Children and youth mental health: Signs and symptoms*. Queen's Printer for Ontario. <u>https://www.ontario.ca/page/children-and-youth-mental-health-signs-and-symptoms</u>

Ontario. (2020b). Ministry of Education. Queen's Printer for Ontario.

https://www.ontario.ca/page/ministry-education

Ontario. (2020c). Roadmap to wellness: A plan to build Ontario's mental health and addictions system. Queen's Printer for Ontario. <u>https://www.ontario.ca/page/roadmap-wellness-plan-</u> <u>build-ontarios-mental-health-and-addictions-system</u>

Ontario College of Teachers. (2021). Ethical standards for the teaching profession.

https://www.oct.ca/public/professional-standards/ethical-standards

Ontario Council of Agencies Serving Immigrants. (2015). What are the different school systems in Ontario? <u>https://settlement.org/ontario/education/elementary-and-secondary-</u>

school/school-systems-in-ontario/what-are-the-different-school-systems-in-ontario/

Ontario Institute for Education Leadership. (2013). *The Ontario leadership framework: A school* and system leader's guide to putting Ontario's leadership framework into action. https://www.education-leadership-

ontario.ca/application/files/8814/9452/4183/Ontario_Leadership_Framework_OLF.pdf

- Ontario Ministry of Children, Community and Social Services. (2012). *Moving on mental health: A system that makes sense for children and youth*. Queen's Printer for Ontario. <u>http://www.children.gov.on.ca/htdocs/English/professionals/specialneeds/momh.a</u> <u>spx</u>
- Ontario Ministry of Education. (2009). *Realizing the promise of diversity: Ontario's equity and inclusive education strategy*. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/policyfunding/equity.pdf

Ontario Ministry of Education. (2010). *Teacher performance appraisal*. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/teacher/pdfs/TPA_Manual_English_september2010l.pdf

Ontario Ministry of Education. (2013). Supporting minds: An educator's guide to promoting students' mental health and well-being. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf

Ontario Ministry of Education. (2016). *Ontario schools: Kindergarten to Grade 12 policy and program requirements*. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/document/policy/os/onschools_2016e.pdf

Ontario Ministry of Education. (2019a). 2019–2020 Education funding: A guide to the grants for student needs. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/funding/1920/GSNGuide2019-20.pdf

Ontario Ministry of Education. (2019b). *The Ontario curriculum Grades 1–8: Health and physical education*. Queen's Printer for Ontario.

http://www.edu.gov.on.ca/eng/curriculum/elementary/2019-health-physical-educationgrades-1to8.pdf

- Ontario Ministry of Education. (2020). *Guide to reopening Ontario's schools 2020/2021*. Queen's Printer for Ontario. <u>https://www.ontario.ca/page/guide-reopening-ontarios-schools</u>
- Ontario Ministry of Health. (2011). Open minds, healthy minds: Ontario's comprehensive mental health and addictions strategy. Queen's Printer for Ontario.

http://www.health.gov.on.ca/en/common/ministry/publications/reports/mental_health201 1/mentalhealth_rep2011.pdf Ontario Regulation, O. Reg. 107/08, s.10. (2008). <u>https://www.ontario.ca/laws/regulation/r08107</u> Ontario Regulation, O. Reg. 612/00, s.2(1). (2010).

