Opportunity Funding for Mental Health Services

For more information and to submit applications:
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Funding Period: Fiscal Year 2020
Delaware Department of Education
Opportunity Funding Form
2019-2020 School Year

Opportunity Funding
Directed funds for mental health services

Application deadline: Friday, Aug. 9, 2019

**Purpose:** The Opportunity Funding directed to mental health services provides $5.0 million in FY20, $2.5 million in HB 225 (Annual Appropriations Act) and $2.5 million authorized in HB 226 (One-Time Supplemental). With a total supplemental amount of $7.5 million over three years, the total amount will be $15 million contingent on future appropriations.

It shall be apportioned to schools which qualify for a Reading Interventionist under the Student Success Block Grant as detailed in House Bill 225 (the FY20 operating budget).

This funding shall be used by school districts and charter schools for *mental health services* in the form of school counselors, school social workers or licensed clinical social workers, school psychologists, and/or for additional reading supports for grades K-5. Services may include the employment of staff, where such funding may be used to cover 100 percent of personnel costs on a 10 to 12-month basis and/or contracted services.

This funding is allocated separately from the directed funds for English learners and low-income students.

**Allocation Method:** Amounts vary per school and that amount is indicated below. Each LEA has already received the first half of the funding; the second amount will be released upon receipt and approval of this application.

| DISTRICT/CHARTER NAME: | Christina School District  
| Bancroft Elementary School |
| ADDRESS: | 700 N. Lombard Street, Wilmington, DE 19801 |
| CONTACT NAME: | Krystal Greenfield |
| CONTACT PHONE: | 302-429-4102 |
| CONTACT EMAIL: | krystal.greenfield@christina.k12.de.us |
| ALLOCATION AMOUNT: | $135,694 |
Overall summary

1. What will you do to offer mental health supports specifically to low-income and English language learners?

The Bancroft School’s English learner and low-income students have experienced trauma in many forms. The Children’s Defense Fund’s 2014 report indicates that 46% of Latino student living in poverty and 55% of black students living in poverty did not receive the mental health services needed between 2011 - 2012. These statistics are relevant for our low income and English learner we know they have been or are exposed to trauma in many forms. We also know this experience with trauma impacts their ability to attend to learning/learning, leads to behavioral problems, and creates stress that can lead to violent behavior as good decision making is often impaired. We are therefore planning to use this grant to support English learner and low-income student mental health needs by providing weekly individual and/or small group counseling to address trauma, grief, de-escalation and self-regulation strategies and coping skills. Additionally, we are planning to hire a behavior support person who will work collaboratively with the school counselor to work with students to modify challenging behaviors caused by emotional stress, learning difficulties, grief and/or trauma.

2. How will the funding also assist students not in those two subgroups?

We are focused on improving student outcomes by addressing mental health needs of all students. The school counselor or social worker will be available to all students in need of support (small group/individual counseling) due to trauma exposure or who can benefit from behavior modification. We believe that building in supports for all students will climate and culture creates an environment in which all students can thrive.

3. What kind of specialist are you hiring (school counselor, school social worker, licensed clinical social worker or school psychologist)?

We are planning to hire behavior support personnel and a school counselor or licensed clinical social worker.

4. Are you using this money for additional reading supports in addition to mental health services? If so, what types of services will be provided?

We are not planning to use this money for reading supports in addition to mental health services. As stated above, we will utilize this funding to support the extensive behavioral and mental health needs of our low income and EL students.
5. Is this money is being used to contract services?

YES ✓ NO

6. Please provide a copy of your expenditure plan.

Assurances and signatures:

As the chief school officer of the district or school, including the indicated school, I am authorized to submit for the funds identified in this form. I am also authorized to obligate the district or charter school to conduct any activity approved under this form in accordance with all applicable state requirements, including statutory and regulatory requirements, and program specific requirements. The information contained in it is true and correct to the best of by knowledge and belief. By submitting this form, I acknowledge that I understand and agree to abide by all applicable requirements. I further agree that

1. I understand that this funding may not be used to supplant otherwise available funding.
2. I understand that our district shall be authorized to assess a local match to provide for the local contribution of personnel costs associated with this appropriation (districts only).

Chief School Officer (printed name): Richard Gregg
Signature: ___________________________ Date: 10/1/2019

As the business manager of the district or school, including the indicated school, I am authorized to submit for the funds identified in this form. I have read this form and reviewed the financial information contained in this form. The information contained in this form is true and correct to the best of my knowledge and belief. I have reviewed and approve the submission of the budgetary information for this form. By submitting this form, I acknowledge that I understand and agree to abide by all applicable requirements. I further agree that

1. I understand that this funding may not be used to supplant otherwise available funding.
2. I understand that our district shall be authorized to assess a local match to provide for the local contribution of personnel costs associated with this appropriation (districts only).

Business manager (printed name): Robert A. Senger
Signature: ___________________________ Date: 9/30/19

By signing this form, I am approving the plan submitted by the district or charter.

Secretary of Education/Designee (printed name): ___________________________
Signature: ___________________________ Date: ___________________________
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