

Agency of Education Response to Act 43

An act relating to building resilience for individuals experiencing adverse childhood experiences.

REPORT

September 1, 2017

Report/Recommendations to the Adverse Childhood Experiences Working Group regarding existing resources to mitigate childhood trauma

Submitted by Dr. Rebecca Holcombe, Secretary



Act No. 43 (H.508) of 2017 An act relating to building resilience for individuals experiencing adverse childhood experiences

Summary

This act establishes principles regarding Vermont's response to trauma and toxic stress occurring during childhood. It establishes the interim Adverse Childhood Experiences Working Group that shall meet to analyze existing resources related to building resilience in early childhood and propose appropriate structures for the most evidence-based or evidence-informed and cost-effective approaches to serve children experiencing trauma. The Working Group is composed of six legislative members and may propose recommended legislation by November 1, 2017. The act also requires the Agency of Human Services to present to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare a plan to address the integration of evidence-informed and family-focused prevention, intervention, treatment, and recovery services for individuals affected by adverse childhood experiences by January 15, 2019, as well as a status report on the development of the plan by February 1, 2018.

Report Requests

Act 43 requested specific information from the Agency of Human Services and Agency of Education in advance of the working group convening as follows:

- (2) On or before August 15, 2017, the Agency of Human Services, in consultation with the Agency of Education, shall provide data and background materials relevant to the responsibilities of the Working Group to the Office of Legislative Council, including:
- (A) a spreadsheet by service area of those programs or services that receive State or federal funds to provide intervention services for children and families and the eligibility criteria for each program and service;
 - (B) a compilation of grants to organizations that address childhood trauma and resiliency from the grants inventory established pursuant to 3 V.S.A. § 3022a;
 - (C) a summary as to how the Agencies currently coordinate their work related to childhood trauma prevention, screening, and treatment efforts;
 - (D) any training materials currently disseminated to early child care and learning professionals by the Agencies regarding the identification of students exposed to adverse childhood experiences and strategies for referring families to community health teams and primary care medical homes; and
 - (E) a description of any existing programming within the Agencies or conducted in partnership with local community groups that is aimed at addressing and reducing trauma and associated health risks to children.

This report addresses these issues for the Agency of Education and serves as a companion piece to the [report](#) submitted by the Agency of Human Services (AHS).

(A) Spreadsheet of Programs

The legislature requested a spreadsheet by service area of those programs or services that receive State or federal funds to provide intervention services for children and families and the eligibility criteria for each program and service. The Agency does not have data available to meet the legislative request. The current system of accounting does not provide for this level of analysis.

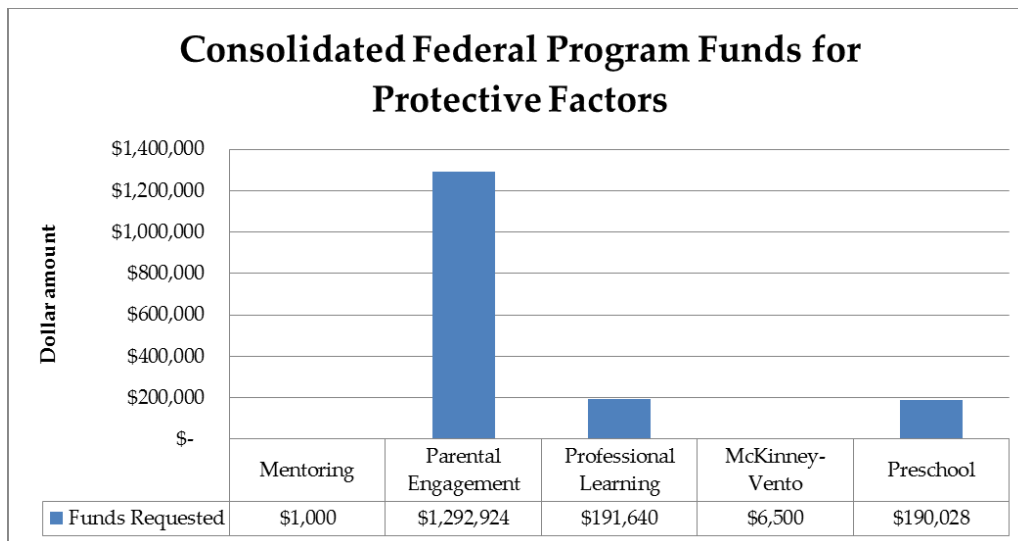
(B) Grants

The legislature requested a compilation of grants to organizations that address childhood trauma and resiliency from the grants inventory established pursuant to 3 V.S.A. § 3022a. The Agency of Education is responsible for state and federal grants that are allocated to school systems and various partners to support efforts in addressing childhood trauma and resilience. The grants described here are those that are administered in addition to the grants described by AHS in their [report](#).

