Task Force Expectations

Learn

Lean In

Bring Ideas

Share Knowledge
Tier III
Individualized intensive interventions

Tier II
Targeted small group interventions for at-risk students

Tier I
Whole class research-based core instruction
Identify all primary prevention interventions that your organization provides to support the mental health needs of children and adolescents.
AACPS

• Community Building Circles and Restorative Practices
• Sensory Processing Support through the Occupational Therapist
• School Resource Officers
• Core School Counseling Curriculum Provided by School Counselors
• Suicide Awareness and Prevention Training for Staff
• Student Services Staff (School Psychologists, School Counselors, School Social Workers, PPWs, and School Nurses)
• Positive Behavior Intervention and Supports
• Health Lessons on Wellness, Substance Abuse, Healthy Relationships, Analyzing Influences, Accessing Valid Information, Decision-Making, Communication, and Self-Management
• Social-Emotional Learning Advisory Lessons
• Global Citizenship Course for 9th Grade Students
• Trauma-Informed Professional Development Classroom Structures, and Teaching Strategies
• Equity Professional Development for Staff
AACPS

- Wellness Committees
- Gender Sexuality Alliances (GSA Clubs)
- Black Student Unions
- Policy and Budget for the Education and School System, Which Includes Supports for All Public School Students
- Multi-Tiered Systems of Support – Check and Connect, Community Circles, Restorative Practices, PBIS, CDM, Alt One Staff
- Goal Setting, Morning Meetings, Social Skills Instruction, Behavioral Management Programs with Rewards and Incentives, Daily Home-School Communication Tool
- SEFEL (Social and Emotional Foundations for Early Learning)
- CPI (Crisis Prevention Institute Training)
- Charles Leisure Programs
- ACE
- SECAC (Special Education Citizens Advisory Committee)
- QPR Training and Crisis Phone Numbers on Student IDs
• **Annapolis Police Dept.** – Culturally-based mentoring for boys and girls ages 14 to 21, parenting classes, homework assistance, weekly food distribution in the community, 14-week summer camps, mini-camps during the school year

• **Student Led Movements** – Our Minds Matter

• **Parents** – Parent networks, community supports, recreational activities

• **Villa Maria** – Parent support groups open to the community

• **Youth Suicide Awareness Team** – Suicide prevention training for parents and educators

• **AACCPTA** – Provide support to parents, students, and administrators to promote the welfare of youth and assist parents in developing the skills needed to raise and protect their children

• **Anne Arundel Mental Health Agency** – Therapy, medication management, and case management, CRICT, Pediatric Toolkit developed for Anne Arundel pediatricians with mental health questions for treating youth
• **Anne Arundel County Police Department** – Mental Health First Aid Training to all sworn Anne Arundel Police Department Officers

• **BWMC** – Community education around parenting, wellness, suicide prevention, depression, and anxiety, educational series, “Not All Wounds are Visible,” with a focus on ACES, referral to appropriate resources in the community

• **Health Department** – Tobacco Free Kids Week, sponsorship of SADD Chapters, awareness activities, health fairs, youth suicide awareness team representation

• **Thrive Behavioral Health** – Trauma, safety, and nutritional assessments and screenings for all children and clients, trauma-informed care, medication management, transportation to and from psychiatry services

• **AAMC** – Prevention education, peer recovery specialists

• **Innovative Therapeutic Services** – Family counseling

• **School Health** – Mental Health First Aid, CISM, and suicide awareness training
• **Crisis Response System** – Mental Health First Aid, list of resources in the community, Warmline, Mobile Crisis Team, care coordination services to help link students

• **AAMC** – Outpatient pediatric mental health treatment and counseling, depression screening with Primary Care Provider, Talk Saves Lives trainings, Mental Health First Aid trainings

• **NAMI** – Support groups, Ending the Silence, BASICS Class for Parents

• **Center of Help** – Youth and adult Workshops, youth community circles, drop-in casework

• **Annapolis Pride** – Connecting the community to resources like PFLAG Annapolis that hosts biweekly meetings for families, youth, parents, and adults

