

**Legislative Report**

**Act 112: Grants to Expand Mental Health  
and Well-Being Services to Youth**

**January 21, 2025**

Issued by the Vermont Agency of Education in collaboration with the  
Department of Mental Health



## Table of Contents

Executive Summary	4
Purpose	4
Mandatory Eligibility Criteria	4
Additional Eligibility Criteria	5
Technical Assistance	5
Summary of the Impact of Act 112	6
Positive Impacts	6
Challenges	6
Recommendations for a Model of the Integration of Mental Health In-school, After-school, and Summer Programming	7
The Urgency of the Issue	7
The Benefits of Investing in School Mental Health	7
Conclusion	10
Appendix	11

## Executive Summary

In 2021, the Vermont Agency of Education (AOE) required Vermont schools to assess the impact of the COVID-19 pandemic on students. These assessments revealed a significant increase in student anxiety, depression, and related behavioral issues.

To address this growing need, the Vermont General Assembly passed Act 112 of 2022. This law directed the use of federal COVID relief funds to expand access to mental health resources for students.

While Act 112 brought positive changes, the [2023 Youth Risk Behavior Survey](#) and AOE [Listen and Learn Tour](#) show that student mental health needs remain a significant concern.

This report highlights the successes of Act 112 while acknowledging areas for improvement. It emphasizes the urgent need for continued support and investment in school mental health to ensure all Vermont students have the support they need to thrive.

By implementing the recommendations outlined in this report, the Vermont Legislature can build upon the successes of Act 112 and create a more robust and sustainable system of mental health and well-being for all Vermont students.

## Purpose

The purpose of the competitive grants provided through Section 3 of [Act 112](#), an act relating to the provision of mental health supports and wellness needs of students, families, and staff, was to either expand existing or create new two-year programs utilizing a tiered-support approach to ensure continuous support to children and youth in a variety of educational settings throughout Vermont.

The Agency of Education issued grants for in-school, after-school, and summer school programs throughout geographically diverse regions, to thirteen educational organizations in Vermont who met all three of the mandatory eligibility criteria and at least one of the additional eligibility criteria.

## Mandatory Eligibility Criteria

1. The applicant uses evidence-based strategies to address students' social, emotional, mental health, and wellness needs. As used in this subdivision, "evidence-based" means the same as in the [Elementary and Secondary Education Act of 1965, 20 U.S.C. § 8101](#).
2. The applicant collects data to demonstrate the effectiveness of the mental health and wellness supports and interventions utilized in the program.

3. The applicant meets student needs by incorporating multi-tiered systems of supports, trauma-informed and responsive approaches, and approaches such as the Whole Child, Whole School, Whole Community model or the Strengthening Families curriculum's Youth Thrive program.

### **Additional Eligibility Criteria**

- A. The applicant works in close partnership with classroom teachers and school guidance counselors to coordinate supports, communication, and strategies.
- B. The applicant uses specially trained staff to provide one-on-one and small group supports and resilience sessions for children and youth, including addressing specific needs, such as suicide prevention, social isolation, anxiety, and substance use.
- C. The applicant provides participating families with assistance in navigating behavioral health resources in their communities.
- D. The applicant provides opportunities for children and youth to participate in activities that heal and prevent social isolation, such as outdoor activities, art therapy, recreation, and time in nature.
- E. The applicant consults with local pediatricians to provide referrals for support.
- F. The applicant provides staff training on Youth Mental Health First Aid and other evidence-based techniques and approaches to crisis prevention and intervention, such as trauma-responsive practices, adolescent brain development, and how to build a culture of connection.

These programs were funded through ARP ESSER SEA funds, specifically, ARP ESSER Section 2001(f)(1) funds to address learning loss, with a period of performance from the date of execution of the Grant Agreement through September 30, 2024. The maximum award, initially, was set at \$200,000.00. Fifteen grant applications were received and thirteen met the minimum criteria for funding. To maximize the use of these funds, grants were awarded based on applicant request, and after the first year of the grant remaining funds were made available upon request. Through this approach, the Agency was able to award all the \$2.5 million appropriated to this program and upon request, some recipients have been able to extend programmatic services through 2024.

