



December 9, 2020

MEMORANDUM

To: Members of the Board of Education

From: Michael J. Martirano, Ed.D.
Superintendent

Subject: Mental Health Supports in Schools

The purpose of this memorandum is to inform you that a 1-page handout that was developed last year has been updated and posted to the HCPSS website. This document describes all the comprehensive offerings of supports that are available to HCPSS students and staff through schools and community organizations. The updated 1-page handout is attached.

The purpose of developing this document was so students and staff had the comprehensive information they need while providing it in a format that was easy to navigate and understand. If somebody is struggling and requires mental health support, we want to ensure that they receive the necessary supports.

On November 19, 2020, the Board was provided with a memo describing, in detail, the comprehensive work being done to address student mental health concerns and safeguard students' emotional well-being during virtual learning. That memo is provided below.

If you have any questions related to the mental health supports available to students and staff, please contact Caroline Walker, Executive Director of Program Innovation and Student Well-Being.

Copy to: Executive Staff
Board of Education Office



November 19, 2020

MEMORANDUM

To: Members of the Board of Education

From: Michael J. Martirano, Ed.D.
Superintendent

Subject: Student Mental Health

The purpose of this memorandum is to update the Board on HCPSS efforts to address student mental health concerns and safeguard students' emotional well-being during virtual learning.

In August, Program Innovation and Student Well-Being staff shared with school administrators Re-Entry Social-Emotional-Behavioral "Look Fors" and the Re-Entry Social-Emotional-Behavioral Look Fors Flowchart (see attached .pdf documents). These documents provide detailed protocols to assist teachers and school-based staff in recognizing students who may need supports above and beyond the typical school and classroom approaches to social and emotional learning. Anchored in a trauma-informed approach, the "Look Fors" addressed the three areas, COVID-19, virtual learning, and social-emotional wellbeing, utilized during the first quarter. Teachers and school-based staff were asked to look at their class lists and identify any students who they were concerned about due to hardships associated with:

1. COVID-19, for example: health concerns, change in home/family situations, economic hardships, death/loss, isolation
2. Virtual learning, for example: not logging in, not completing assignments, not connecting with other students, not connecting with you
3. Social and emotional well-being, for example: internalizing difficulties (withdrawn, anxious/worried, depressed), externalizing difficulties (oppositional, angry, verbally aggressive)

Between August 31 and September 11, administrators distributed the flow chart and directions to all Instructional Team Leaders and added the three "Look Fors" on all grade/departmental team meeting agendas as well as their school's Student Support Team (SST) Referral Form. Between September 8 and September 18, administrators shared the three "Look Fors" at both school Full Staff Meetings and all grade/departmental team

meetings. Between September 21 and October 9, teachers/staff reviewed the “Look Fors” at grade level/departmental team meetings and identified students to refer to SST by completing the SST referral form. Between September 28 and October 16, SSTs reviewed all submitted referral forms, followed-up with teachers, staff, and/or parents, as appropriate, and took other next steps as indicated on the flowchart. Between October 19 and November 6, teachers/staff reviewed the “Look Fors” and identified any additional students, referring students to SST as appropriate. With the understanding that students may respond to the trauma experienced during the pandemic in a variety of ways, teachers/staff may refer more students than typical to SST thus referral forms are being reviewed on a weekly basis. Administrators, teachers, and staff were reminded to alert SST to urgent concerns immediately. HCPSS will update and continue similar practices.

Staff are also working with the Horizon Foundation to institute a pilot mental health screen at one or more middle schools. A goal of this screen is to assist with identification of students experiencing social-emotional challenges who have not been referred to SST for interventions and supports. Horizon is providing HCPSS with an additional \$250,000 in grant funds in order to hire an additional social worker who will oversee the screening process and work with designated schools not currently served in the school-based mental health cluster model. This grant will come to the Board for approval once the official letter is received. Funds will also be used to acquire and score a mental health screen and to provide ongoing mental health services through HCPSS’s contracted providers to students whose families are not eligible for Medicaid and do not have private mental health insurance. Funds have also been set aside to allow the independent evaluator to continue to evaluate the school-based mental health program.

