

**M E M O R A N D U M**

February 27, 2023

TO: Health and Human Services Committee  
Education & Culture Committee

FROM: Vivian Yao, Legislative Analyst  
Essie McGuire, Senior Legislative Analyst

SUBJECT: Updates: Implementation of Bridges to Wellness (BTW) and other Mental Health Supports for Students

PURPOSE: Receive an update on implementation of school-based mental health and positive youth development services

***Those expected to participate in the worksession include:***

- Dira Treadvance, Chief, Children, Youth and Family Services, Department of Health and Human Services (DHHS)
- Louis Cardona, Administrator, Positive Youth Development, DHHS
- Kirsten Anderson, Administrator, Linkages to Learning, DHHS
- Mark Hodge, Senior Administrator, School Health Services, DHHS
- Damon Monteleone, Associate Superintendent, Office of Well-Being, Learning, and Achievement, Montgomery County Public Schools (MCPS)

The mental health needs of youth and families in Montgomery County have been a top priority in the response to the COVID-19 pandemic. The Council funded multiple initiatives in FY23 operating budget to support the mental health and social services for high school students, including funding to open the wellness center at John F. Kennedy High School and an increase of \$9.2 million to expand mental health, case management, and positive youth development (PYD) services through the Street Outreach Network and community-based services providers to all high schools without a full wellness center (Bridge to Wellness Initiative).

**A. Bridge to Wellness (BTW) Update**

DHHS, MCPS, and community-based partners undertook a significant effort to respond to student needs and respond to the Council's call for expanded mental health and social services at the 19 high schools without full wellness centers. Information on implementation of the Bridge to Wellness Initiative is provided at ©1-12.

Highlights of updates include the following:

- **Staffing:**
  - **Contracted staffing:** 54 out of 57 of new contracted positions have been filled. As of February 10, there are two vacant Care Manager positions at Sherwood and Whitman and one vacant Mental Health Specialist at Walter Johnson.
  - **PYD staffing:** A number of PYD positions are in the recruitment process including 1 Program Manager II, 3 Program Manager I, and 12 Community Service Aide III.
- **Referral Protocol:** DHHS and MCPS developed a standardized referral process for Case Management, Mental Health, and Youth Development services. See ©4.
  - All school referrals go through the School Well Being Team, who passes the referral to BTW after receiving verbal consent from the parent/guardian.
  - BTW is responsible for determining if and what services it can provide. If not able to provide services, BTW must update the tracking sheet and notify the school's Well-Being Social Worker (SW).
  - BTW will let SW know about self-referrals or external referrals before conducting an intake.
  - SWs have been directed to meet with BTW 2-3x/month to collaborate, discuss referrals, and provide updates.
  - Protocols for urgent referrals from MCPS to PYD-Street Outreach Network (SON) are being developed.
- **Outreach:** MCPS and BTW have performed outreach to the school community to create awareness about BTW services through flyers, information sessions, school communications, lunch and school activities, schools staff meetings, and meetings with parents/guardians/caregivers. DHHS has indicated that more outreach work is needed due to the rapid startup timeline. Council staff understands that the initial outreach focus was to school staff and students.
- **Timing/Start Dates:** There is some variation of when schools became fully staffed with 8 schools fully staffed the 1<sup>st</sup> week of September, five schools in October, one school in November, two schools in 2023, and three schools not yet fully staffed. Council staff understands that the prior availability of School and Community-Based Youth Services at a school may have affected the start up timing. The Joint Committee may be interested in asking whether other factors contributed to the delayed start up.
- **Challenges:** DHHS reports that the primary challenge with starting the initiative has been:
  - **Staffing:** The competitive job market has affected the search for mental health providers and other social support jobs.
  - **Awareness of available services:** The need to educate tens of thousands of students, families, and MCPS staff in the 19 school communities about services continues.

- ***Establishing referral protocols with MCPS:*** How the referrals protocols are implemented at the school level, or staff vacancies, may impact the number of referrals BTW receives. The number of referrals varies significantly from school to school with a low of five (through Feb. 10) to a high of 171.

DHHS and MCPS are working on the issue of low referrals and working to address issues related to the referral process. BTW staff are also working to increase direct referrals at schools with low referrals. DHHS anticipates that the number of referrals will increase at all schools.

## **B. Update on Additional Mental Health Supports for Students**

### ***DHHS Services***

DHHS provides a comprehensive array of mental health services in Children, Youth and Family Services and Behavioral Health and Crisis Services that support youth and families in schools or referred from schools, including crisis stabilization, assessment, individual and group counseling, healing informed educational youth development groups, therapeutic recreation, community education, and outreach related supports.

The following table summarizes direct mental health services for students that are administered by DHHS:

<b>Program</b>	<b>DHHS Service Area</b>	<b>Service Description</b>
Wellness Centers-PYD	CYF-PYD	Behavioral health, positive youth development, social services, family strengthening, therapeutic recreation, academic coaching and mentoring, somatic health services
SON and Safe Space	CYF-PYD	Therapeutic recreation, psycho-educational groups, youth leadership conferences, healing-informed talking circles
Linkages to Learning	CYF-CASCYS	Child and family therapists at 7 middle and 24 elementary schools that respond to critical and emerging social, behavioral
Cluster Projects	CYF-CASCYS	Cross sector multi-agency partnerships and care coordination connecting families to social and behavioral health treatment and supports
Crittenden Services of Greater Washington	CYF-CASCYS	Mental health component for middle and high school program participants. Services include assessment, individual or group counseling and crisis intervention.
School and Community-Based Youth Services	CYF-CASCYS	Bridge to Wellness Initiative, mental health supports at 9 middle and 5 elementary schools and youth mental health and therapeutic recreation services in geographic areas of targeted
Crisis Center	BHCS	24/7 telephone consultation, walk-in services, and Mobile Crisis Outreach Team with over 2,000 referrals of students from MCPS in 2019. BTheOne.org teen suicide and substance abuse prevention and youth ambassador program.
Child and Adolescent Behavioral Health Services	BHCS	Outpatient mental health treatment for children and youth 5-18 years old
Victim Assistance and Sexual Assault Program	BHCS	Crisis intervention services, groups and therapy, presentations and resources.
Sheppard Pratt- Care and Connections for Families	BHCS	Intensive, short-term, in-home crisis stabilization services for children and adolescents. Therapy at school or in-home and connection to longer-term services.

DHHS representatives will be available to answer questions about these services.

***MCPS Services***

MCPS has steadily increased the number of mental health positions from FY20-FY23 to respond to the mental health needs of the school community, in large part due to the COVID-19 health pandemic. Council staff requested information updating the inventory of mental health staffing and supports provided by MCPS. Excerpts from the FY23 Operating Budget packet summarizing key MCPS mental health staffing, roles, and services are provided for informational purposes at ©13-15.

Although updates were not available at the time of packet publication, MCPS representatives are expected to present updated information and answer questions at the meeting.

The packet contains the following attachments:

DHHS information responses

Excerpts HHS E&C April 22, 2023 Operating Budget packet

Circle #

©1-12

©13-15

**1. Please provide a status update on the roll out of Bridge to Wellness in terms of hiring staff and standing up services, coordinating referrals, triage/assessment.**

54 (94%) of the 57 new contracted positions have been filled. As of February 10, 2023, there are 2 vacant Care Manager positions (Sherwood and Whitman) and 1 vacant Mental Health Specialist position (Walter Johnson). All hired staff are providing services in the schools.

**PYD Hiring Status**

Position Classification	Grade	Number of Positions Available	Status
Program Manager II - BTW	25	1 FTEs	Eligible list sent to PYD manager, currently reviewing resumes to start selecting candidates for interviews
Program Manager I - BTW	23	3 FTEs	Position being advertised closes 2/23/2023
Community Service Aide III- BTW	18	12 FTEs	Eligible list sent to PYD manager, currently reviewing resumes to start selecting candidates for interviews

**Please provide a current staffing update and identify when services started and became fully staffed by school.**

Date Fully Staffed	High School	Type of Staff	Start Date
9/1/2022	Albert Einstein	Care Manager	9/1/2022
		Mental Health Therapist	9/1/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp. (PT)	9/1/2022
10/31/2022	Bethesda Chevy Chase	Care Manager	10/31/2022
		Mental Health Therapist	8/30/2021
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp. (PT)	9/1/2022
10/20/2022	Churchill	Care Manager	10/6/2022
		Mental Health Specialist	10/20/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	2/17/2022
9/1/2022	Clarksburg	Care Manager	8/18/2022
		Mental Health Therapist	7/24/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing Still in process of interviewing

		Youth Development Sp. (PT)	9/1/2022
10/20/2022	Damascus	Care Manager	2/24/2022
		Mental Health Therapist	9/1/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	10/20/2022
10/17/22	James H. Blake	Care Manager	8/15/2022
		Mental Health Therapist	9/6/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	10/17/22
9/1/2022	Magruder	Care Manager	8/18/2022
		Mental Health Therapist	7/8/2021
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp. (PT)	9/1/2022
9/6/2022	Montgomery Blair	Care Manager	8/22/2022
		Mental Health Specialist	9/6/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	8/29/2022
10/18/2022	Northwest	Care Manager	9/1/2022
		Mental Health Specialist	9/29/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	3/10/2022
1/23/2023	Paint Branch	Care Manager	9/12/2022
		Mental Health Specialist	8/16/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	1/23/23
2/9/2023	Poolesville	Care Manager	2/9/2023
		Mental Health Therapist	11/3/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp.	8/19/2022
9/1/2022	Quince Orchard	Care Manager	8/18/2022
		Mental Health Specialist	12/1/2021
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp. (PT)	9/1/2022

9/1/2022	Richard Montgomery	Care Manager	8/18/2022
		Mental Health Specialist	8/19/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Youth Development Sp. (PT)	9/1/2022
9/1/2022	Rockville	Care Manager	8/19/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Therapist	12/30/2021
		Youth Development Sp. (PT)	9/1/2022
Not fully staffed	Sherwood	Care Manager	Vacant
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Specialist	10/1/2022
		Youth Development Sp.	10/11/2020
11/14/22	Springbrook	Care Manager	11/14/22
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Therapist	10/4/2021
		Youth Development Sp. (PT_	9/1/2022
Not fully staffed	Walt Whitman	Care Manager	Vacant
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Therapist	11/8/2022
		Youth Development Sp.	11/16/2022
Not fully staffed	Walter Johnson	Care Manager	9/6/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Therapist	Vacant
		Youth Development Sp.	11/1/2022
9/9/2022	Wootton	Care Manager	9/8/2022
		SON Comm Svcs Aide (PT)	Still in process of interviewing
		Mental Health Therapist	9/2/2022
		Youth Development Sp.	9/9/2022

2. Please describe the referral and triage/assessment process. Is this process consistent among all Bridges to Wellness sites? What functions do school staff perform vs. private providers?