Research has shown that incidence(s) of childhood trauma are associated with negative outcomes in adulthood. Further, negative experiences for parents increase the likelihood of childhood trauma for their children. In seeking to reduce the prevalence and impact of childhood trauma, we turn to understanding and supporting the Strengthening Families Protective Factors Framework which mitigates childhood trauma and thereby reduces the likelihood of negative outcomes. These five protective factors include: 1) Parental Resilience, 2) Social Connections, 3) Knowledge of Parenting and Child Development, 4) Concrete Support in Times of Need and 5) Social and Emotional Competence of Children.

All expenditures related to education are viewed as investments. As young people participate in education, they are better prepared with the skills and knowledge they need to secure financial independence and to live healthy lives. In this analysis, we exclude general education investments and include only those grants that may go beyond the specific academic services provided to young people.

Schools make substantial investments in children through the use of federal funds. In the 2016 – 2017 school year, Vermont schools allocated nearly \$1.7M of Title IA and Title IIA funds to five activities that have a direct bearing on Protective Factors. These activities provide direct support to students and families through increasing teacher capacity to support students in developing social and emotional competence (Mentoring and Professional Development), assisting families in accessing services (McKinney-Vento and Preschool), and supporting parents as they engage in supporting their children (Parental Engagement).



Grants from the federal and state government to school systems also provide support for the Strengthening Families Protective Factors Framework. In the table on the subsequent pages, we provide a brief description of the specific grants, the population served and its influence on supporting the protective factors and/or mitigating childhood trauma. It is important to note that recent changes in federal policy will result in declining allocations to Vermont in the upcoming years for many of the education grants.

For most grants, school systems make choices among allowable investments based on the results of local needs assessments. As a result, no two school systems will expend all funds in exactly the same way and school systems have some degree of discretion in the investments they make. For example, two schools may both find through their needs assessment that issues related to school climate and discipline are interfering with learning. The first school may determine that investment in professional development for teachers related to conflict resolution and de-escalation is the best investment. The second school may determine that using the funds to support a mentoring program for students who have been suspended frequently is a better investment. Both of these approaches could be approved by the Agency of Education.

In all cases, the grant funds may be used to compliment funds they receive from other locations. For example, a behavior interventionist may be hired by a DA through AHS funds to provide 10 hours of service to a particular school and then the school system may select to use funds that are managed through the Agency of Education to augment or extend those services to 20 or 40 hours of service. There are multiple other examples that could be given for braiding different funding streams to address student needs.

Table #1- Federal and State Grants available to school systems through the Agency of Education.

Grant Title	State/ Federal	Award Amount 2016-17	Population Served	How these funds may be used to address childhood trauma and resilience
Title I, Part A Consolidated Federal Programs (CFP)	Federal	\$33,526,591	All Supervisory Unions/Districts May be school-wide or for individual students who are living in poverty.	Provides additional resources to support students who are living in poverty. May be expended on a wide variety of services in alignment with a needs assessment and allowable expenditures including academic support, climate improvement, social-emotional learning, etc.
Title I, Part D, Neglected or Delinquent Youth (CFP)	Federal	\$80,000	Facilities in Vermont that serve students who fit the federal definition of neglected or delinquent - residing in local correctional facilities, or attending community day programs for delinquent children and youth	Improve education programs at these facilities so children and youth have the opportunity to meet the same challenging State academic content standards; provide such children and youth with the services needed to make a successful transition from institutionalization to further schooling or employment
Title IIA (CFP)	Federal	\$9,963,963	All Supervisory Unions/Districts Professional Development funds for educators	May be expended on efforts to build educator awareness and ability to address childhood trauma, resilience, methods of building protective factors
Title III (CFP)	Federal	\$325,000	Supervisory Unions/Districts that have the greatest proportion of English Learners in their student population and the greatest percentage of Immigrant students in their student population.	Used to provide professional development to teachers of English Learners, provision of Effective language instruction educational programs, and for Parent, Family, and Community Engagement.
Title IV, Part A (CFP)	Federal	Not awarded in 2016 - 2017	All Supervisory Unions/Districts through formula	Funds can be used to increase school capacity to provide all students with access to a well-rounded education, improve school conditions for student learning, and improve the use of technology in order to improve the academic achievement and digital literacy of all students