### **Technical Assistance**

To provide support, guidance, and an opportunity to learn from one another, the grant recipients were offered monthly virtual one-hour Networking Sessions from February 2023 through July 2024. These sessions were jointly facilitated by the AOE and

Department of Mental Health (DMH). A few examples of networking topics included restorative approaches, family and community engagement, collaboration between Local Education Agencies (LEA) and mental health designated agency (DA), introduction to the Vermont School Mental Health Toolkit, and how to seek and braid funding.

### Summary of the Impact of Act 112

#### Positive Impacts

**Increased Access to Services:** Many programs expanded access to mental health services, including in-school group counseling, telehealth therapy, and social-emotional learning programs.

**Improved Student Outcomes:** Some programs demonstrated positive impacts on student outcomes, such as reduced bullying, improved attendance, and increased social-emotional skills.

**Enhanced Staff Capacity:** Several programs provided valuable staff training, improving their skills and capacity to address student mental health needs.

**Stronger Partnerships:** The grant program fostered collaboration between schools, mental health providers, and community organizations.

**Sustainability Planning:** Many grantees developed plans to sustain their programs beyond the grant period, demonstrating a commitment to long-term impact.

#### Challenges

**Sustainability:** A major challenge is the sustainability of programs beyond the grant funding period. Many districts struggle to find ongoing funding sources to maintain services.

**Data Collection and Analysis:** While some programs collected data, consistent and standardized data collection across all programs was lacking, making it difficult to assess the overall impact of Act 112.

**Reaching Underserved Students:** Ensuring equitable access to services for all students, particularly those in rural areas and from underserved communities, remains a challenge.

**Workload and Staff Burnout:** Increased demands on school staff can lead to burnout and impact their ability to effectively address student mental health needs.

## Recommendations for a Model of the Integration of Mental Health In-school, After-school, and Summer Programming

*“Although historically mental health has been viewed through the lens of mental illness (e.g., depression, anxiety, etc.), society has come to recognize that good mental health is not simply the absence of illness, but also the possession of skills necessary to cope with life’s challenges. As education professionals, school staff need to understand the role mental health plays in the school context because it is so central to our students’ social, emotional, and academic success” (SAMHSA, 2014, p. 2).*

### The Urgency of the Issue

- **Rising Rates of Mental Health Challenges:** Youth mental health challenges, including anxiety, depression, and suicide, are on the rise in Vermont and nationwide.
- **Impact on Academic Performance:** Poor mental health significantly impacts a student's ability to learn, leading to decreased academic performance, increased absenteeism, and higher dropout rates.
- **Long-Term Consequences:** Untreated mental health issues in youth can have long-lasting negative consequences, including increased risk of substance abuse and suicide, homelessness, and involvement in the criminal justice system.

### The Benefits of Investing in School Mental Health

- **Improved Student Outcomes:**
  - Increased academic achievement
  - Reduced absenteeism and dropout rates
  - Improved social-emotional learning and well-being
  - Decreased rates of bullying and violence
- **Stronger School Climate:**
  - Creation of a more positive and supportive learning environment
  - Enhanced teacher and staff well-being
- **Long-Term Societal Benefits:**
  - Reduced healthcare costs associated with mental health disorders
  - Increased workforce productivity and economic stability
  - Stronger and more resilient communities

Although no one model will provide the supports needed for each child in Vermont, in January 2024, the AOE and DMH created the [Vermont Schools Mental Health Systems Toolkit](#) (VSMHST) to support Vermont SUs and SDs with developing stronger systems around school mental health. With permission from the Center for National Mental Health (NCSMH), we are using NCSMH's [eight core competencies of a comprehensive school mental health system](#) to ground our work, organize resources, and make recommendations for improvement. These core competencies apply to in-school and out-of-school educational environments and include:

- 1. Well-Trained Educators and Specialized Instructional Support Personnel:** Investing in the recruitment, training, and retention of a qualified mental health workforce for schools, including school counselors, psychologists, behavior interventionists, social and emotional instructional coaches, and social workers. Offering ongoing training and professional development opportunities for school staff, students, and community partners on mental health awareness, suicide prevention, LGBTQ support, youth action and voice, and trauma-informed practices.
- 2. Family-School-Community Collaboration and Teaming to Increase Public Awareness and Reduce Stigma:** Strengthening family and caregiver engagement through regular communication and collaboration, with an emphasis on high-quality engagement practices and high-quality expanded learning opportunities, particularly for students and families in greater need of support. Conducting public awareness campaigns to educate the public about youth mental health issues and available resources, and work to reduce the stigma associated with mental health challenges among youth
- 3. Needs Assessment and Resource Mapping:** Conducting a thorough and continuous needs assessment of school and student needs and strengths, coupled with resource mapping of school and community assets, informs decision-making about needed supports and services. Using the school and district mental health needs assessment, which could include climate surveys, and other social, emotional, and behavioral data to inform decisions about priorities and needs related to mental health and well-being.
- 4. Multi-Tiered System of Supports (VTmtss):** Using a framework that offers a full array of tiered, evidence-based processes, policies, and practices (called a multi-tiered system of support (MTSS) to promote mental health and reduce the prevalence and severity of mental illness. The [VTmtss Field Guide 2019](#) describes a framework is designed to improve and expand the school district to provide each and every student with the supports they need to have equitable access, membership, and engagement in their education.
- 5. Social, Emotional, and Behavioral Instruction and Screening:** Ensuring universal instruction, screening, and supports, targeted interventions, and intensive

support for students with the greatest needs in social, emotional, behavioral, and academic areas.

6. **Evidence-Based and Emerging Best Practices:** Using evidence-based and emerging best practices to ensure quality in the services and supports provided to students. Developing clear, measurable standards for social and emotional learning and wellness, providing guidance and resources on programs that align with state standards and have demonstrated effectiveness in promoting mental health and well-being, and creating a framework for evaluating the effectiveness of implementation in schools
7. **Data and Data-Driven Decision Making:** Establishing a statewide data system to track student mental health outcomes, program effectiveness, resource utilization, and areas for improvement. Supporting districts and designated mental health agencies to integrate systems to allow for the needed flow of information to support health-related interventions and services.
8. **Funding:** Utilizing diverse and leveraged funding and continuous monitoring of new funding opportunities from federal/national, state, and local sources to support a statewide sustainable comprehensive school mental health and well-being system, that includes adequate funding for services and supports across districts' multi-tiered systems of supports (VTmtss). Ensuring this funding stream is protected from budget cuts and is increased annually to account for inflation and growing needs.

In addition, the State of Vermont has taken a promising step toward developing a comprehensive school mental health and well-being model in its investment in Project AWARE, a 5-year federal grant that is a joint effort between the Agency of Human Services/Department of Mental Health (AHS/DMH), the Agency of Education (AOE), three local educational agencies (LEAs), and three designated mental health agencies (DAs). One of the LEAs and one of the DAs involved in [Project AWARE](#) are expanding on the work begun with an Act 112 grant.

We intend to both spread and scale the essential elements of the VSMHST and learn from and with the Project AWARE grantees to refine a model for a comprehensive, statewide mental health and wellness framework in Vermont.

One example for us to explore is the overlap between the work happening through Project AWARE and the Community Schools model funded through Act 67; another is to ensure that state guidance on comprehensive school mental health is infused throughout all school programming, including early education, special education, and expanded learning opportunities. Within the AOE and other state agencies, we recommend we take steps to ensure that these guidelines are applied across divisions and teams, so that our approach to mental health and well-being throughout the state (and state government) is coherent and comprehensive. This suggests that we look at implications for educational licensure, pre-service programs, and state employee wellness, for example.



An AOE team is currently conducting an initiative inventory of projects related to student mental and behavioral health within the AOE, and it is recommended that this inventory be extended to look across state agencies, particularly the Agency of Human Services and the Department of Health. We hope that in joining forces in this work across agencies and building stronger infrastructure around the development of a comprehensive school and community mental health framework, we will be able to more effectively support and guide Vermont schools and communities in this important work.