• **Annapolis City Government** – Partnership with Crisis Response and Strengthening Families
Identify all secondary prevention interventions that your organization provides to support the mental health needs of children and adolescents.
- School Nurse
- Alt One
- Healthy recreational activities
- Maria de la Paz Youth Outreach Center
- Restorative Circles
- Conflict Mediation
- Strengthening Families
- Small group counseling in school
- **AAMC** - Outpatient mental health services for kids and adolescents
- Parent Organizations (i.e. – CHADD, Ellie’s Bus, Burgers and Bands for Suicide Prevention)
- AACPS Mental Health Teen Advisory Board
- **STAR** (Screening Teens Access to Recovery) Program
- Outpatient counseling at the Health Department
- **Thrive** – Small group counseling, early intervention, play therapy
- School Resource Officers
- PIAC (Parent Involvement Advisory Council & CAC (Citizens Advisory Council)
- Narcan Training
- **AAMC** - Psychiatric day hospital services for adolescents ages 13 and older.
- Decision-Making Room
- **BWMC** – Classes, such as “Safe at Home” for young teens to learn about safety and self-care when home alone
• **YSA** – Parent coaching
• Check-In, Check Out & Check and Connect
• Advisory lessons
• Expanded School-Based Mental Health
• Special education services for students with social emotional needs
• Referrals to and collaboration with community Providers
• Comfort corners
• BOE support to fund School Counselors, School Psychologists, School Social Workers, and PPWs to support students needing targeted support
• **Children’s Guild** – Group counseling, psychoeducation for families
• **AACPS Health** – Collaborate with school counseling to address sensitive topics in curriculum for students who might be impacted
• **Pupil Personnel** – Responsible Actions Attendance Program, referrals to outside organizations, such as Family Preservation, Strengthening Families, Thrive, CRICT, AACC Birth to 5 Program
• **Villa Maria** – Mental health groups in schools/community, individual therapy, medication management, family therapy, Parent Child Interaction Therapy (PCIT) – ages 4-7
• **Annapolis City Police Department** – Culturally-based mentoring for boys and girls ages 14-21, work with families regarding reunification
• Clubs that support racial or cultural minority students and LGBTQ youth
• **AAMC** – Adolescent substance use intensive outpatient program, family wellness for any family member of community member, ADEC
• **AACPS Safe and Orderly** – Alternative to Drugs Program, Bias Behavior classes, Charles Leisure Programs
• **AACPS** – Analysis of discipline data to determine what additional supports are needed.
• **Kids at Hope**
• **AACPS Occupational Therapy** – Started a workgroup to study the role of the OT related to mental health in schools
• **NAMI** – NAMI Basics program for parents and caregivers of children and adolescents with a mental illness, NAMI Ending the Silence program where mental health presentations are provided to students, teachers, and parents
• **AACPS** - Learning Labs
• **DJS** – Children involved in the agency are provided with various group counseling programs, including anger management, and victim’s awareness education in gender specific groups

• **AACPS** – Behavior Intervention Planning, social skills instruction

• **CRASC (Chesapeake Regional Association of Student Councils)** – SGA leaders come to the General Assembly to learn strategies to improve wellness in children and adolescents

• **Crisis Response System** – Resources for the specific need, care coordination to help with linkage, home visits by a mobile team to offer services

• **Annapolis City Police Department** – Spending time with targeted youth who exhibit mental health needs by connecting them with the appropriate resources by way of social services agencies
Identify all tertiary prevention interventions that your organization provides to support the mental health needs of children and adolescents.
• **AACPS** – Create Behavior Interventions Plans, Community Conferencing, crisis management
• **Maryland Center for Psychiatry** – Comprehensive psychiatric assessments, psychiatric treatment
• **AA Mental Health Agency** – IOP, PHP, Inpatient, Respite, RTC
• **AAMC** – Intensive outpatient services
  • Individual counseling with school counselors, school psychologists, and school social workers
• **Health Department** – OMHC (Outpatient Mental Health Center) services
• **Center of Help** – Pro bono individual therapy for uninsurable youth referrals to the Arundel Lodge.
• **AAMC** – Emergency department for psychiatric evaluation and to keep children safe until appropriate safe disposition can be arranged
• **Our Minds Matter** – Advocate for more mental health related resources in public schools
• **NAMI** – Education and support groups
• **BOE** – Funding for staff to intervene, support, and refer students in need of intensive support
• **Expanded School-Based Mental Health**
• **CRICT**
• **Family Preservation Referrals**
• **Mobile Crisis**
• **AACCPTA** – Reflections Program, One-on-one intervention between school, family, and the community to advocate for children
• **Crisis Response System** – Crisis Stabilization, Attend meetings to support the family and child, follow-up calls, care coordination
• **School Health** – Collaborate/Partner with other members of the school’s student support team
• **AACPS Occupational Therapy** – Recommend strategies to teams

• **Parent** – Coordination between in school interventions and private interventions, unconditional love and support

• **Pupil Personnel** – Truancy docket, Job Corps, Free State Academy, TPAP, Consult with DJS and DSS

• **Alternative Education** – Moss Adams Academy, Phoenix

• **AACPS** – Central Office Elementary Behavioral Crisis Team

• **DJS** – Individual and family counseling through partnered vendors for referred clients, complete assessments to help identify the child and family’s specific needs and refer out to other providers in the community

• **BWMC** – Emergency department for acute intervention and evaluation before safe transition to appropriate resources

• **AACPS** – Suicide risk assessments, threat determination assessments

• **AACPS** – Student Services Team meetings and referrals to community agencies

• **Arundel Lodge** – 0-5 services at three locations, Emotional Intelligence classes, parent groups, OMHC, Consult with Child Advocacy Center

• **Thrive** – Assessing for safety, needs assessments, consultation with psychiatry and refer for more intensive services, if needed, weekly or twice a week therapy in the home, if needed, refer to wrap around supports