Grant Title	State/ Federal	Award Amount 2016-17	Population Served	How these funds may be used to address childhood trauma and resilience
McKinney- Vento (CFP)	Federal	\$87,500	All Supervisory Unions/Districts Students who are categorized as lacking a fixed and adequate residence.	Provides resources and protections for students who experience some degree of homelessness. Resources include transportation to and from school, materials, tutoring, supplies and other supports.
Title IV, Part B 21 st Century Learning Centers	Federal	\$5,430,863	Supervisory Unions/Districts who are chosen through a competitive process; must demonstrate gain in project goals over the term of the 3 – 5 year grant	The program helps students meet state and local student standards in core academic subjects, such as reading and math; offers students a broad array of enrichment activities that can complement their regular academic programs; and offers literacy and other educational services to the families of participating children.
IDEA Formula funds to SU/SDs	Federal	\$26,598,380	All SU/SDs Provides funds to support a Free Appropriate Public Education for students eligible for special education. Children and youth from Birth through 22 who are eligible for special education. <ul style="list-style-type: none"> • Birth to 3 administered by AHS. • Three to 22nd birthday administered by AOE. 	Provides direct services and supports to children and youth with disabilities who may be affected by childhood trauma. Services and supports can address both needs stemming from trauma and practices that build resilience. Coordinated Early Intervening Services provision in IDEA allow SU/SDs to spend up to 15% of the federal allocation on prevention activities.
IDEA Annual allocation To AOE	Federal	\$3,350,000 Includes administration, required and allowable activities.	Allowable activities for other state activities funds include: (iii) To assist LEAs in providing positive behavioral interventions and supports and mental health services for children with disabilities	AOE can contract with individuals/organizations that provide professional development to school staff regarding practices that build resilience and ameliorate effects of trauma. Note: These funds can only be used for contracts.

Grant Title	State/ Federal	Award Amount 2016-17	Population Served	How these funds may be used to address childhood trauma and resilience
Preschool Development Expansion Grant	Federal	\$4,877,546	Four year olds at or below 200% of the federal poverty level in grant participating sites.	Provides high quality full day preschool with full comprehensive services to a group of children with a likelihood of experiencing adverse childhood events.
Race to the Top-Early Learning Challenge Grant	Federal	Funds are by project total over 4 years \$1,940,000	Participants in the grant and children birth-eight.	<ol style="list-style-type: none"> 1. Early MTSS (#13)-Strengthens the skill set of the early childhood workforce to support social and emotional competence and growth through a system of tiered supports. 2. Vermont Early Learning Standards (#9)-Increases knowledge and strengthens practice of the early childhood workforce to ensure curriculum alignment with the standards addressing social and emotional development. 3. Early Childhood Comprehensive Assessment (#10)-Increases the knowledge and strengthens practice of the early childhood workforce on early childhood screening and assessment tools to identify children in need of social and emotional supports.
Sexual Health Grant	Federal	\$320,000	Middle and high school educators in 12 priority districts;	Funds assist educators in providing trauma informed sexual education programs.
Child Nutrition	Federal	\$29,081,826	All Supervisory Unions/Districts, child and adult care facilities, some independent schools; VT Foodbank	Funds are used to reimburse eligible entities for the provision of healthy meals and snacks to students in need, or in some cases, all students. Meals can include breakfast, lunch, snack and supper. Supporting foods are fresh fruits & vegetables and milk. VT Foodbank funds are for food shelf support.

Grant Title	State/ Federal	Award Amount 2016-17	Population Served	How these funds may be used to address childhood trauma and resilience
Child Nutrition	State	\$1,341,861	All Supervisory Unions/Districts; VT Foodbanks	Funds are used to support reduced price breakfast and lunch so that schools can offer free meals to students who are in need. VT Foodbank funds are for food shelf support
Act 230	State	\$417,348	Educators Used for training of teachers, administrators and other personnel in the identification and evaluation of, and provision of services to children who require educational supports.	Funds can be used for activities that address educators' capacity to build resilience and ameliorate effects of trauma.
BEST Funds	State	\$220,475	Educators Used for training, program development and building school and regional capacity to meet the needs of students with emotional behavioral problems.	Funds can be used for activities that address educators' capacity to build resilience and ameliorate effects of trauma
Vermont State Special Education Funding Formula	State	\$6,442,927 This is the FY '16 amount. The FY '17 amount is not available until mid-Sept..	Students eligible for special education	If an eligible child or youth identified with any of the qualifying disabilities needs direct services or supports to address building resilience or ameliorating effects of trauma <i>and</i> these are written into the Individualized Education Program (IEP) these funds can be used.
State Early Special Education Block Grant	State	\$6,442,927	Three to five year olds who receive special education services	If an eligible child identified with any of the qualifying disabilities needs direct services or supports to address building resilience or ameliorating effects of trauma <i>and</i> these are written into the Individualized Education Program (IEP) these funds can be used.