https://www.ontario.ca/laws/regulation/000612#BK2

- Orlando, C., Bradley, W., Collier, T. A., Ulie-Wells, J., Miller, E., & Weist, M. (2018). What works in school-based mental health service delivery? In A. Leschied, D. Saklofske, & G. Flett (Eds.). *Handbook of school-based mental health promotion* (pp. 33-49). Springer, Cham. <u>https://doi.org/10.1007/978-3-319-89842-1_3</u>
- Óskarsdóttir, E., Donnelly, V., Turner-Cmuchal, M., & Florian, L. (2020). Inclusive school leaders—their role in raising the achievement of all learners. *Journal of Educational Administration*, 58(5), 521–537. <u>https://doi.org/10.1108/JEA-10-2019-0190</u>
- Ott, M., Hibbert, K., Rodger, S., & Leschied, A. (2017). A well place to be: The intersection of Canadian school-based mental health policy with student and teacher resiliency. *Canadian Journal of Education/Revue Canadianne De L'éducation, 40*(2), 1–30.
- Owen, S. (2014). Teacher professional learning communities: Going beyond contrived collegiality toward challenging debate and collegial learning and professional growth. *Australian Journal of Adult Learning*, *54*(2), 54–77.
- Owens, R. G., & Valesky, T. C. (2007). Organizational behavior in education: Adaptive leadership and school reform (9th ed.). Pearson/Allyn & Bacon.
- Paradis, E., Nimmon, L., Wondimagegn, D., & Whitehead, C. (2020). Critical theory: Broadening our thinking to explore the structural factors at play in health professions education. *Academic Medicine*, 95(6), 842–845.

https://doi.org/10.1097/ACM.000000000003108

Parekh, G. (2013). A case for inclusive education. Toronto District School Board. https://www.tdsb.on.ca/portals/0/aboutus/research/acaseforinclusiveeducation.pdf

- Parent Involvement Committee. (n.d.). *Board involvement plan for student achievement*. [Citation information withheld for anonymization purposes].
- Park, S., Guz, S., Zhang, A., Beretvas, S., Franklin, C., & Kim, J. (2020). Characteristics of effective school-based, teacher-delivered mental health services for children. *Research on Social Work Practice*, 30(4), 422–432. <u>https://doi.org/10.1177/1049731519879982</u>

Park, S., Hironaka, S., Carver, P., & Nordstrum, L. (2013). Continuous improvement in education. Carnegie Foundation for the Advancement of Teaching. <u>https://www.carnegiefoundation.org/wp-content/uploads/2014/09/carnegie-</u> foundation_continuous-improvement_2013.05.pdf

- Patel, V. (2014). Why mental health matters to global health. *Transcultural Psychiatry*, *51*(6), 777–789. <u>https://doi.org/10.1177/1363461514524473</u>
- People for Education. (2014). Measuring what matters: Beyond the 3 "R's."

https://peopleforeducation.ca/wp-content/uploads/2017/08/People-for-Education-

Measuring-What-Matters-Beyond-the-3-Rs.pdf

Perfect, M. M., & Morris, R. J. (2011). Delivering school-based mental health services by school psychologists: Education, training, and ethical issues. *Psychology in the Schools, 48*(10), 1049–1063. <u>https://doi.org/10.1002/pits./20612</u>

Pietrzak, M., & Paliszkiewicz, J. (2015). Framework of strategic learning: The PDCA cycle. *Management, 10*(2), 149–161.

https://doaj.org/article/90260fb8701c4ff9869a7719e899daa2

Pink, D. (2011). Drive: The surprising truth about what motivates us. Riverhead Books.

- Plazek, D. (2012). Ideology spotting: An exercise in teaching conservatism and liberalism. Journal of Political Science Education, 8(2), 168–188. https://doi.org/10.1080/15512169.2012.667683
- Public Health X. (2020). *Suicidal thoughts*. [Citation information withheld for anonymization purposes].
- Quinn, R., Faerman, S., Thompson, M., & McGraph, M. (2003). Becoming a master manager: A competency framework (3rd ed.). Wiley.
- Radd, S. & Grosland, T. J. (2019). Desirablizing whiteness: A discursive practice in social justice leadership that entrenches white supremacy. *Urban Education*, 54(5), 656–676. http://doi.org/10.1177/0042085918783824
- Reinke, W., Stormont, M., Herman, K., Puri, R., & Goel, N. (2011). Supporting children's mental health in schools: Teacher perceptions of needs, roles, and barriers. *School Psychology Quarterly*, 26(1), 1–13. https://doi.org/10.1037/a0022714
- Reupert, A. (2019). *Mental health and academic learning in schools: Approaches for facilitating the wellbeing of children and young people* (1st ed.). Routledge.
- Rincón-Gallardo, S. (2018). Social justice. In H. J. Malone, S. Rincón-Gallardo & K. Kew (Eds.), *Future Directions of Educational Change* (1st ed., pp. 11–15). Routledge. <u>https://doi.org/10.4324.9781315269955</u>
- Roberts, C. (2019). *Ethical leadership for a better education system: A code of ethics for school leaders*. Routledge. <u>https://doi.org/10.4324/9781315146003</u>
- Robinson, V., Hohepa, M., & Lloyd, C. (2009). School leadership and student outcomes: Identifying what works and why—A best evidence synthesis. New Zealand Ministry of Education. <u>https://www.educationcounts.govt.nz/publications/series/2515/60170</u>