• **AACPS** – Response to Harm Circles, Mentoring, Short-Term Contracting
• **Villa Maria** – Universal use of the Columbia Suicide Assessment followed with parent support and recommendations for level of care, therapy support increased, facilitate intensive outpatient, inpatient hospitalization, if necessary, RTC within agency, PRP

• **Anne Arundel County Crisis Intervention Team** – CIT camp where children work one-on-one with CIT officers, Soapbox Derby where children are mentored by officers while they build their soapbox derby car, Youth Activities Program, CIT Unit follow-up for children in crisis

• **Children’s Guild** – Provide Kinship Care Support Groups for caregivers and youth
Identify the Tier I, II, and III mental health supports that should be available within your organization that do not exist now.
• Youth Mental Health First Aid
• Expanded Home Based Mental Health Services
• Inpatient Adolescent Mental Health Unit
• Training for all AACPS staff on mental health issues and the correct way to support and refer students as needed
• Expand trauma-informed treatment
• More bilingual services all around
• Coordination between school and home/private interventions
• More services for privately insured children, mentoring, youth peer support for all youth
• Free case managers to help navigate the mental health system, provide support to families, and ensure continuity of care
• Trauma-informed practices embedded within existing AACPS professional development

• Universal resiliency skills embedded in curricula (yoga, mindfulness, coping, etc.) in county residential treatment for youth
• Provide increased education/consultation with other agencies and groups
• Adolescent suicide survivor support groups
• Increased psychiatric time and availability to prescribe medication at the AACPS Regional Programs
• Trauma-Informed instruction for students
• More certified and trained therapy animals
• Elementary health teachers
• Gender Sexuality Alliances (GSAs) needed in all schools to support LGBTQ students.
• Bilingual mental health services, a coordinator to help navigate insurance issues, consistent confidential workspaces
• More funding for the early intervention program
• Help with covering high co-pays for insured who cannot afford services
• Mental health support from Occupational Therapists
• Trauma-based training
• Training made available to PTAs, especially in the council that includes resources available to students, instead of having to gather the information independently
• Mental health screenings in elementary schools for early identification
• 23-hour observation program
• Coordinate trainings with school counselors surrounding the increase in suicidal behaviors
• More training for school staff on LGBTQ issues to better support students
• Comprehensive alternative learning environments within school buildings that are staffed with social workers, special educators, etc. (K-12th grade)
• More mental health staff and social work/PPWs, more professional development for school-based staff, more community partnerships, more mental health resources in South County
• Community conferencing available within 48 hours
• Case managers to track, follow, and advocate for families long-term
• Resources to support our ESOL community
• Consistent SEL programming within secondary schools
• More mentoring opportunities vertically through cluster
• More partnerships with the outside community to increase opportunities to be connected and give back
• Provide information on available resources to all families
• More mental health providers, especially for underrepresented groups
• Community-based schools
• AACPS Policy on Parent Education/Involvement
• AACPS Policy on Parent/Student Education in the myths/fallacies of college acceptance
• AACPS Policy on Improved In-School/Community Support for Disadvantaged Students
• AACPS Policy on Staffing Levels Within National Guidelines
• 24 Hour Crisis Intervention Services in Annapolis City (non-punitive)
• Mental Health Liaison Services in Annapolis City
• Annapolis City Police Officers who are certified to work with the mental health needs of the community and work with mental health clinicians.
Anne Arundel County Public Schools Mental Health Task Force Subcommittees
Timeline and Tasks of the Subcommittees

Nov. 2019 – Jan. 2020

- Examine the contributing factor and establish where the gaps exist.

Jan.–Mar. 2020

- Research best practices around this contributing factor.

Mar.–May 2020

- Provide recommendations around the contributing factor that will support children, families, and the community.

May 2020

- The Co-Chairs will develop an action plan based on the work of the subcommittees to be presented to the Board of Education.
Presentations
Discrimination, Bias, and Cultural Barriers

Trauma

Poverty

Social Media

Parental Substance Abuse

Stress and Pressure

Lack of Access to Resources and Mental Health Providers

Mental Health Stigma
Discussion Questions

• Are there any clarifications that you would like any of the subcommittees to make at this time?
• Are there any follow-up questions that you have for any of the subcommittees?
• Is there anything specific that you would like any of the subcommittees to research in the future?
• Are there any thoughts that you have for any of the subcommittees as they move towards their final recommendations to the task force?
Time to Work
Brainstorming and Researching

• In your subcommittees, please use the large Post-It Notes to brainstorm potential recommendations based on your topic.
• Utilize the Chrome Books to research potential recommendations.

➢ These recommendations will be narrowed down during the March meeting and each subcommittee will have time to provide more specific details on their final recommendations to the task force.
Next Steps

• The co-chairs will take the information gathered from today’s meeting and add this information to the Google Drive.

• Between now and the next meeting, each committee should continue researching recommendations. This can be done through e-mail, Google Drive, and/or face-to-face.

• Each subcommittee will provide their recommendations to the chairs of the task force at the end of the March meeting.

Next Meeting
Wednesday, March 25th
from 1:30-3:30 pm
THANK YOU