Grant Title	State/ Federal	Award Amount 2016-17	Population Served	How these funds may be used to address childhood trauma and resilience
Tobacco Prevention	State	\$570,000	Educators working with children and youth at risk of using or using tobacco products;	Children who have experienced trauma are at a higher risk of substance abuse than those who haven't. These funds provide educators with resources and evidence based strategies to prevent or cease tobacco use.
State Placed	State	YTD: \$12,186,233	All Supervisory Unions/Districts Students (ages 3-21) who are placed out of their home by a VT State Agency: (Department for Children and Families, Department of Mental Health, or Department of Aging and Independent Living)	State Placed Funding provides reimbursement to supervisory unions/districts and residential facilities for educational programming for all students placed outside of their home (foster care, kinship care, developmental homes). This includes placement in public schools, independent and residential schools. It may also cover treatment including family counseling. May also be used for training of teachers, administrators in the identification and evaluation of, and provision of services to children who require educational supports.

(C) Coordination

A summary as to how the Agencies currently coordinate their work related to childhood trauma prevention, screening, and treatment efforts;

The Agency of Education concurs with the Agency of Human Services Act 43 Report and offers the following additional information regarding Act 264, an integral part of the student services process.

Act 264: The purpose of Act 264 was to develop and implement a coordinated system of care so children and adolescents with a severe emotional disturbance (SED) and their families would receive appropriate educational, residential, mental health and other treatment services in accordance with an individual plan. This was a joint act between The Agency of Human Services (specifically the Department for Children and Families (DCF) and the Department of Mental Health (DMH)) and the Agency of Education (AOE). The act establishes a means by which to improve the delivery of services by determining who is in charge of the services, by clarifying the administrative process by which they are to be available, and to mandate participation in the process by the three departments.

The passage of Act 264 in 1988 established the following:

- Created an interagency definition of severe emotional disturbance.
- Created a coordinated services plan.
- Created one Local Interagency Team (LIT) in each of the State's twelve Agency of Human Services' districts.
- Created a State Interagency Team (SIT).
- Created a governor appointed advisory board (called the Act 264 Board).
- Maximizes parent involvement.

As a result of Act 264, the following progress has been identified in the state's System of Care:

- Decision making and service delivery is more coordinated and involves parent voice at all levels
- Increased federal, state, and foundation funds for services, coordination, and training
- More children, youth and families have been identified and served
- Greater variety and flexibility of supports and services available
- Increased interagency collaboration within System of Care at local and state levels
- Created ability to think and act like a system: common purpose, reasons to act together as allies; develop strategies for continuous quality improvement

A subsequent revision of Act 264 included all VT students who are eligible for special education supports and services. It no longer is limited to students with SED. This enables a larger number of students who can access the coordination of services through AHS and AOE.

(D) Training Materials for Early Child Care

The Agency of Education provides additional support to childcare and early learning providers in addition to those provided by AHS departments. Particularly, for those participating in Early MTSS projects have received training, resources and materials focused on supporting healthy social and emotional development of young children. They have also received training for early childhood special education supports and services. Current on-line technical assistance resources include:

1. [Vermont Early Learning Standards](#) were created to describe core components of instruction in early learning settings. Directly related to trauma and resilience building are the Domain of Social and Emotional Learning and Development that support children in developing emotional and self-regulation, self-awareness and effective relationships with adults and peers. Professional development resources are available through modules and in person trainings offered throughout the year.
2. [Teaching Strategies Gold](#) is an assessment used to determine how well preK students are gaining the skills expedited in the learning environment. The assessment materials provide training to teachers who administer the assessment helping them to identify standards of readiness that are benchmarked to a larger population than their own classroom. By watching videos and evaluating sample students, teachers improve their observational skills and thereby improve their own assessments of student achievement.