- Rodger, S., Hibbert, K., Leschied, A. W., Atkins, M. A., Masters, E. R., & Pandori-Chuckal, J. (2018). Mental health literacy as a fundamental part of teacher preparation: A Canadian perspective. In A. Leschied, D. Saklofske, & G. Flett (Eds.), *Handbook of school-based mental health promotion* (pp. 127–142). Springer, Cham. <u>https://doi.org/10.1007/978-3-319-89842-1_8</u>
- Rossen, E., & Cowan, K. (2014). Improving mental health in schools. *Phi Delta Kappan*, 96(4), 8–13. https://doi.org/10.1177/0031721714561438
- Rushowy, K. (2020, September 24). *Teacher shortage prompts call for retires to return to Ontario classrooms*. The Star.

https://www.thestar.com/politics/provincial/2020/09/24/teacher-shortage-prompts-callfor-retirees-to-return-to-ontario-classrooms.html

- Russell, C. (2013). Functionalist theory of education. *Sociology of Education: An A-to-Z Guide*, 1, 292–294. http://dx.doi.org/10.4135/9781452276151.n152
- Sagie, A., Elizur, D., and Koslowsky, M. (2001). Effect of participation in strategic and tactical decisions on acceptance of planned change. *Journal of Social Psychology*, 130(4), 459– 465. <u>https://doi.org/10.1080/00224545.1990.9924607</u>
- Salerno, J. (2016). Effectiveness of universal school-based mental health awareness programs among youth in the United States: A systematic review. *The Journal of School Health*, 86(12), 922–931. <u>https://doi.org/10/1111/josh.12361</u>
- Santhidran, S., Chandran, V. G. R., & Borromeo, J. (2013). Enabling organizational changeleadership, commitment to change and the mediating role of change readiness. *Journal of Business Economics and Management*, 14(2), 348–363.

https://link.gale.com/apps/doc/A338324274/AONE?u=lond95336&sid=AONE&xid=7fd 15df5

Saporito, S. (2003). Private choices, public consequences: Magnet school choice and segregation by race and poverty. *Social Problems*, *50*(2), 181–203.

https://doi.org/10.1525/sp.2003.50.2.181

Schein, E. H. (2010). Organizational culture and leadership (4th ed.). Jossey-Bass.

- Schippers, M., Den Hartog, D., Koopman, P., & van Knippenberg, D. (2008). The role of transformational leadership in enhancing team reflexivity. *Human Relations*, 61(11), 1593–1616. <u>https://doi.org/10.1177/0018726708096639</u>
- Schleicher, A. (2020). The impact of COVID-19 on education: Insights from education at a glance 2020. Organization for Economic Co-Operation and Development. <u>https://www.oecd.org/education/the-impact-of-covid-19-on-education-insights-educationat-a-glance-2020.pdf</u>
- Schmoker, M. (2018). *Focus: Elevating the essentials to radically improve student learning* (2nd ed.). ASCD.
- Schønning, V., Hjetland, G., Aarø, L., & Skogen, J. (2020). Social media use and mental health and well-being among adolescents—a scoping review. *Frontiers in Psychology*, 11. <u>https://doi.org/10.3389/fpsyg.2020.01949</u>
- School Mental Health Ontario. (2013). *Leading mentally healthy schools: A vision for student mental health and well-being in Ontario Schools*. <u>https://smh-assist.ca/wp-</u> <u>content/uploads/LeadingMentallyHealthSchools.pdf</u>
- Schulte-Körne, G. (2016). Mental health problems in a school setting in children and adolescents. *Deutsches Ärzteblatt International*, *113*, 183–190.