DHHS and MCPS developed a standardized referral process for Care Management, Mental Health support and Youth Development services as outlined below. This referral process has been distributed to all contractors and MCPS school staff and is consistently being followed.

- All school referrals for student support go through the School Well Being Team (SWBT)
  - Once it is determined at the SWBT that a student may benefit from in school supports, the school Well-Being Social Worker (SW) or other school staff will contact parent/guardian to obtain *verbal* consent
  - Once *verbal* consent is obtained, the SW, with information obtained from the parent/guardian, will determine if the SW will service the student or if a referral to Bridge to Wellness (BTW) will be made
  - If the referral advances to BTW, BTW staff communicate with the SW if they need additional information
- BTW is responsible for determining if they can provide services to the student (based on capacity, caseload, and the needs of student/family being within the scope of what BTW offers); and which services will be provided
  - If BTW services the student/family, BTW is responsible for:
    1. Getting formal consent from the parent/guardian (except for when the student self-consents for therapy services with a licensed clinician)
    2. Reporting outcomes for the levels of service provided (Mental Health support, Care Management, Youth Development Specialist) within shared MCPS/BTW referral/tracking spreadsheet
  - If BTW is not able to service the student/family (for any of the above stated reasons), BTW is responsible for updating the outcome section of the shared tracking spreadsheet accordingly as to why, and informing the SW
- If a student or a family self-refers or BTW receives a referral from an external partner, BTW will communicate with the SW before conducting an intake to ensure there is no overlap with existing/referred services.
- SWers have been directed by MCPS to meet a minimum of 2-3x/month with their BTW colleagues to collaborate, discuss referrals, and provide updates

MCPS and DHHS are working to outline protocols for referrals from MCPS to DHHS-Positive Youth Development/School Outreach Network (PYD-SON). This referral process will differ because MCPS can request that PYD-SON respond immediately to certain crisis situations and PYD-SON can respond on the same-day as needed. Referrals for PYD-SON non-crisis services can be made via an on-line portal.

**3. Please describe the efforts to communicate with schools and outreach to students and parents? How might coordination or messaging with school staff/administration and students/parents be improved?**

BTW staff and supervisors have participated in outreach efforts to educate the school community about these new services. These have included disseminating flyers, holding information sessions in the schools, setting up a table in busy areas of the school to engage students, distributing information in various settings in the school, having open hours with games and activities during lunch, and putting information in school bulletins or other school communications sent to families. MCPS assisted with educating school staff through meetings with School Counselors, School Principals, and School Wellbeing Social Workers (SW). DHHS-PYD has had SON staff at high school sporting events engaging students out of school and conducting



presentations on services offered and gang awareness which has helped to facilitate solid relationships with the students. Messaging about BTW services continues through on-going outreach to school administrators, staff, teachers and support workers; through participation in meetings with parents/guardians/caregivers; and further education of other county-funded providers/programs. Because of the size of the initiative (19 High Schools) and rapid timeline for startup (where most efforts were focused on hiring, onboarding and setting up protocols), there is much work still to be done to educate the tens of thousands of students, school staff, and parents in these school communities about BTW.

4. Please provide referral and service information on unduplicated students for the 1<sup>st</sup> quarter of FY23 and 2<sup>nd</sup> quarter to date by school and type of referral/service.

Number of Referrals by School				
School	1st Quarter	2nd Quarter	3rd Quarter (thru Feb 10)	Total
Albert Einstein HS	0	21	6	27
Bethesda Chevy Chase HS	4	38	10	52
Churchill HS	5	23	143	171
Clarksburg HS	6	42	15	63
Damascus HS	7	30	2	39
James H. Blake HS	3	18	7	28
Magruder High	4	29	3	36
Montgomery Blair HS	9	47	19	75
Northwest HS	1	31	18	50
Paint Branch HS	5	19	12	36
Poolesville HS	0	18	24	42
Quince Orchard HS	12	25	8	45
Richard Montgomery HS	23	52	21	96
Rockville HS	6	30	11	47
Sherwood HS	0	3	6	9
Springbrook HS	18	41	10	69
Walt Whitman HS	0	2	3	5
Walter Johnson HS	3	9	3	15
Wootton HS	6	14	3	23
<b>Total</b>	<b>112</b>	<b>492</b>	<b>324</b>	<b>928</b>

Unduplicated Number of Students and Family Members Served Shown per Quarter by Type of Service (Numbers are Cumulative)									
High School	Youth Development			Care Management			Mental Health		
Quarter	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup> *	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup> *	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup> *
Albert Einstein HS	0	9	13	0	11	13	10	15	16

Bethesda Chevy Chase HS	0	10	12	V	0	0	0	8	13
Churchill HS	V	7	28	V	12	12	V	4	6
Clarksburg HS	0	1	2	0	32	36	2	12	14
Damascus HS	V	18	15	0	38	38	0	10	14
James H. Blake HS	V	0	24	0	7	18	14	23	26
Magruder High	0	28	23	0	10	10	6	11	11
Montgomery Blair HS	0	8	24	0	4	5	6	10	13
Northwest HS	1	12	20	0	20	20	13	19	23
Paint Branch HS	V	V	0	0	2	2	5	12	14
Poolesville HS	V	9	15	V	V	V	V	2	8
Quince Orchard HS	0	8	10	0	34	38	1	16	18
Richard Montgomery HS	0	19	21	0	42	42	14	18	21
Rockville HS	0	11	13	0	19	21	5	5	7
Sherwood HS	V	0	0	V	V	V	V	0	0
Springbrook HS	0	13	14	V	1	3	9	27	28
Walt Whitman HS	V	0	0	V	V	V	V	0	0
Walter Johnson HS	V	4	5	0	6	6	V	V	V
Wootton HS	0	5	6	0	8	8	0	8	12
<b>Total</b>	<b>1</b>	<b>162</b>	<b>245</b>	<b>0</b>	<b>246</b>	<b>272</b>	<b>85</b>	<b>200</b>	<b>244</b>

