

SECAC Meeting March 22, 2016

Agenda

Presuming Competence of All Learners, Parents and Staff.....

System Vision	System Principles	System Goals	DSE Focus Areas
Every student is inspired to learn and empowered to excel.	We believe in... * Achieving excellence in all we do * Developing each student's unique gifts * Engaging students in relevant, experiential, and personalized learning * Cultivating creative problem solving , critical thinking, and innovation * Promoting integrity, civility, and global citizenship * Enriching learning by honoring diversity * Fostering a culture of collaboration , trust, and shared responsibility * Removing barriers to success	1. Every student achieves academic excellence in an inspiring, engaging, and supportive environment. 2. Every staff member is engaged, supported, and successful. 3. Families and community are engaged and supported as partners in education. 4. Schools are supported by world-class organizational practices.	1. Accelerating Achievement 2. Parent/Community Partnerships 3. Disproportionality 4. Program Compliance and Nonpublic Schools

1. Rescheduling of 4/14 Meeting
2. Different Programs in HCPSS
3. Status of Personnel (Hiring, Vacancies)
4. SECAC Grant
5. Mental Health Supports



**BOARD OF EDUCATION OF HOWARD COUNTY
MEETING AGENDA ITEM**

TITLE: Mental Health Task Force: Year Three Update **DATE:** September 17, 2015

PRESENTER(S): Cynthia A. Schulmeyer, Coordinator, School Psychology, Instructional Intervention, Section 504 and Home & Hospital

VISION 2018 GOAL: Students Staff Families and Community Organization

- 1.7 Schools support the social and emotional safety and well-being of all students.
- 2.2 Staff members have access to learning experiences that support their professional growth.
- 3.4 HCPSS supports the well-being of students and families.
- 4.3 Resource and staffing allocations are aligned with strategic priorities.

OVERVIEW:

The Howard County Public School System (HCPSS) Mental Health Task Force was charged with identifying mental health supports and services, as well as, staff professional learning and resources needed to create environments conducive to the positive mental health and emotional wellbeing of students. A summary of the first two years of work was provided in the HCPSS Board of Education Reports dated September 26, 2013 *Bridge to Excellence: Student Mental Health Task Force Follow-Up Report* and September 11, 2014 *Mental Health Task Force Update*.

The purpose of this report is to provide a brief overview of the third year of work. A primary focus of this year was to address the identified need for classroom teachers to receive training in how to recognize warning signs of students experiencing mental health concerns. A one hour, avatar-based, interactive, online training simulation titled "At Risk for Educators: Recognize Students in Distress and Connect Them With Help" developed by *Kognito* and included in the *SAMHSA National Registry of Evidence-Based Programs and Practices* was reviewed. This training is funded by the University of Maryland Center for School Mental Health and is endorsed by the Maryland State Department of Education.

RECOMMENDATION/FUTURE DIRECTION:

The HCPSS Mental Health Task Force recommends that the HCPSS adopt and implement the "At Risk for Educators: Recognize Students in Distress and Connect Them With Help" online interactive training.

SUBMITTED BY:

Nancy FitzGerald
Executive Director, Special
Education and Student Services

APPROVAL/CONCURRENCE:

Renee A. Foose, Ed.D.
Superintendent

Cynthia A. Schulmeyer
Coordinator, School Psychology,
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Linda T. Wise
Deputy Superintendent

Background Information

A total of 13-20% of children living in the US experience a mental health disorder in a given year (*Center for Disease Control and Prevention, Mental Health Surveillance Among Children – United States, May 2013*). The most frequently reported disorders for children and adolescents include: Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder and Conduct Disorder, Autism Spectrum Disorder, Mood and Anxiety Disorders and Depressive Disorders. While 23.3% of Howard County youth report feeling sad or hopeless compared to 27.0% youth in the state of Maryland (*2013 Maryland Youth Risk Behavior Survey*) the CDC survey found that 2.6 million youths aged 12 to 17 (10.7%) experienced a major depressive episode within a one-year period.