### Conclusion

We are making significant strides in refining a comprehensive model for school mental health and well-being in Vermont, informed from the work of our Project AWARE grant, through which two Act 112 grant recipients are expanding their work to support the mental health needs of their students, and we anticipate that there will be relevant policy and funding considerations to explore in the months and years to come, which may include:

1. Updating protocols for responding to positive screens and crises - align across district as possible.
2. Supporting districts to purchase a comprehensive SEL system for universal screening, data, and lessons; and consultation for effective implementation and review of data.
3. Incorporating the aggregated screening data into the statewide AOE data collection.
4. Using a multi-disciplinary team to review data and resources at the district level to make decisions about programming.
5. Increasing district access to programming on topics such as bullying prevention, mindfulness, healthy movement activities, and emotional regulation.
6. Strengthening partnership with local DA for clinical services, training for educators, and consultation at classroom/school/district levels.

The intentional focus is on the social, emotional, behavioral, and mental health needs of students within a multi-tiered system of supports works and needs to be continually resourced. Considerations for further growth include strengthening interagency and intra-agency collaboration to be more focused, strategic, and streamlined in this work across and within state agencies. This report underscores the critical need for increased state support and coherence around school mental health initiatives in Vermont. The well-being of our children is paramount, and investing in school mental health is an investment in the future of Vermont. We are eager to share our knowledge and insights with the Vermont legislature to inform policy decisions and ensure that any legislation effectively addresses the increasing mental health needs of our students, educators, and communities.

## Appendix

### Grant Recipients' Program Summaries

Of the thirteen grant recipients, eleven are Local Education Agencies (LEA), one is a youth organization (YO), and one is a mental health designated agency (DA).

A summary of each grant recipient's experience during the period of performance follows, reflecting information shared in their September 2023 and September 2024 reports to the Agency of Education: the number of students served, the integration of consistent, equitable, and reliable mental health supports, outcome data, collaborations, tiers of support, the impact on workforce capacity, the use of funds granted, and their plans for sustainability.

#### **Boys and Girls Club of Brattleboro, Inc. (YO) \$235,000.00**

30 students were served in the Boys and Girls Club of Brattleboro (BGCB) *Kids Club*, an afterschool outdoor program that teaches school-aged children to understand and relate to the natural world.

The staff engaged in training in trauma-informed youth leadership and youth service delivery, and prioritized relationship-building to create a sense of safety, belonging, and community for all our members. The outdoor environment, coupled with the trauma-informed youth leadership training, has led to a decrease in the number of reported incidents involving youth members.

All students received high-quality care, healthy snacks, and access to a beautiful outdoor space, and with increased staffing capacity provided through this grant, they could be separated into small groups and still maintain safety ratios and were better able to meet individual needs and give members one-to-one attention.

The grant helped cover the costs of maintaining their rental agreement at the Brattleboro Retreat Farm, the host site for Kids Club. The BGCB continues to work with the Vermont Division of Children and Families (DCF) to ensure licensing requirements are satisfied so that almost 90% of their families use the childcare subsidy to cover their program enrollment costs.

This grant was specifically for increasing their Kids Club Director role from part-time to full-time and the staff have now gone through training and certifications that will enable them to approach programming pedagogy from a trauma-informed and social-emotional learning (SEL)-focused lens. This removed the front-end financial burden of these training courses for the immediate future. Their healthy organizational budget and consistently meeting their fundraising and revenue goals, positioned them to continue to offer programs to community youth. BGCB has also secured several grants and foundation gifts for the three upcoming fiscal years, all of which allow them to ensure continued money to support Kids Club operations.

**Caledonia Central Supervisory Union (LEA) \$150,000.00**

55 students aged 13 or older from the Caledonia Central Supervisory Union (CCSU) were provided mental health counseling through Talkspace, an online therapy service. This grant supported universal access to all students in the age group in the LEA and could be accessed consistently within 24 hours, regardless of financial means. Data from monthly TalkSpace reports analyzed alongside social-emotional well-being screener data helped monitor the impact on mental wellness in their students ages 13 and over.

These private sessions through TalkSpace were recurring as the students' needs dictated. CCSU has relationships with Washington County Mental Health and Northeast Kingdom Human Services to provide school-based intervention services for students with intense needs, often resulting in referrals for 1:1 support service in school.