- Schwartz, K. (2016, February 29). *Tapping teachers' intrinsic motivation to develop school improvements*. MindShift. <u>https://www.kqed.org/mindshift/43762/tapping-teachers-intrinsic-motivation-to-develop-school-improvements</u>
- Schwartz, K. (2018, May 6). *How to plan and implement continuous improvement in schools*. MindShift. <u>https://www.kqed.org/mindshift/51115/how-to-plan-and-implement-</u> <u>continuous-improvement-in-schools</u>
- Sefa Dei, G. J. (2019). An Indigenous Africentric perspective on Black leadership. In T. Kitossa,
 E. Lawson, & P. Howard (Eds.), *African Canadian Leadership* (pp. 345–369). Toronto:
 University of Toronto Press. <u>https://doi.org/10.3138/9781487531409-015</u>
- Sensoy, Ö., & DiAngelo, R. (2017). *Is everyone really equal? An introduction to key concepts in social justice education* (2nd ed.). Teachers College Press.
- Senturia, T., Flees, L., & Maceda, M. (2008). *Leading change management requires sticking to the plot.* Bain & Company. <u>http://docplayer.net/6559720-Leading-change-management-</u> <u>requires-sticking-to-the-plot-by-todd-senturia-lori-flees-and-manny-maceda.html</u>
- Shapiro, J., & Stefkovich, J. (2016). *Ethical leadership and decision making in education: Applying theoretical perspectives to complex dilemmas* (4th ed.). Routledge.
- Shirley, D. (2018). Introduction. In H. J. Malone, S. Rincón-Gallardo & K. Kew (Eds.), Future directions of educational change (1st ed., pp. 1–7). Routledge.

https://doi.org/10.4324.9781315269955

Simoes, P., & Esposito, M. (2014). Improving change management: How communication nature influences resistance to change. *Journal of Management Development*, 33(4), 324–241. <u>https://doi.org/10.1108/jmd-05-2012-0058</u>

- Simons, T. (2002). Behavioral integrity: The perceived alignment between managers' words and deeds as a research focus. *Organization Science*, 13(1), 18–35. https://doi.org/10.1287.orsc.13.1.18.543
- Simons, T., Friedman, R., Liu, L. A., & McLean Parks, J. (2007). Racial differences in sensitivity to behavioral integrity: Attitudinal consequences, in-group effects, and "trickle down" among black and non-black employees. *Journal of Applied Psychology*, 92(3), 650–665. <u>https://doi.org/10.1037/0021-9010.92.3.650</u>
- Sirkin, K., Keenan, P., & Jackson, A. (2014). The hard side of change management. *IEEE Engineering Management Review*, 42(4), 132. https://doi.org/10.1109/emr.2014.6966953
- Skaalvik, E. M., & Skaalvik, S. (2010). Teacher self-efficacy and teacher burnout: A study of relations. *Teacher and Teacher Education*, 26(4), 1059–1069. https://doi.org/10.1016/j.tate.2009.11.001

Smylie, M. (2009). Continuous school improvement. Corwin Press.

Song, J. W., & Chung, K. C. (2010). Observational studies: Cohort and case-control studies. *Plastic and Reconstructive Surgery*, 126(6), 2234–2242.

https://doi.org/10.1097/PRS.0b013e3181f44abc

- Spegman, A. (2017). Fundraising fairness: Overcome equity concerns when budget cuts mobilize parents to raise money. *District Administration*, *53*(9), 54–58.
- Spillane, J. (2005). Distributed leadership. *The Educational Forum*, 69(2), 143–150. https://doi.org/10.1080/00131720508984678
- Starratt, R. (2004). Ethical leadership. Jossey-Bass.