\*3<sup>rd</sup> Quarterly numbers are only through January 31, 2023 V = Vacant as of end of quarter/time period

Through the end of the 2<sup>nd</sup> Quarter, Youth Development Specialists had contact with over 1,700 students through their outreach and engagement efforts.

In addition to the number of household family members served in the table above, the Care Managers also had over 250 documented contacts with non-client students/family members through the end of January 2023.

**5. Please identify challenges that have arisen in rolling out programming and how the agencies have responded to these challenges. What accounts for difference in referral numbers and services delivered? Are there recommendations for improvements?**

The primary challenges in starting an initiative of this size have been staffing, awareness of available services, and establishing referral protocols with MCPS. While the contractors were able to onboard almost half of the new staff by the beginning of the school year, it has taken longer to fully staff some schools than others. Some schools did not have any staff at the beginning of the school year and 3 schools are still missing 1 member of the team. With the competitive job market for mental health providers and other social support jobs, it has been difficult to fill all the positions, though agencies continue to actively recruit to fill these positions. For comparison, the current 6% vacancy rate for contracted BTW positions is less than the average vacancy rate in Linkages to Learning.

A second challenge has been educating the tens of thousands of students, families, and MCPS staff in these 19 school communities about these new services. Contracted staff have used

various methods to promote the new services, including meetings, open houses, flyers, making themselves available to students, attending staff meetings, meeting with teachers and administrators, and other means. MCPS has also worked to educate Principals, Counselors and school Well-Being Social Workers. Students and school staff were the primary focus of the initial outreach efforts with less emphasis on parents/guardians or parent organizations. Outreach efforts will continue, including further education of school staff about the available services, with a focus on those services for which there are fewer referrals in any school as well as to parents/guardians in the larger school community.

A third challenge has been the lower number of referrals from MCPS in the first two quarters and at certain schools. In September, DHHS and MCPS established referral protocols in which MCPS designated the School Well-being Social Worker (SW) as the primary liaison for BTW referrals. As outlined above, most referrals go through the School Well Being Team (SWBT) and then are referred to BTW if the SWBT and the parent/guardian determine that BTW is the best fit to meet the needs of the student/family. At times, this can delay referrals if a SWBT is not meeting regularly or the SWBT is not focusing on using BTW to support the needs of their students. Thus, some schools have made considerably more referrals than other schools, though we are not able to definitively determine if the low numbers of referrals at some schools was due to initial BTW staff vacancies or issues with the referral process. DHHS has addressed concerns with the MCPS liaison about low referrals and potential issues with referrals going through the school SW and SWBT and is working to address them. At schools with low referrals, BTW are working to increase direct referrals from students and families through their outreach efforts to students as well as school staff who are able to inform students about how to directly access BTW services in their school. Through the continued collaboration with MCPS and BTW outreach efforts and as all school locations become fully staffed, it is anticipated that the number of referrals will increase at all schools.

- 6. Is there are Program of Requirements for building on mental health/PYD suite at high schools, particularly those that are undergoing major school construction and are not being recommended for a full High School Wellness Center at this time? If not, please provide information about the number of sizes of rooms and other facility requirements needed for Bridges to Wellness services.**

No there is not, as the goal is to put a full High School Wellness Center into every school. Currently, the BTW suites consist of 2 offices and 1 conference room at each high school. The square footage of the offices and conference room are different at each school, based on what space was available to be repurposed. Each office has a minimum square footage of 125 and each conference room has a minimum square footage of 200.

- 7. Please update the list of mental health services for students administered by DHHS reflected in the following packet at page 5 and circles 10-**  
**15:** [https://www.montgomerycountymd.gov/council/Resources/Files/agenda/cm/2022/20220422/20220422\\_ECHHS4-7.pdf](https://www.montgomerycountymd.gov/council/Resources/Files/agenda/cm/2022/20220422/20220422_ECHHS4-7.pdf)

DHHS provides significant behavioral health services and supports to MCPS schools. This section documents these various DHHS-administered initiatives and programs.

**High School Wellness Centers.** DHHS contracts with community providers to provide Behavioral Health Services, Positive Youth Development Services, Social Services, Family Strengthening Services, Therapeutic Recreation Services at Wellness Centers in 5 MCPS high schools. DHHS contractors place 1.5 FTE behavioral health therapists at the Wellness Centers of Gaithersburg High School and Watkins Mills High School, and 1.0 FTE at both the Wellness Center of Wheaton High School and Seneca Valley and 2.0 FTE behavioral health counselors at the Wellness Center of Northwood High School.