The online mental health support reduced the negative impacts on CCSU's workforce by providing support to students in need and reducing the stress on the staff to meet those needs. Through a liquidation period extension, these services will continue through June of 2025, while CCSU expanded its tiers of support for mental health and well-being and built its sustainability plan through engagement with a five-year federal grant, Project AWARE (Advancing Wellness and Resiliency in Education).

**Champlain Valley School District (LEA) \$160,000.00**

More than 1,000 students were served when the Champlain Valley School District (CVSD) used its grant to incorporate its [Part 2](#) after-school program into its restorative approaches processes. The grant funds were used to expand an existing program providing SU-level coordinated support, staff professional learning, and ongoing coaching to help students empathize and understand the perspective of others, including those from diverse backgrounds and cultures.

The CVSD Behavior Systems Team collaborated with Jon Kidde to develop procedural flow charts to inform their broader code of conduct and outline their responses to students at each tier within their system. Work was conducted with their behavior systems staff at each school in their district. In addition, each school within the LEA varied their approach to tiered support based on their identified needs; individual, small group supports, and community circles.

CVSD partnered with the Howard Center and enhance their work with reflective practices to support their staff's well-being while working with students through new contracts with existing contractors and coaches through a liquidation period extension these services will continue through June of 2025. CVSD seeks additional funds through other grants opportunities to support ongoing restorative coaching for their staff.

**Essex North Supervisory Union (LEA) \$200,000.00**

183 students were served in the Essex North Supervisory Union (ENSU) through counseling services for students who need it, bullying prevention programs run for all students, and healthy movement programs open to all age groups as identified through their multi-tiered system of support (MTSS) process. ENSU provided 40 students with counseling services which were not available in their area prior to this grant.

They have had a measurable drop in bullying investigations since providing education for students and staff using the grant funds, resulting in a drop in behavioral incidents and an increase in reported improved mental health.

ENSU partnered with Green Mountain Food to provide food for 68 students: helping to address food insecurity within their school community. Tiers of support included anti-bullying education (speakers doing assemblies combined with educational activities) at the classroom level, equine therapy with small groups for students who need support on developing teamwork and polite interaction skills, and counseling services for one-on-one service for identified students.

Collaborations continue between ENSU and their partners at Northeast Kingdom Health Services (NEKHS) to plan how to continue counseling services.

ENSU has incorporated some programs into their local budget, e.g., expanded elementary sports, or planned new sources of funds, such as for their counseling services. They requested a liquidation period extension support this and are looking at the possibility of using Medicaid after that extension runs out.

### **Franklin West Supervisory Union (LEA) \$200,000.00**

33 students were served by the Franklin West Supervisory Union (FWSU) expanded partnership Talkspace, an online therapy service. This opportunity focused on students of low-income families, students experiencing homelessness, and in many cases students with a disability to help provide structured access to mental health support.

In addition to the individual access to the individual telehealth counseling and access to specific resources, FWSU created a supportive environment that prioritizes mental health and empowers every student to seek help when needed. Students were offered a variety of mental health support activities designed to promote well-being among all students. These activities included counseling services for individuals and in small groups, workshops focusing on mindfulness, resilience, and emotional regulation, and peer support groups helping individuals feel less isolated while promoting a sense of community.

By providing funding for training programs, resources, and support systems, FWSU leveraged grant funds to enhance their staff's skills and capacity. They shifted other grant funds to sustain current services while making investments in other grants and local sources to sustain their current efforts.

**Kingdom East Unified Union School District (LEA) \$200,000.00**

More than 1,000 students were served by the Kingdom East Unified Union School District (KEUUSD)'s Act 112 grant. Students' social-emotional learning (SEL) development was tracked using the Social Skills Improvement System (SSIS SEL) Brief and Mental Health Scales Survey. These tools collected and tracked students' information demographic, attendance, suspension, and transferable skills growth in PowerSchool. In addition, 6 out of 7 schools used the Positive Behavioral Interventions and Supports (PBIS) Schoolwide Information System (SWIS) to collect behavioral data connected to their behavior matrix.