- Starratt, R. (2017). Building an ethical school: A theory for practice in educational leadership. In *Leading Learning/Learning Leading: A Retrospective on a Life's Work* (1st ed., Vol. 1, pp. 78–92). Routledge. <u>https://doi.org/10.4324/9781315178196-6</u>
- Stauffer, C. & Turner, J. (2019). The new generation of restorative justice. In *Routledge international handbook of restorative justice* (1st ed., pp. 4420–461). Routledge. https://doi.org/10.4324/9781315613512-30
- Stoll, L., Bolam, R., McMahon, A., Wallace, M., & Thomas, S. (2006). Professional learning communities: A review of the literature. *Journal of Educational Change*, 7(4), 221–258. https://doi.org/10.1007/s10833-006-0001-8
- Syan, A., Lam, J., Huang, C., Smith, M., Darnay, K., Hawke, L., & Henderson, J. (2021). The wellness quest: A health literacy and self-advocacy tool developed by youth for youth mental health. *Health Expectations: An International Journal of Public Participation in Health Care and Health Policy*, 24(2), 659–669. <u>https://doi.org/10.1111/hex.13214</u>
- Tomlinson, M., & Lund, C. (2012). Why does mental health not get the attention it deserves? An application of the Shiffman and Smith framework. *PLoS Medicine*, *9*(2), e1001178. https://doi.org/10.1371/journal.pmed.1001178

Toronto District School Board. (2017a). Enhancing equity task force report and recommendations.

https://www.tdsb.on.ca/Portals/0/community/docs/EETFReportPdfVersion.pdf

Toronto District School Board. (2017b). Integrated equity framework interim report.

https://www.tdsb.on.ca/Portals/0/AboutUs/Director/IEF_Interim%20Report_June%2017.

- Tuana, N. (2014). An ethical leadership developmental framework. In C. M. Branson & S. J.Gross (Eds.), *Handbook of ethical educational leadership* (pp. 153–176). Routledge.
- Twenge, J. M., Cooper, A. B., Joiner, T. E., Duffy, M. E., & Binau, S. G. (2019). Age, period, and cohort trends in mood disorder indicators and suicide-related outcomes in a nationally representative dataset, 2005–2017. *Journal of Abnormal Psychology*, *128*(3), 185–199. <u>http://dx.doi.org.proxy1.lib.uwo.ca/10/1037/abn0000410</u>
- Urick, A. (2016). Examining US principal perception of multiple leadership styles used to practice shared instructional leadership. *Journal of Educational Administration*, 54(2), 152–172. <u>https://doi.org/10.1108/JEA-07-2014-0088</u>
- Vaillancourt, K., Cowan, K., & Kalamaros Skalski, A. (2013). Advocating for comprehensive and coordinated school mental health services. In J. Desrochers & G. Houck, *Depression in children and adolescents: Guidelines for school practice* (pp. 231–243). National Association of School Nurses.
- Vakola, M. (2016). The reasons behind change recipients' behavioral reactions: A longitudinal investigation. *Journal of Managerial Psychology*, *31*(1), 202–215.

https://doi.org/10.1108/JMP-02-2013-0058

- Van Deventer, V., Cilliers, F., & Van Eeden, R. (2008). Leadership styles and associated personality traits: Support for the conceptualisation of transactional and transformational leadership. *South African Journal of Psychology*, 38(2), 253–267. https://doi.org/10.1177/008124630803800201
- Waddell, C., Georgiades, K., Duncan, L., Comeau, J., Reid, G., O'Briain, W., Lampard, R., & Boyle, M. (2019). 2014 Ontario child health study findings: Policy implications for

Canada. Canadian Journal of Psychiatry, 64(4), 227–231.