It is important to ensure that all students are given the opportunity to learn and practice social and emotional skills in order to increase their competence and resilience. At the elementary level, all students participate in daily Social Emotional Learning (SEL) skill-building lessons and activities via the Caring School Community program. Middle schools are implementing a new weekly Flex Time and using the Caring School Community program in addition to other resources to support social-emotional learning. These intentional opportunities for skill-building and application in a safe space allow students to learn the SEL core competencies of self-awareness, self-management, social awareness, relationship skills, and responsible decision-making and then staff are able to provide connections to those skills throughout the day.

Addressing student social-emotional well-being also includes suicide prevention efforts across the district. Middle and high school Health Education classes utilize the Signs of Suicide curricula to identify risk factors, warning signs and protective factors of suicidal behaviors. The HCPSS Suicide Intervention Procedures are implemented any time a student makes a statement, drawing, or gesture of suicidal ideation. Virtual implementation of these procedures require the school administrator and a trained intervenor (e.g., school counselors, school psychologists, school social workers, mental health therapists) to collaboratively contact the parent to inform them of the ideation and problem-solve to activate support systems for the student. Finally, all HCPSS certificated staff just completed the 2020 Suicide Prevention: Information for Educators training as required per COMAR 13A.07.11, which trains staff to identify and effectively respond to

youth at risk for suicide, refer and respond to student mental health, student trauma and student safety needs, and identify professional resources to help students in crisis.

Students have also been receiving targeted group interventions and individualized interventions during virtual learning. Alternative educators and school counselors have been providing support in the virtual classrooms. Small group counseling has focused on coping strategies, self-management skills, and socialization strategies. Members of the school-based Student Support Teams (SSTs) have been checking in with students, while school psychologists, social workers, and school counselors have consulted with parents. SST members have worked closely with classroom teachers to put in place classroom behavior supports for struggling students. Students have also continued to receive mental health services through Telehealth and the HCPSS mental health community providers. Teachers, school counselors, family members, and community providers have been asked to share any changes in a student's mental health status so that appropriate interventions can be provided quickly.

Reporting of child abuse and neglect (physical, mental, emotional) has decreased during the pandemic. In April, a process was created for reporting while in a virtual environment. Program Innovation and Student Well-Being staff have collaborated with Department of Social Services staff to improve

processes and communication in order to better engage students, families, and staff and are currently developing communication materials (e.g., electronic flyer, Instagram post) to help increase awareness about signs to look for and how to report abuse and neglect.

If you have any questions, please contact Caroline Walker, Executive Director of Program Innovation and Student Well-Being.

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Model for Mental Health Supports in Schools

The Howard County Public School System (HCPSS) strives to give all students comprehensive support, with every adult serving a role in students' social-emotional well-being. The school system embeds mental health supports throughout the instructional program and embraces community and family partnerships. This approach better equips HCPSS to help each child thrive socially, academically and emotionally.


1 in 4
 Howard County high school students experienced sad or hopeless feelings*


1 in 5
 Howard County middle school students experienced sad or hopeless feelings*

*Source: 2018 Youth Risk Behavior Survey

57%
 of Howard County children demonstrated readiness for kindergarten,** with social (emotional) foundations among the key criteria

**Source: 2019–20 Kindergarten Readiness Assessment



Ways HCPSS is Supporting Students and Staff...

Student Well-Being

- Student Support Teams (SSTs) at every school provide a structured process to identify students' social-emotional, academic, and/or behavioral needs. They connect students and families with appropriate resources and facilitate coordination of care.
- Parent outreach and support for student well-being are provided through SST. Staff in the BSAP, Hispanic Achievement, and International Student and Family Services offices provide school-based and central programming.
- HCPSS student services staff are available to support students and families in need.
 - Staff include school counselors, school psychologists, cluster nurses, alternative educators, school social workers, liaisons, and pupil personnel workers, as well as mental health therapists for the Homewood community.
 - Students and families are welcomed and encouraged to contact staff for support.