The Wellness Centers offers a broad array of programs and services focused on supporting the physical health and safety, social and emotional well-being and academic performance of students. The Wellness Center offers students opportunities throughout their high school years for positive youth development programs, academic coaching and mentoring, somatic health services including primary care and on-site health screening, emotional support programs, mental health counseling, case management and family strengthening. They provide the students with a variety of curriculum-based programs, recreational and other physical activities, Healing informed opportunities, Evidence based and healing informed Joven Noble Curriculum that helps students develop their own coping skills to trauma, mentoring, and case management services, mental health counseling, and on-site health screenings and care. Staffing at the Wellness Centers is enhanced through DHHS's own PYD program and include Youth Development Specialists, Mental Health Coordinators and Case Managers. The PYD deploys non-clinical staff to engage students in therapeutic recreation and outdoor activities such as hiking, fishing, and gardening and helps to respond to the many needs of students that have been disconnected from virtual learning due to experiencing chronic levels of complex trauma. The students need a caring adult with whom they can develop a trusting relationship that will lead students to trust the behavioral health services and supports they are being offered.

Furthermore, DHHS has used Safe Space staff from the PYD program to work along with the SON staff to reach out to youth and their families to connect them with resources and services. These services include therapeutic recreational outings such as fishing trips, hiking, outdoor golf, culturally based and healing informed music production with students experiencing complex trauma. In addition, SON and Safe Space Staff are currently in 11 High Schools and 7 Middle Schools providing psycho educational groups in the school on a weekly basis. Lastly, in partnership with the 5 Wellness Centers and the SON there have been two Youth Leadership Conferences held at Montgomery College that included Healing informed Talking Circles. The first Conference served 71 High School Students and the second one served 155 students.

**Linkages to Learning (LTL).** At the middle school and elementary levels, DHHS directly co-locates Child and Family Therapists in 7 middle schools and 24 elementary schools. DHHS uses the LTL community school partnership to respond to critical and emerging social, behavioral health, and other needs in school communities with high rates of low-income families. It has an integrated focus on health, social services, community engagement and leadership to support student learning, strong families, and healthy communities. LTL brings additional partners and resources into the school to offer a range of supports and opportunities to students and families. These LTL schools have at least a 1.0 FTE therapist on-site who is a licensed clinician. The seven LTL middle schools include Eastern, Forest Oak, Gaithersburg, Mario A. Loiederman, Parkland Magnet, Odessa Shannon, and Silver Spring International.

With the first round of Maryland's Kirwan funding, MCPS added additional therapists to 6 LTL elementary schools via the Concentration of Poverty Grant. With the second round of Kirwan funding, additional schools were identified by the Maryland State Department of Education (MSDE) as eligible, per their Free and Reduced-price Meals System (FARMS) rates. MCPS asked to add an additional therapist via LTL to 2 more elementary schools. However, MCPS will no longer be funding these additional therapists in the LTL contract in FY24. The recently issued Linkages RFP for FY24 does include a Staffing Recommendations Report Addendum which recommends that "...the LTL contract shift funds from Community School Coordination services to increasing Case Management and Behavioral Health support services." And that "because MCPS can provide community school coordination...through their CSLs, HHS is recommending that funds previously used for CSCs now be used to increase the number of...Child and Family Therapists...at schools with the highest needs for these direct services."

**School and Community-Based Youth Services (SCYS).** DHHS' CASCBS also administers the School and Community-Based Youth Services (SCYS) contracts, which includes the recently started Bridge to Wellness (BTW) initiative. In the 9 middle schools and 5 elementary schools that are not served by BTW, SCYS provides one to two-and-a-half days a week per school of mental health support to students and their families, as well as youth mental health and therapeutic recreation services in the general geographic area of targeted schools. The SCYS staff include master's level licensed therapist; and mental health promotion, prevention and therapeutic recreation staff, who can be graduate or bachelor's level staff. All staff who are not licensed at the independent clinical level are supervised by a licensed and board-approved clinical supervisor. The schools that have benefitted from these programs include Glen Haven ES, Twinbrook ES, Brown Station ES, Whetstone ES, Argyle MS, Odessa Shannon MS, Earl B. Woods MS, Julius West MS, Montgomery Village MS, Neelsville MS, Shady Grove MS, Francis Scott Key MS, Takoma Park MS. The SCYS Bridge to Wellness expansion increased the amount of behavioral health services that are offered in high schools. These SCYS/BTW schools have a mental health specialist on-site five days a week. By FY24, all of these staff will be master's level licensed clinicians, though currently, 33% of them are master's level clinicians who are not yet licensed. The high schools that have benefitted from these services include Bethesda-Chevy Chase Clarksburg, Damascus, Montgomery Blair, James Hubert Blake, Northwest Albert Einstein, John F. Kennedy, Col. Zadok A. Magruder, Richard Montgomery, Northwest, Springbrook, Rockville, Poolesville, Quince Orchard, Sherwood, Paint Branch, Walt Whitman, Walter Johnson, Winston Churchill, and Wootton.

**Cluster Projects.** DHHS' Child and Adolescent School & Community Based Services (CASCBS) also operates the Cluster Projects, which utilize cross-sector multi-agency partnerships and care coordination services to rapidly connect families referred by MCPS to needed social and behavioral health supports in order to sustain or improve family stability. The Cluster Projects staffing includes Behavioral Health Resource Specialists that provide individualized support to link youth and other family members to needed behavioral health treatment or support services, regardless of insurance or other barriers. These services range from private providers that can see students in schools to community-based public and private services. DHHS' (CASCBS) provides additional resources to the Kennedy, Watkins Mill and Paint Branch-Springbrook High School Clusters via the Cluster Projects. These school-linked community-based supports include family Care Coordination for social services needs and Behavioral Health Access and Support services for any family member in need of behavioral health services.