(E) Existing Programming Description

The Agency of Education supports school systems in developing and providing programming services to children or their families, rather than direct support. As required by law, all public schools in Vermont shall develop and maintain a tiered system of academic and behavioral supports (MTSS) for the purpose of providing all students the opportunity to succeed or be challenged in the general education environment.

Each year the Agency of Education surveys school systems to understand what services are offered to students and how those services are funded. In 2016-17, 256 of roughly 300 schools responded to our request for information. Every responding school has developed and maintained aMTSS and provides a variety of services. The majority of schools responding were those serving elementary grades (pk-6) in some configuration. Among the services that could be offered, few are expected to be present at every school depending on grade configuration and local need.

AOE also provides annual training to local Homeless Liaisons, employed by Supervisory Unions/Districts, so that they can better support students who are experiencing homelessness. These trainings help the Liaisons provide supports, engage in community outreach with other organizations and better identify students in need.

Health and Nutrition Services

Finding: The most common health and nutrition services include access to nursing and food/nutrition programs. The majority of schools report specific exercise and fitness programs (beyond Physical Education), healthy & safe schools and wellness programs. A substantial number offer access to assistance programs, dental services, substance abuse and medical transportation. These services are paid through a wide variety of funding streams.

Table 2: Health and Nutrition Services offered

Services Offered	Percent	Number
Nursing / Health Services	95%	242
Nutrition & Food Services	83%	213
Wellness Programs	57%	145
Exercise & Fitness	56%	144
Healthy & Safe Schools	52%	133
Dental Clinics and Services	41%	106
Substance Abuse	41%	104
Assistance Programs (SAP)	30%	78
Medical Transportation	28%	72
Health Centers and Clinics	14%	36
Other (Please specify)	8%	20
No Health & Nutrition	1%	3
Total Number of School Respondents		256

Table 3: Health and Nutrition Services Funding

Funding Source	Percent	Number
Local / School Budget	92%	236
School Nutrition	68%	174
Medicaid Reimbursement	64%	163
Consolidated Federal Programs (Federal-CFP)	60%	154
Parents / Community	53%	136
Child Nutrition	52%	132
State Special Education	51%	130
IDEA (Federal- Special Education)	34%	86
AOE Tobacco Prevention	32%	81
BEST Act 230	32%	81
21st Century Grants (Federal-After School)	30%	78
Substance Abuse	22%	56
Other (Please specify)	4%	9
No services	1%	3
Total Number of School Respondents		256

Mental Health Services

Finding: The most common mental health services include access to Counseling/Guidance, and School wide Discipline Plans. The majority of schools report offering Behavior Intervention, and a Trained Crisis Response Team. A substantial number offer access to School Psychological, and Social Worker/Clinician services. These services are primarily paid through Local/School Budgets, Medicaid Reimbursement and Special Education funding sources.

Table 4: Mental Health Services offered

Services Offered	Responses	Number
Counseling / Guidance	96%	246
School wide Discipline Plan	91%	232
Behavior Intervention	78%	199
Trained Crisis Response Team	70%	180
School Psychological	69%	176
Social Worker / Clinicians	64%	163
Child Protection Team	49%	126
Teacher Advisor System	41%	105
Substance Abuse	36%	92
Home School Coordinator	34%	88
Student Assistance	29%	73
Medical Transportation	28%	71
Conflict Resolution	27%	70
"Whole School/ Whole Community/Whole Child" Team	27%	70
Other (please specify)	6%	16
No Services	0%	1
Total Number of School Respondents		256

Table 5: Mental Health Services Funding Sources

Funding Source	Percent	Number
Local / School Budget	93%	237
Medicaid Reimbursement	71%	181
State Special Education	59%	151
Consolidated Federal Programs (Federal-CFP)	52%	132
IDEA (Federal- Special Education)	33%	85
Parents / Community	31%	79
BEST Act 230	29%	75
AOE Tobacco Prevention	21%	53
Substance Abuse	18%	47
21st Century Grants (Federal- After school)	15%	39
Other (Please specify)	3%	7
No services	1%	2
Total Respondents		256

Behavior Support Services

Finding: The most common behavior support services include access to Extended Kindergarten and Instructional Coaches. The majority of schools report offering Kindergarten Screenings and Trauma Informed services. A substantial number of schools offer programs and supports such as: English Learners, Intervention Blocks, Local Comprehensive Assessment Systems, Positive Behavior Interventions and Supports (PBIS), and Pre-Kindergarten. Every school reports providing some behavior supports. These services are primarily paid through Local/School Budgets, with additional funding from Consolidated Federal Program Funds, Medicaid Reimbursement and State Special Education sources.