https://doi.org/10.1177/0706743719830033

- Wan, G. (Ed.), (2008). *The education of diverse student populations: A global perspective*. Springer. https://doi.org/10.1007/978-1-4020-8204-7
- Wang, F. (2018). Social justice leadership—theory and practice: A case of Ontario. *Educational Administration Quarterly*, *54*(3), 470–498. <u>https://doi.org/10.1177/0013161x18761341</u>

Wapekeka First Nation declares state of emergency in wake of suicides. (2017, June 21). CBC News. <u>https://www.cbc.ca/news/canada/thunder-bay/wapekeka-state-emergency-</u> 1.4170640

- Weiner, B. (2009). A theory of organizational readiness for change. *Implementation Science*, 4(1), 67. <u>https://doi.org/10.1186/1748-5908-4-67</u>
- Weist, E., Eber, L., Horner, R., Splett, J., Putnam, R., Barrett, S., Perales, K., Fairchild, A., & Hoover, S. (2018). Improving multitiered systems of support for students with "internalizing" emotional/behavioral problems. *Journal of Positive Behavior Interventions*, 20(3), 172–184. <u>https://doi.org/10.1177/1098300717753832</u>
- Whitley, J., Smith, J., & Vaillancourt, T. (2012). Promoting mental health literacy among educators: Critical in school-based prevention and intervention. *Canadian Journal of School Psychology*, 28(1), 56–70. <u>https://doi.org/10.1177/08295735124688522</u>
- Whitaker, T. (2003). *What great principals do differently: Fifteen things that matter most*. Eye on Education.
- Whitney, D.D., & Trosten–Bloom, A. (2010). *The power of appreciative inquiry: A practical guide to positive change* (2nd ed.). Barrett–Koehler Publishers.

- Wiens, K., Bhattarai, A., Pedram, P., Dores, A., Williams, J., Bulloch, A., & Patter, S. (2020). A growing need for youth mental health services in Canada: Examining trends in youth mental health from 2011 to 2018. *Epidemiology and Psychiatric Sciences, 29*(E115), 1–9. https://doi.org/10.1017/S2045796020000281
- Wong-MingJi, D. J. (2013). Force field analysis and model of planned change. In E. H. Kessler (Ed.), *Encyclopedia of management theory* (pp. 288–291). Sage Publications.
- World Health Organization. (1951). Expert committee on mental health: Report on the second session, Geneva. <u>https://apps.who.int/iris/handle/10665/37982</u>

World Health Organization. (2003). Investing in mental health.

https://www.who.int/mental_health/media/investing_mnh.pdf

World Health Organization. (2011). Mental health atlas 2011.

https://apps.who.int/iris/bitstream/handle/10665/44697/9799241564359_eng.pdf;jsessioni

d=A3CDB14579200EA6F34BB3FDD7D62205?sequence=1

World Health Organization. (2018). Mental health: Strengthening our response.

https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-ourresponse

- World Health Organization. (2020). *Adolescent mental health*. <u>https://www.who.int/news-</u>room/fact-sheets/detail/adolescent-mental-health
- Xie, H. (2013). Strengths-based approach for mental health recovery. *Iranian Journal of Psychiatry and Behavioural Sciences*, 7(2), 5–10.
- Yanos, P. (2018). Written-off: Mental health stigma and the loss of human. Cambridge University Press.

Zayim, M., & Kondakci, Y. (2014). An exploration of the relationship between readiness for change and organizational trust in Turkish public schools. *Educational Management*, *Administration and Leadership*, 43(4), 610–625.

https://doi.org/10.1177/1741143214523009

- Zhu, W., Avolio, B., Riggio, R., & Sosik, J. (2011). The effect of authentic transformational leadership on follower and group ethics. *The Leadership Quarterly*, 22(5), 801–817. https://doi.org/10.1016/j.leaqua.2011.07.004
- Zhu, Y., & Akhtar, S. (2014). How transformational leadership influences follower helping behavior: The role of trust and prosocial motivation. *Journal of Organizational Behavior*, 35(3), 373–392. <u>https://doi.org/10.1002/job.1884</u>