**Crittenton Services of Greater Washington:** Added a mental health component in FY22 for program participants in middle and high school in Montgomery County. Services include assessment, individual or group counseling, and mental health crisis intervention. Intakes are performed by a mental health professional to determine the best level of mental health support. Once the intake is completed, a treatment plan is developed between the teen girl and clinician. Families are referred by teachers, counselors, and self-referral.

**Crisis Center.** DHHS's Crisis Center has remained available 24/7 for telephone consultation for students, parents, caregivers, school counselors, and teachers. In addition, the Crisis Center's walk-in service has been available to students to receive a therapist crisis assessment. The Mobile Crisis and Outreach Team has remained available to support students experiencing a behavioral or mental health crisis. In 2019, MCPS made almost 2,000 referrals of students to the Crisis Center. Once receiving a crisis assessment, students may be linked to a variety of supports including Care and Connections for Children and Families Program that can offer intense interventions and supports to families.

DHHS, in partnership with EveryMind, Inc., also funds the BTheOne.org program that continues to address the issue of teen suicide prevention and substance misuse prevention and provide resources to school age youth. Adolescent Substance Use Prevention Program (ASAPP) provides substance use prevention education while evolving into a peer-led, adult-guided model. This expansion to the Youth Ambassador program, youth gain the confidence to advocate for substance use prevention, treatment, and bring more awareness to substance use disorder, suicide, and mental wellness. This advocacy includes grassroots community mobilization and transformation, as well as educating the County Council and other key officials on issues pertinent to youth substance use. The goal is to empower young people to be the voice of prevention, interventions, and related consequences to create change in their communities.

#### **DHHS-Victim Assistance and Sexual Assault Program (VASAP)/Trauma Services**

Trauma Services offers therapeutic services and victim advocacy to children and adolescents victimized in the county, or county residents. The program coordinates with MCPS and provides presentations and resources when requested. We attend school fairs and events to promote the services that the program provides.

The therapists in the program are assigned to the local high schools and associated clusters schools. When requested the therapist provides crisis intervention services, groups, and therapy in the schools, our offices, or virtually.

In addition, when grant funding is available, Trauma Services has a community educator who gives presentations on consent and safe dating to 10<sup>th</sup> grade classes as part of the health curriculum. Moreover, the program collaborates with the "Choose Respect Program" and provides presentations on consent to MCPS students.

**DHHS - Child and Adolescent Behavioral Health Services (CABHS).** CABHS is the safety net outpatient mental health treatment for children and youth 5-18 years old in Montgomery

County. It has two clinics, in Silver Spring and Rockville, and a team of community-based providers that accept referrals from Child Welfare Services and the Department of Juvenile Services. Before the pandemic, CABHS staff have been able to handle new referrals from MCPS and the community admitting them in a timely manner. Children and youth with severe presentations that are referred by the Crisis Center or the hospitals are prioritized and admitted as soon as a space is available. CABHS has a multidisciplinary and multilingual staff that includes two psychiatrists, a psychiatric nurse, and licensed therapists.

**Sheppard Pratt's Care and Connections for Families (CCF)**

CCF provides intensive short term, in-home crisis stabilization services to children and adolescents who are experiencing a mental health crisis such as suicidal ideation, trauma, emotional dysregulation etc. CCF is able to provide therapy at either school or in the family home. CCF also provides a connection to longer-term services to ensure ongoing care and stabilization. Teachers, parents and caregivers work together with the youth and the CCF therapist, and an in-home stabilizer to construct a plan for resilience and recovery. For referrals to CCF are made by Crisis Center for referred MCPS students or by the LBHA. Through the Newcomer initiative, MCPS may make direct referrals for youth newly arrived in the country.

**8. Please include the approved FY23 budget for the programs and identify the locations that the programs are being delivered in FY23.**

The approved FY23 Linkages to Learning total budget is \$7,299,280.60 and serves the following schools:

Arcola ES	JoAnn Leleck ES	Rolling Terrace ES
Eastern MS	Kemp Mill ES	Rosemont ES
Forest Oak MS	Loiederman MS	Sargent Shriver ES
Fox Chapel ES	Maryvale ES	Silver Spring International MS
Gaithersburg ES	Montgomery Knolls ES	South Lake ES
Gaithersburg MS	New Hampshire Estates ES	Summit Hall ES
Georgian Forest ES	Oak View ES	Viers Mill ES
Green Castle ES	Odessa Shannon MS	Washington Grove ES
Harmony Hills ES	Parkland Magnet MS	Weller Road ES
Harriet Tubman ES	Pine Crest ES	Wheaton Woods ES
Highland ES		

The approved FY23 SCYS budget, including the Bridge to Wellness expansion, is \$7,100,424.99, and serves the following schools:

SCYS Mental Health services:

# of Days/Week	School Name
2	Brown Station ES

2	Glen Haven ES
2	Twinbrook ES
2	Watkins Mill ES
2	Whetstone ES
2.5	Argyle MS
2	Earl B Woods MS
2.5	Francis Scott Key MS
2	Julius West MS
2.5	Montgomery Village MS
2.5	Neelsville MS
2	<i>Odessa Shannon MS*</i>
2	Shady Grove MS
2	Takoma Park MS

\*Mental Health services are being provided to Odessa Shannon MS under the SCYS contract until a full-time therapist is hired under the Linkages to Learning contract, as Odessa Shannon became a new Linkages school in FY23.