Every K-8 student in all seven schools participated in instruction that addressed the VT Health Education Statutes and had access to the Second Step Program and advisory, morning meetings, and social groups to integrate explicit SEL instruction. To provide these universal supports, twenty KEUUSD staff members participated in a Life Space Crisis Intervention (LSCI) Course in the Fall of 2023, 38% of teachers participated in self-directed Universal Design for Learning (UDL) courses, 48% of teachers participated in self-directed team UDL projects, and 14% of teachers participated in facilitated UDL sessions. All teachers developed an artifact to reflect their learning and application of UDL practices. Teacher qualitative feedback indicated that 90% of teachers regularly reported the UDL pathways for professional learning were successful in increasing the implementation of evidence-based techniques during its first year of implementation and that there is a need for embedded professional learning through professional learning communities.

All students benefit from the staff who received training in LSCI and UDL as they apply evidence-based techniques and approaches to crisis prevention and response and trauma-responsive practices through flexible pathways to access instruction at the universal level. Staff more regularly used data to identify which students need targeted individualized support and school-based teams (including principals, teachers, clinicians, and guidance counselors) provided supports to individual students and their families based on strengths and needs. Additionally, staff developed resources, such as emotional check-in choice boards, to support individual self-regulation. KEUUSD collaborated with more than a dozen community partners, agencies, and organizations and only two were paid services.

Grant activities resulted in an increased capacity of staff to address challenges, requiring less outside support and the retention of staff. The use of SSIS will continue through local budget, continued in-district professional learning opportunities will embed and strengthen UDL principles, and a combination of Medicaid and their Stronger Connections Grant will fund other needs.

**Lamoille South Unified Union School District (LEA) \$193,000.00**

665 students were served by the grant's funding of a Lamoille South Unified Union School District (LSUUSD) school-based coordinator; bringing mental health services to

the students while also offering support after school hours. In partnership with Lamoille Health Partners (LHP), they were able to hire a clinician that worked flexible hours, enabling her to support students and families during school and outside of the academic day at the local community center. The position was designed with the support of the administrative and counseling team working in collaboration throughout all three towns (Elmore, Morristown, and Stowe).

All staff could access professional learning offered as ED Camps throughout the year and staff teams were supported by a clinician to support students who needed urgent intervention.

Lamoille Health Partners supported this space where children had an environment with caring adults to spend time after school. The combination of these two supports benefited many families who were able to have increased access to mental health support and other health services offered by Lamoille Health Partners (e.g., pediatrician, dental, respite).

All students could access engaging enrichment opportunities. Additionally, students were able to self-select enrichment opportunities that interest them, and a clinician worked with small groups of students who had similar needs for intervention. Students who needed urgent intervention were identified via our MTSS; they and their families were partnered with a clinician who then supports the whole team.

After piloting this position successfully, LSUUSD was able to garner support for funding the clinician with federal grant dollars in the coming year. They will be working to expand this role and hire additional clinicians by promoting the data that demonstrates the positive outcomes they have been seeing-in hopes that the same opportunities can be valued in their local budget. If the community is unable to support these initiatives next year, they may consider seeking another grant funding source.

### **Orange Southwest Unified Union school District (LEA) \$141,040.00**

879 students were served by the Orange Southwest Unified Union School District (OSUUSD) through Physical Education, Health, and Wellness instruction as well as Yoga and Mindfulness instruction. This weekly instruction has been integrated into both the school day and after school programming.

This data was tracked through attendance. In addition, the positive impact of the provided instruction has been tracked with social emotional skill data collected from all students using the Devereux Student Strengths Assessment (DESSA) system.

OSUUSD's Youth Risk Behavior data confirmed the expected reduction across the LEA for first use of alcohol in elementary school students and for use of nicotine and marijuana by students by investing in increased physical education and wellness programming. In addition, student behavior data showed a reduction across the LEA for incidents of harassment, hazing, and bullying of students, an expected outcome from the investment in increased diversity and equity programming across the district.



OSUUSD partnered with Gifford Medical Center and Clara Martin Center to provide both medical care and mental health care on the school campuses.