In June 2012, the Howard County Public School Systems (HCPSS) Mental Health Task Force was charged with identifying mental health supports and services and staff professional learning and resources needed to create environments conducive to the positive mental health and emotional wellbeing of students. A summary of the first two years of work was provided in the HCPSS Board of Education Reports dated September 26, 2013 *Bridge to Excellence: Student Mental Health Task Force Follow-Up Report* and September 11, 2014 *Mental Health Task Force Update*. Using a population-based approach to school mental health as described in Transforming School Mental Health Services: Population-Based Approaches to Promoting the Competency and Wellness of Children (Doll & Cummings, 2008) the HCPSS Mental Health Task Force identified the following seven focus areas:

- Focus Area #1 Data Collection
- Focus Area #2 Professional Learning
- Focus Area #3 Student Curriculum
- Focus Area #4 HCPSS Three-Tiered Service Delivery Model
- Focus Area #5 Resource Mapping/Staffing
- Focus Area #6 Communication
- Focus Area #7 School-based Wellness Center

As the initial objectives of the HCPSS Mental Health Task Force were met the September 11, 2014 Board of Education Report recommended the formation of three Mental Health Workgroups designed to address six of the seven focus areas. These workgroups are:

- Data Collection and Resource Mapping/Staffing
- Professional Learning and Communication
- Student Curriculum and HCPSS Three-Tiered Service Delivery Model

This report describes the third year of work and recommends next steps to continue to assist schools with supporting the safety and emotional safety and wellbeing of all students as defined in *Vision 2018: Fulfilling the Promise of Preparation*.

Year Three of the HCPSS Mental Health Task Force

Data Collection and Resource Mapping/Staffing Workgroup

The results of the *2013 Maryland Youth Risk Behavior Survey* were reviewed by the Data Collection and Resource Mapping/Staffing workgroup during the 2014-2015 year. This self-report survey for middle school and high school students is part of a larger *Youth Risk Behavioral Surveillance – United States 2013* conducted by the Center for Disease Control and Prevention that addresses the following categories: bullying and harassment, protective factors, suicide, overweight and obesity, physical activity, nutrition,

sexual behavior, injury and violence, tobacco use, alcohol and other drug use. Results of the 2014 Maryland Youth Risk Behavior Survey are anticipated to be available in Fall 2015.

Professional Learning and Communication Workgroup

The HCPSS Mental Health Task Force identified a need for classroom teachers to receive training in how to recognize warning signs of students experiencing mental health concerns. The Professional Learning and Communication workgroup reviewed the “At Risk for Educators: Recognize Students in Distress and Connect Them With Help” developed by *Kognito* and included in the *Substance Abuse and Mental Health Services Administration (SAMHSA) National Registry of Evidence-Based Programs and Practices*. *Kognito* is an interactive online suicide prevention and mental health training that includes the following key features:

- One-hour, avatar-based training simulation that can be completed in one or multiple sittings.
- Teaches K-12 educators to **identify, approach** and **refer** students exhibiting signs of suicidal ideation, substance use/abuse, and psychological distress, including depression and anxiety.
- Practice and role-play real-life situations with fully animated and emotionally responsive virtual humans (avatars) to help educators learn effective communication tactics for managing these challenging conversations.

The University of Maryland Center for School Mental Health has purchased a multi-year license for all Maryland school systems to implement this training at no cost. On August 26, 2015 the Maryland State Department of Education (MSDE) announced the release of these professional learning activities to elementary, middle and high school educators and highly encourages the school workforce to participate in these trainings to increase knowledge and skills related to youth mental health.

The link for this training program is: <https://md.kognito.com>.

Student Curriculum and HCPSS Three-Tiered Service Delivery Model Workgroup

During the first two years the HCPSS Mental Health Task Force reviewed the mental health supports and services available in the schools. HCPSS uses a three-tiered model that incorporates a continuum of school-wide instructional and positive behavior supports for universal/primary prevention for all students, secondary prevention and intervention for some students and tertiary prevention and intervention for a few students. This workgroup continues to collaborate with the Office of Elementary & Secondary Curriculum, School Administration and Special Education and Student Services to strive for a comprehensive and coordinated Pre-K through 12 instructional and positive behavior supports service delivery model. An example of this collaboration is the inclusion of the Social Emotional Foundations for Early Learning (SEFEL) training during the Positive Behavior Interventions and Supports (PBIS) Summer Institute.

Recommendation:

The HCPSS Mental Health Task Force recommends that the HCPSS adopt and implement the “At Risk for Educators: Recognize Students in Distress and Connect Them With Help” online interactive training funded by the University of Maryland Center for School Mental Health and endorsed by the Maryland State Department of Education.