Appendix A

Questions to Determine an Organization's Frame Placement in Bolman and Deal's (2017)

Question	Affirmative response	Negative response	
	frames	frames	
Are individual commitment and	Human Resource	Structural	
motivation essential to student success?	Symbolic	Political	
Is the technical quality of the	Structural	Human Resource	
decision important?		Political	
		Symbolic	
Are there high levels of ambiguity	Political	Structural	
and uncertainty?	Symbolic	Human Resource	
Are conflict and scarce resources			
significant?			
Are you working from the bottom up?			

Four-Frame Model for Organizational Change

Note: Adapted from Reframing Organizations: Artistry, Choice and Leadership (p. 303), by L.

Bolman and T. Deal, 2017. Copyright 2017 by John Wiley & Sons, Inc.

Appendix B

Stage	Responsibility	Timeline	
Study and commit	Administration team	2 months	
	Direction team		
Plan	Administration team	2 months	
	Direction team		
	Staff		
Build capacity	Administration team	2 months	
	Direction team		
	Staff		
Implement and monitor	Staff	4 months	
	Administration team		
Continuously improve	All	1 month	

Hybrid Change Model Responsibility Chart

Note: This table outlines responsibilities of Ellwood Elementary School staff during the 12-

month implementation period of the first iteration of the hybrid change model.

Appendix C

	Duratio	n, Integrity, Commitmen	t, Effort Scoring Rubric	
DICE Factor 1		DICH	E Score	
	1	2	3	4
Duration	Project reviews occur	Project reviews occur 2	Project reviews occur 4	Project reviews occur
	less than 2 months	to 4 months apart.	to 8 months apart.	more than 8 months
	apart.			apart.
Integrity*	Leader is highly	Lacking some factors	Lacking many factors	Leader is incapable, not
	capable, respected,	from the '1' score.	from the '1' score.	respected, unskilled, and
	skilled, and motivated.			unmotivated.
	At least 50% of leader's			None of the leader's
	time has been assigned			time has been assigned
	to the project.			to the project.
Commitment,	Need for change is	Reason for change is	Less clear	Management reluctant
Management*	communicated clearly	communicated;	communication;	to support the change.
		management has a	management has a	

	DICE Score				
DICE Factor	1	2	3	4	
	through actions and	neutral approach to the	neutral approach to the		
	words.	change.	change.		
Commitment,	Eager and willing to	Willing to take on the	Reluctant to take on the	Extremely	
Local	take on the change.	change.	change.	reluctant/opposed to	
				taking on the change.	
Effort	Less than 10% extra	10% to 20% extra work	20% to 40% extra work	More than 40% extra	
	work is required.	is required.	is required.	work is required.	

Note: This table refers to Sirkin et al.'s (2014) duration, integrity, commitment, effort (DICE) model. Duration is the average time between project reviews; integrity is the team leader's capability, skill and motivation levels, and time commitment; management commitment considers if the reason for change and its importance are clear, messaging is convincing and consistent, and significant resources have been allocated; local commitment means that affected employees understand the reason for change and feel it is valuable, and reactions are considered; and effort refers to the percentage of increased effort required of employees, with consideration for current workload. Adapted from "The Hard Side of Management," by K. Sirkin, P. Keenan, and A. Jackson, 2014, *IEEE*

Engineering Management Review, 42(4), p. 132 (https://doi.org/10.1109/emr.2014.6966953). Copyright 2014 by IEEE. * Weighting

factor of 2

Appendix D

Questions to Anticipate and Address to Avoid Teacher Confusion

Question to Be Addressed	How Question Will Be Addressed		
Why do we need to change and why now?	Share data that shows why mental health is important and why schools need to		
	address it.		
	Draw a link between the vision at EES of supporting all students and the benefits of		
	promoting mental health.		
	Share findings that show the impact mental health education has on children and		
	adults.		
What is the full extent of the change we	Explore the MTSS model and explain the rationale for use.		
need?			
What should improve as a result?	Share research that shows a plethora of benefits, which include improved academics,		
	decreased bullying, and improved student resilience.		
How does this strategy or change link to	Discuss the School Improvement Plan and Board Improvement Plan for Student		
previous strategies?	Achievement to remind teachers that mental health and wellness is a school- and		
	board-wide goal.		