Through the activities of this grant, all OSUUSD students received increased physical education, health, and wellness instruction, while small groups of students were provided with mental health and wellness instruction to build skills and resilience, and individual students were provided with one-to-one intervention work in social and emotional skills, de-escalation strategies, and self-regulation.

In addition to receiving a liquidation period extension, OSUUSD added local budget investments for a nurse practitioner to work on campuses three days per week, a full-time school nurse on every campus, and behavior interventionists at all campuses. OSUUSD believed these investments would ensure the district can sustain ongoing mental health and wellness instruction to maintain the impactful activities of this grant.

### **Orleans Central Supervisory Union (LEA) \$251,638.62**

42 students were served by the Orleans Central Supervisory Union (OCSU) through the services of three School-Based Clinicians (SBC) hired to support identified mental health needs and provided screenings as needed for all students, such as when a student makes a threat of suicide.

OCSU tracked this data through the SBC invoices, and through their data management system, EdDoc, for students with an individualized education program (IEP) who needed SBC service through this grant, and through DESSA (screening) and SWIS (behavior) data tracking.

OCSU collaborated with and contracted with Northeast Kingdom Human Services (NKHS) to provide mental health professional development to staff, and built the skills and capacity of the staff to provide mental health supports to better serve students and interact with students who have mental health needs. Staff are better prepared to cope with and regulate themselves when interacting with unregulated students, which will prevent teachers burning out and turnover.

OCSU's tiered approach increased skills and abilities development of OCSU staff to support the mental health needs of all students, with targeted mental health professional development through professional learning community meetings, available office hours for staff, principal staff meetings in their buildings supporting small groups of students, and individualized requests from principals for specific staff to receive mental health training and support as it relates to supporting students. Individual student support was provided through the SBC services.

Although OCSU maintained the same number of SBC staff, the number of students who have received services increased under this grant. OCSU is challenged by the decrease in funding available to them at the closing of this grant to sustain the current level of

services. They were approved for an extension of their liquidation period until June 30, 2025, as they seek additional funding to continue the work of this grant.

### **Rutland Northeast Supervisory Union (LEA) \$125,100.00**

210 students were served by the Rutland Northeast Supervisory Union (RNESU) grant activities. Participants in the Community Eligibility Provision were supported through the work of a Mental Health Supervisor, a 6th- to 7th-grade transition program, and funding for universal social and emotional programming for K-6 elementary classrooms.

They gathered behavior impact data through SWIS and Social, Academic, and Emotional Behavior Risk Screener (SAEBRS) for social-emotional learning. Progress Monitoring data is collected and SWIS reports are expected to show a decrease of dysregulated behaviors as self-regulating behaviors are grown and SAEBRS SEL data should show growth in self-reporting data.

The Supervisor of Mental Health acted in a variety of roles: 1:1-therapeutically as identified through the EST process, oversight of contracted mental health services in the district to ensure that we are supporting all learners and supporting the MTSS process in individual schools. In addition to the work of the Supervisor of Mental Health, the 6-7 Transition Plan provides year-long opportunities for 6th-grade learners to prepare for the transition from 6th to 7th grade. The transition program provided 5-6 opportunities for 6<sup>th</sup> grade students to interact with 7th-grade teachers and included supporting staff at the receiving middle school by providing skills and knowledge of how to scaffold students for an emotional transition. They expect to see a significant decrease in referrals to the nurse's office, absences, and SWIS behavioral referrals, and to see growth through self-reporting on SAEBRS.

A third aspect of RNESU's grant activities was the increase in SEL tools provided for elementary teachers to better equip them to navigate the social and emotional learning that occurs naturally in the classroom. They expect that the classroom teachers will be able to provide more accurate reporting on SEL report card standards because of this professional learning.

The 6th- and 7th-grade teachers were collaborative across the district and careful to build a sustainable program that could be carried out each year with minimal local expenses. The funding supported building a sustainable transition program that will be taken over by a few locally funded small stipend positions for the teachers to continue to plan for the upcoming 6th- to 7th-grade transition.