SCYS Bridge to Wellness services (Mental Health, Family Care Management, Youth Development):

Albert Einstein HS	Montgomery Blair HS	Rockville HS
Bethesda Chevy Chase HS	Northwest HS	Sherwood HS
Churchill HS	Paint Branch HS	Springbrook HS
Clarksburg HS	Poolesville HS	Walt Whitman HS
Damascus HS	Quince Orchard HS	Walter Johnson HS
James H. Blake HS	Richard Montgomery HS	Wootton HS
Magruder HS		

The PYD Youth Opportunity Center budget for Bridge to Wellness Youth Development Specialists at 9 schools in FY23 is

**9. Please provide criteria and analysis for determining sites for building and operating High School Wellness Centers.**

In considering the priority list for building and opening future High School Wellness Centers, the criteria used provided a broad picture of need with Free and Reduced Meals (FARMs) and EverFARMs rates being a proxy for poverty and likely low access to health care. Additionally, looking at student personal and mental health needs through Attendance/Graduation/Suspension rates as well as Crisis Center referrals at each high school provided a level of confirmation for the need determined in looking at the FARMs rates. All of the data used, including looking at the geographical areas through an equity lens, helped to determine a general priority list for where the next full School Based Wellness Centers should be set up.



***Relevant excerpts from the County Executive’s Recommended Budget for the Department of Health and Human Services are attached at ©1-7.***

Members of the Joint HHS and E&C Committee have expressed that the mental health needs of youth and families in Montgomery County are a top priority in the response to the COVID-19 pandemic, and Councilmembers have engaged with other public officials, public agencies and community stakeholders on how to strengthen mental health supports in Montgomery County Public Schools. The Joint Committee will review the delivery of school-based services that involve collaboration among DHHS, MCPS, and community-based providers, including High School Wellness Centers, Linkages to Learning Centers, Newcomer services, School Health Services, Cluster Project services, and other services delivered by community-based providers in partnership with DHHS and MCPS.

**I. School-based Mental Health and Support Services Landscape**

In preparation for discussion of the FY23 Operating Budget, the Chairs of the Joint Committee requested a comprehensive inventory of mental health supports provided in and through schools by MCPS and DHHS (©8-9). The Committee chairs requested that both organizations identify services pre-pandemic (FY20), added during the pandemic (FY21-Y22), and proposed for FY23 and the sources of funding for each service.

***MCPS Services***

MCPS has provided the following tables that highlight the mental health professionals they have hired since FY20-FY23 (recommended) for: 1) engagement; 2) schools; and 3) special education services. Since FY20, MCPS has steadily increased the number of positions in each category in large part due to the social-emotional impacts of the COVID-19 health pandemic and receipt of relief funds to address the mental health needs of the school community. While DHHS summarizes their services by program areas, MCPS identifies the mental health profession positions and the additional resources provided for certain positions. As a result, MCPS has provided follow-up definitions on the role of each position and resource which Council staff has summarized prior to the tables to provide important context.

- **Psychologists.** Psychologists receive and respond to requests for psychological services; provide interventions and instructional supports to develop students’ academic, social, emotional, developmental, and life skills; provide direct and indirect services for students, families, and schools; and work with families, school administrators, educators, and other professionals to create supportive learning and social environments
- **Resource Psychologists.** Resource Psychologists provide interventions and instructional supports to schools, provide direct and indirect services for students, families, and schools; and work with families, school administrators, educators, and other professionals to create supportive learning and social environments.
- **Coordinator, Dept of School Psychology.** Provides supports to school psychologists.

- **Social Workers.** Social Workers will serve as a direct support to an assigned school in the field and/or serve as a liaison between the departments, programs, school personnel, families and outside resources. FY22, FY23, FY24: 50 Social Workers budgeted for FY22, as positions were not able to be filled, reduced to 32 for FY23; remaining funding allocated for restorative justice.

The **Social Worker Supervisor** supervises Montgomery County Public Schools (MCPS) 10- and 12-month social workers and provides them with ongoing support and clinical guidance.

- **Pupil Personnel Workers.** Pupil Personnel Workers (PPWs) use knowledge of MCPS programs and community resources, and utilize a collaborative process with administrators, school staff, and other Office of Student and Family Support and Engagement (OSFSE) staff members, to assist in determining resources, strategies, interventions, and recommended placements for students who are not experiencing success in school. Serve as an advocate for students and their families to access appropriate services.
- **Parent Community Coordinator.** The parent community coordinator (PCC) fosters development, planning, and implementation of parent/guardian and community engagement efforts that promote a culture of respect and value for all families in the educational process.
- **Instructional Specialists.** Work within Student and Family Services.
- **Professionals (Part-Time).** Temporary part-time psychologists who fill-in for school psychologists vacancies and long-term absences; school psychologists interns through college internship program and professionals who aid in mindfulness activities.
- **Contractual Services.** Contractual nursing for Community Schools and health services and wrap-around services for community schools, per Maryland State Department of Education legislation.
- **Mental Health Coordinator.** Coordinates the work of providing mental health services to students, primarily with external partners.
- **Additional Resources.**
  - Positive Behavioral Intervention Supports, Be-Well 365, and promotion of mental health: Stipends to school-based staff who lead and support these initiatives.
  - Social Emotional Curriculum Purchase over a three-year period (FY22, FY23, FY24)
  - Social Emotional Training stipends