Table 6: Behavior Support Services

Services Offered	Builds Resilience by creating trauma informed school systems that ...	Percent	Number
Extended Kindergarten	Provide young children with additional time in safe and structured environments that promote learning;	71%	182
Instructional Coaches	Provide support for teachers so that they can better support their students;	70%	178
Kindergarten Screening	Identify developmental levels of children entering kindergarten so that extra instruction and support can be provided;	63%	160
Pre-K	Provide at least 10 hours of preschool education a week to give 3-5 year olds a better start in school;	59%	150
Intervention Block	Provide specific strategies to support the learning needs of students who have experienced trauma;	58%	148
PBIS (Positive Behavior Interventions and Supports)	Teach school and classroom expectations and emphasize positive behavioral supports and interventions;	57%	145
Trauma Informed	Are designed to build resilience, anticipate and respond to the needs of students who have experienced trauma;	57%	145
English Learner Supports	Provide specialized supports to English learners who may have experienced trauma before coming to the United States;	56%	144
Local Comprehensive Assessment	Have agreed upon assessments that are used to identify academic, social emotional and behavioral characteristics of students and plan supports;	50%	128
Preschool Screening	Identify social and emotional or behavioral challenges early so that further assessment	46%	117

Services Offered	Builds Resilience by creating trauma informed school systems that ...	Percent	Number
	or services can be provided before children enter school;		
Early MTSS (Multi-Tiered Systems of Support)	Employ systemic, evidence based practices to promote healthy social and emotional development;	45%	114
Restorative Practices	Address behavioral challenges in a way that is positive, proactive and models respectful, nonviolent relationships;	43%	110
SAP (Student Assistance Program) Study Supports	Provide social emotional supports to students;	18%	47
SPDG (State Personnel Development Grant)	Implement systemic, evidence based practices for prevention and intervention in the areas of academics and behavior;	9%	22
SWIFT (Schoolwide Integrated Framework for Transformation)	Promote equity and excellence for all students through the implementation of a comprehensive framework of evidence based practices;	6%	16
SLDP (Specific Learning Disability Pilot)	Have agreed upon assessments that are used to identify academic, social emotional and behavioral characteristics of students and plan supports;	3%	8
SSIP (State Systemic Improvement Plan)	Engage all students, with a focus on those with emotional/behavioral disabilities, in effective math instruction and intervention and provide additional supports to address social emotional or behavioral needs.	3%	8
Other (Please specify)		7%	17
No Services		0%	0
Total Respondents			256

Table 7: Behavior Support Services Funding Sources

Funding Source	Percent	Number
Local / School Budget	99%	253
Consolidated Federal Programs (CFP)	70%	178
Medicaid Reimbursement	65%	167
State Special Education	59%	150
BEST Act 230	36%	93
IDEA	36%	91
Parents / Community	34%	87
21st Century Grants (Federal-After School)	20%	51
AOE Tobacco Prevention	14%	36
Other (Please specify)	1%	3

Recommendations for Testimony:

As the committee is seeking to understand how trauma-informed work and resilience building is occurring in schools, the Agency of Education would recommend speaking with the following groups or roles:

- Members of Educational Support Teams- these teams can describe the ways in which they identify, respond and support students when students require more assistance.
- Special Education Directors- while not all students who have special needs experience trauma, it is a common associated issue- specifically you may wish to speak to Vermont Council of Special Education Association VCSEA.
- Superintendents and Principals- Superintendents and principals can describe the ways in which they have engaged in community partnerships to support families beyond the school building. They can also describe the ways in which they make decisions regarding investing local funds for purposes related to resilience building.
- Vermont Superintendents' Association-VSA and VCSEA have recently hosted conferences related to trauma-informed instruction and implicit bias.
- Teachers, principals, home-school coordinators and site based staff in myriad roles could describe what is currently happening and where they feel there are gaps.
- UVM- PBIS- the PBIS model is highly prevalent in Vermont and is led by UVM under contract with AOE and local school systems.
- Experts in Trauma and Resilience
 - a. Harvard's Developing Child (likely available for in person testimony or by skype)
 - i. [Key concepts in Resilience](#)
 - ii. [From Best Practice to Breakthrough Impacts](#)
 - b. [Dr. Michael Ungar is](#) based on Halifax, Nova Scotia in Canada researches the best approaches to take for building resilience. A powerful: [short video \(35 minutes\)](#)