### **St. Johnsbury School District (LEA) \$274,954.00**

119 students were served by the St. Johnsbury School District (SJSJ) through mental health services made available to every student by their Board-Certified Behavior Analyst (BCBA), School Psychologist, and Mental Health Clinicians. This data was tracked weekly through caseload management.



In addition to meeting the mental health needs of more than 61 students, consistent counseling resulted in a 20% decrease in these students' absences. Having a School Psychologist available to provide two Special Education evaluations over the summer for an evaluation kept these students from being placed on a waiting list for an evaluation from an outside consultant.

RNESU's tiered approach to services included behavior support, mental health, and consulting and evaluations, established a baseline of emotional and social for all students, while providing behavior support in small groups to assist children to develop strategies for regulation, and 1:1 mental health counseling, 1:1 behavior support and plan development, 1:1 consultation, and evaluations.

The Mental Health Clinician, BCBA, and School Psychologist positions previously supported by the Act 112 Grant will now be funded by their operating budget: local budget and Medicaid revenue.

### **Washington County Mental Health Services (DA) \$200,000.00**

393 students were served by the Washington County Mental Health Services (WCMHS).

All data was tracked by attendance logs and pre/post paper and electronic participant surveys evaluating the activity, service, or training offered and the impact it had on psycho-social factors such as mood, connectedness, well-being, confidence, knowledge of material trained/level of confidence in applying learned skills to personal or work-life settings. Participants who were referred to follow-up care or services entered the agency's database and were tracked according to the agency's performance metrics.

WCMHS hosted clinics for any school personnel to attend. Clinics were scheduled in advance to allow attendees to plan their participation in their workdays. Clinics were offered during hours that were flexible and convenient. The range of services offered ensured that participants had multiple options to choose from. Students also had the option of participating in multiple activities either individually or in a group setting.

Grant funds remunerated seven trainers for their time to develop training materials and provide training free of charge to 30 educational partners from BUUSD, Caledonia Central School District, CVSU (e.g., Mental Health First Aid which included adults in their community who work with youth but not within schools, and the training of teen instructors.)

WCMHS developed and expanded a monthly Special Education Director Governance Board that brings together WCMHS school services directors and district special education directors to discuss individual student needs, classroom dynamics, student referral statuses, training and learning, and resource sharing opportunities, resource sharing opportunities, and acts as a think tank to discuss issues related to student and teacher mental health concerns. BUUSD and WCMHS will now be working together to support initiatives under the statewide initiative: Project AWARE.

WCMHS works in close partnership with classroom teachers and school guidance counselors, after-school, corrections, court, law enforcement, hospitals, college communities, businesses, and in primary care and pediatric settings.

WCMHS's grant proposal only included activities they could provide with their current workforce. All grant activities therefore needed to be managed by the workforce in place. The desired outcome of these grant activities was to improve the resilience and resources of participants so that they could maintain their positions and activities at their local schools and therefore decrease turnover which indirectly impacted retention for WCMHS staff.

### **Windsor Southeast Supervisory Union (LEA) \$173,600.00**

120 students were served by the Windsor Southeast Supervisory Union (WSESU) through two programs: Summer Academy and Bridging the Gap (BTG after school).

All students had access to the counselor and each day of the Summer Academy had on average, six behavior interventionists and/or social emotional interventionists working with groups of students within the classroom, the playground, and on our field trips. A mental health clinician from Health Care and Rehabilitation Services (HCRS) was on site three days a week to see identified students as well as any students that asked or whom staff identified as in need of support.

WSESU collaborated with Bridging the Gap and HCRS for both summers. School Year 2023 Star Testing in Math and Literacy demonstrated less loss and increased maintenance of skills for students who attended Summer Academy.

All students had access to the social emotional daily activities and academic programs within the school and on our community trips, used small groups as the instructional modality for all activities, and each student had individual access to the teaching staff for conferences each day. Some students who required 1:1 support also received this service.

WSESU was not able to offer a six-week program or an all-day program due to lack of staff at the school, community mental health, and after school program. They did, however, extend the length of the day and extend to one full day, to complete community wellness field trips. WSESU planned on budgeting enough funds (\$50K) from each sending district to run this program again next summer.