**Mental Health Supports  
FY 2020 - FY 2023**

Engagement		FY 2020		FY 2021		FY 2022*		FY 2023*	
Positions/Services	Funding Source	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)
Psychologists	Local/County	98.500	13,277,065	105.500	13,697,425	116.500	13,937,865	115.500	14,926,457
Resource Psychologist	Local/County		-		-	1.000	114,963	2.000	234,340
Social Workers	Local/County		-	1.000	100,714	2.000	201,619	1.000	101,761
Social Workers	State: Blueprint/Concentration		-	2.000	445,977	1.000	182,381	2.000	184,102
Social Workers	Federal/ESSER III		-		-	50.000	10,282,628	32.000	6,642,961
Social Worker Supervisor	Federal/ESSER III		-		-		-	1.000	325,996
Pupil Personnel Workers	Local/County	34.400	8,564,507	54.400	8,411,644	54.400	8,749,559	54.400	8,832,141
Parent Community Coord	Local/County	33.000	387,017	34.000	3,808,045	49.000	4,766,562	49.000	4,837,968
Parent Community Coord	Federal/Title III Grant	4.000	389,675	4.000	420,559	4.000	423,611	4.000	429,957
Parent Community Coord	State: Blueprint/Concentration		-	1.375	124,518	1.625	127,930	19.000	1,518,212
Coordinator	Local/County	1.000	168,393	1.000	164,254	1.000	166,976	1.000	167,878
Instructional Specialist	Local/County	1.000	132,175	1.000	158,164	1.000	165,079	1.000	157,028
Instructional Specialist	Federal/Title III Grant	1.000	139,346	1.000	111,493	1.000	111,598	1.000	192,510
Stipends for Positive Behavioral Intervention Supports, Be-Well 365, and promotion of Mental Health	Local/County		108,344		145,328		344,480		344,911
Psychologist part-time/Psych	Local/County		118,038		128,803		125,574		128,085
Mindfulness Activities	Local/County		-		-		264,991		264,991
Contractual Nursing for Community Schools	State: Blueprint/Concentration of Resources		1,190,728		2,381,456		1,000,000		1,330,000
Every Mind/Identity - Contractual services for Mental Health and Wellness	Local/County		71,000		52,539		655,000		697,890
Instructional Materials and Program Supplies	Local/County		156,000		155,955		1,379,901		1,379,901
Mental Health Coordinator	State: Blueprint/Mental Health Coordinator		89,708		89,708		89,708		89,708
Supplies and Materials	Federal/ESSER III						7,500,000		7,500,000
Training Stipends	Federal/ESSER III						8,402,663		
<b>Total</b>		<b>172.900</b>	<b>24,791,996</b>	<b>205.275</b>	<b>30,396,582</b>	<b>282.525</b>	<b>58,993,088</b>	<b>282.900</b>	<b>50,286,797</b>

\* Includes ESSER funding, which might cross a three year period (FY22, FY23, and FY24).

**Mental Health Supports  
FY 2020 - FY 2023**

Schools		FY 2020		FY 2021		FY 2022		FY 2023	
Positions/Services	Funding Source	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)
Psychologists	Local/County	2.884	361,495	2.884	354,928	2.884	355,263	3.884	426,773
Psychologists	Federal/Head Start Grant	1.150	188,276	1.150	191,532	1.150	156,382	1.150	157,858
Social Workers and Social Services Assist	Local/County	20.590	1,628,586	21.590	1,640,881	21.300	1,597,630	29.300	2,240,343
Social Workers and Social Services Assist	Federal/Head Start Grant	7.750	594,406	7.750	594,959	8.750	643,664	8.750	649,739
Parent Community Coord	Federal/Title I Grant	9.250	594,352	9.250	575,897	9.250	580,076	23.125	1,997,384
<b>Total</b>		<b>41.624</b>	<b>3,367,115</b>	<b>42.624</b>	<b>3,358,197</b>	<b>43.334</b>	<b>3,333,015</b>	<b>66.209</b>	<b>5,472,097</b>

Special Education Services		FY 2020		FY 2021		FY 2022		FY 2023	
Positions/Services	Funding Source	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)	FTEs	Amount (Including Benefits)
Social Workers	Local/County	10.400	1,150,954	12.400	1,341,385	13.400	1,444,972	12.000	1,535,459
Social Workers	Federal/IDEA	13.600	1,548,805	13.600	1,499,877	13.600	1,476,305	18.000	1,883,348
Psychologists	Local/County	14.000	1,871,794	14.500	1,920,109	16.500	2,097,767	15.000	1,802,001
Psychologists	Federal/IDEA	1.000	93,638		-	1.000	101,210		-
Psychologists	Federal/Medical Assistant Program	0.500	51,863	0.500	51,783	0.500	50,969	0.500	48,484
Psychologists	Federal/IDEA	6.500	717,936	6.500	716,826	5.500	604,350	8.000	870,822
Crisis Prevention Training	Federal/IDEA		22,350		22,350		3,825		3,825
Crisis Prevention Training Certification	Federal/IDEA		38,704		38,704		90,378		61,650
Crisis Prevention Training Temporary Part-time	Federal/IDEA		67,316		67,316		118,222		118,222
Supervisor -Student Engagement, Behavioral Health and Academics	Federal/IDEA					1.000	152,774	1.000	153,600
<b>Total</b>		<b>46.000</b>	<b>5,563,360</b>	<b>47.500</b>	<b>5,658,350</b>	<b>51.500</b>	<b>6,140,772</b>	<b>54.500</b>	<b>6,477,411</b>