Note: This table references the multi-tiered system of support (MTSS) that will be used at Ellwood Elementary School (EES; a pseudonym) to improve student mental health. The questions create a framework for the content of the initial meeting with EES staff. Questions adapted from "How to Communicate Clearly During Organizational Change," by E. Johnson, 2017, *Harvard Business Review* (https://hbr.org/2017/06/how-to-communicate-clearly-during-organizational-change). Copyright 2017 by the Harvard Business Review.

Appendix E

Timetable of Subsequent Meetings for Ellwood Elementary School Staff

Study and Commit (2 Months)				
When	Leader	Participants	Action	Purpose
1 week after initial	Change leader	Staff	Whole group discussion in	Review pertinent questions
announcement on			online forum	that apply to all staff
Professional	Direction team	Staff (in division	Small group discussion	Address division-specific
Development Day		groups)	facilitated by direction team	questions and concerns
			members	
Weekly	Administration team	Staff	Office hours	Staff can ask questions and
				provide feedback
At end of study and	Change leader	Staff	Check in	Clarify burning questions
commit stage				and outline next steps

When	Leader	Participants	Action	Purpose
Staff meeting at	Change leader	Staff	Define staff roles,	Determine what staff need to
beginning of	Direction team		develop list of resources	build their capacity
planning stage	Emergent leaders		needed,	
			brainstorm wants for	
			professional learning	
Weekly	Administration team	Staff	Office hours	Staff can ask questions,
				provide feedback, and
				request specific supports
Subsequent monthly	Change leader	Staff	Check-in	Clarify burning questions
staff meeting				

Build Capacity (2 Months)				
When	Leader	Participants	Action	Purpose
Staff meeting at	Change leader	Staff	Ensure clarity of roles	Determine next steps and
beginning of build			Determine additional	ensure staff have what they
capacity stage			professional learning needs	need to commit to the MTSS
			Discuss connection with	
			caregiver community	
Within the 2-month	Community partners	Staff	Provide professional learning	Increase stakeholder
period	or expert resource		that supports mental health	understanding, comfort level,
	people		and the MTSS	and commitment
Weekly	Administration team	Staff	Office hours	Staff can ask questions and
				provide feedback
Subsequent monthly	Change Leader	Staff	Check-in	Clarify burning questions
staff meeting				

Note: This table references the multi-tiered system of support (MTSS) that will be used at Ellwood Elementary School (EES; a pseudonym) to improve student mental health. The timetable will guide the implementation of MTSS at EES and references three of the five stages in the hybrid change model (study and commit, plan, and build capacity).

Appendix F

Questions to Help Develop Communication Plans That Foster Successful Change

Beatty (2016) determined that there is a high correlation between change success and communication efforts. She formulated a list of questions to help develop communication plans that foster successful change. These questions, presented below, will help the change leader develop an effective communication plan for the organizational change at Ellwood Elementary School.

- 1. What roles and responsibilities will people have in the communications plan?
- 2. What guidelines should be put in place, and what objective is each communication intended to achieve?
- 3. Which stakeholders have an interest in this change? How much communication is necessary for each stakeholder group?
- 4. How will messages be effectively tailored to the needs and interests of each stakeholder group? What are the contents of effective change messages?
- 5. Who should communicate with each stakeholder group, and how can consistent and effective communication be assured?
- 6. What media are best for each communication and each stakeholder?
- 7. How will the effectiveness of the communications be assessed and improved?

(Beatty, 2016, p. 115)