Employee Well-Being

- The Employee Assistance Program (EAP) has been enhanced and rebranded to Staff Counseling and Support Services to increase utilization and access to valuable resources.
- The HCPSS Employee Well-Being Funding Program welcomes schools and offices to apply for grants to support well-being through a wide range of programming, such as yoga, mindfulness speakers, healthy cooking classes and more.
 - Grants are made possible through HCPSS' partnership with CareFirst and AETNA.
- Well-being representatives are in place in every school and office.

Professional Learning for Staff

- School social workers, school counselors and school psychologists receive annual training for suicide intervention procedures.
 - Trainings for school staff operating in a referral role have occurred at both the central office and school levels, and include instructional and administrative staff.

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Ways HCPSS is Supporting Students and Staff...

Professional Learning for Staff, *(continued)*

- School-based student services staff use a Suicide Prevention for Educators training during staff meetings, which can be reviewed annually.
- Crisis teams are available to support schools, both immediately during a crisis and after a crisis involving a student or staff member.

Superintendent Advisory

- The Superintendent's Mental Health Community Subcabinet, comprised of organization leaders and executives, works in tandem with the Mental Health Community Advisory Council (MHCAC), which has representation from over 40 different organizations in Howard County. This advisory:
 - Informs and collaborates with HCPSS staff to establish joint solutions.
 - Builds community awareness about mental health and helps destigmatize support.
 - Promotes the Network of Care 3.0 directory.
 - Links to a directory of training opportunities available for mental health professionals and community members.

Community Supports

- **Grassroots**
 - **24 Hour Crisis Hotline – 410-531-6677**
Individuals may call for a variety of reasons including suicide, family and relationship problems, shelter needs, violent or threatening domestic situations, loneliness or depression, and chemical dependency issues, among others.
 - **Mobile Crisis Team – 410-531-6677**
This two-member team of master's level mental health professionals respond with the police to psychiatric emergencies, family crises, and other traumatic events in the community. Operates from 9 a.m. to 11 p.m. daily.
 - **Walk-in Counseling**
Anyone in need of immediate assistance may walk in to the agency at any time to see a counselor. An appointment is not needed to receive services. There is no fee for the service.
- **Howard County Health Department Behavioral Health Navigator – 410-313-6202**
Available to help families find resources in the community to support children and adults.
- **CARE Line for Howard County Families – 410-313-CARE**
Resource and referral service provided by the Howard County Office of Children and Families.

Suicide Prevention

- Suicide and Mental Health Awareness Campaign
 - Implemented partnership with the Howard County Health Department (HCHD).
 - Posters are prominently displayed in middle and high schools to raise awareness of teen mental health issues, including suicide, by encouraging students, families, school staff, and community members to learn warning signs and how to start conversations with students who may be in distress.
- Preventing Youth Suicide: hcpsne.ws/prev_suicide
Tips For Families document includes warning signs, risk factors, and protective factors for families. Community resources and actionable steps families can take if there are concerns about suicidal ideation are included.
- Suicide Prevention: hcpsne.ws/suicide-signs
Information for Educators document educates school staff about warning signs, risk factors, and protective factors, and includes lessons for all secondary students (e.g., School Counseling prevention lessons, Health Education Signs of Suicide).

Suicide Intervention

- HCPSS responds seriously to any threat of self-harm or suicidal behavior. Any time a student makes a statement, or is reported by someone else (whether a staff member, student, parent, or community member) to have made a statement that may be interpreted as potentially self-harmful, it is the responsibility of all school staff to refer the student immediately to an HCPSS mental health specialist, mental health therapist, school counselor, school psychologist, or school social worker.
- Detailed procedures have been established that identify the roles and responsibilities of school staff in responding to students suspected of being suicidal, and structuring the referral, interview, and follow-up steps in intervening with a potentially suicidal student.

For general inquiries, contact the HCPSS Program Innovation and Student Well-Being office at 410-313-6776 or visit: hcpsne.ws/mentalhealth. For school-based information, contact your school's Student Support Team.

