

## Somerset County Public Schools, Princess Anne, MD

With some support from a state grant, the local public school system set out to build its capacity to establish and sustain a Learning Support Component to promote the healthy development of children and establish safe and nurturing learning environments for academic success. The funds were used to establish the position of Learning Support District Coordinator who was to establish and facilitate the management of a Learning Support Component at the district level to promote the coordination and sustainability of resources within the county school system.

Early in the process, the Coordinator was to help establish and lead a Learning Support Resource Coordinating Council and the Multi-Agency Project Team. Initially, the Coordinator, along with two Site Coordinators, worked with several schools to develop Student Support Teams and to enhance school programs and interventions and parent outreach and support.

On March 13, 2007 Tracy Cottman, project coordinator, reported the following:

“We originally began this work in 2001 .... At that time we had 2 social workers working in 8 schools.

Unfortunately, in 2002/2003, we lost the funding of our state grant due to budget cuts. However, the school superintendent felt that the program was important and absorbed the 3 positions into the local budget. As a result of the budget cuts we could not maintain the evaluator and therefore did not get to complete the data collection.

In October 2005 we received the SS/HS grant and was able to expand the Learning Support Program by hiring a Learning Support Specialist for every school, as well as 3 Behavioral Intervention Specialists, providing funding for outpatient mental health services, and many other components. We have developed a logic model for the Safe Schools/Healthy Students Initiative. It is too early to say that we have achieved our long term outcomes, however, we do believe we are headed in the right direction. Our next performance report will be in April, and I may have some evaluation data to share. It's still VERY early in our grant and real change often takes time. We have been able to provide some tremendous services to our students and families.

Our Learning Support Program is very much integrated within our school district and is included in our policies. The Learning Support Teams at each school is considered the ‘point of entry’ for students with barriers to learning. We have strong collaborations with many agencies in our county and we meet monthly as a steering committee, which helps in our efforts to build a seamless system of care. We are often working with the same people, and we want to develop a system that has minimal if any fragmentation of services.”

Tracey indicates that the evaluation matrix that is on the website needs to be updated in the near future.

**Evaluation Matrix**  
**Intervention Impact on Students**

**Aim:** Prevent and correct emotional, behavior, learning and health problems as barriers to learning

**Goal #1:** To institute a Learning Support Component for Somerset Public Schools to enable children to function to their full capacity within the school learning environment

Expected Short-Term Outcomes	Formative (Process) Data	Expected Long Term Outcomes (after 3 years)	Specific Indicators to be used to monitor Program	Measures to be Used
<ul style="list-style-type: none"> <li>❑ Access to supportive services for students is available to prevent and improve emotional, behavior, learning and health problems</li> <li>❑ Access to supportive services for students is available to prevent and improve emotional, behavior, learning and health problems</li> <li>❑ Classroom instructors and administrators have positive options to refer disruptive students to that benefit all parties</li> <li>❑ Trust and supportive relationships are established with families that ensure their involvement in child’s intervention plan.</li> </ul>	<ul style="list-style-type: none"> <li>❑ Learning Support Team meetings (frequency)</li> <li>❑ Learning Support Team Policies and Procedures Manual reviewed by Steering Committee</li> <li>❑ Referral Process/ aggregate data (from Learning Support Team Meeting Form and Action Plan)                             <ul style="list-style-type: none"> <li>– Source</li> <li>– Action Prior to Referral</li> <li>– Average time between referral and Team consideration</li> <li>– Priority issues (if unable to handle all student referrals)</li> </ul> </li> <li>❑ Team Activities and Outcomes                             <ul style="list-style-type: none"> <li>– Recommended actions</li> <li>❑ Actions taken (45 days)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Children are successful in school with fewer barriers to learning and more support to overcome barriers at an early intervention stage</i></li> <li>❑ <i>All children upon entering school for first time are given a general assessment test for developmental delays, mental or general health issues, and other needs for a smooth transition into school environment</i></li> <li>❑ <i>Children complete high school with higher rate of academic and life skills</i></li> <li>❑ <i>Attendance/truancy problems are reduced by 20% over 3 years</i></li> </ul>	<ol style="list-style-type: none"> <li>1. Aggregate data (annually by school):                             <ul style="list-style-type: none"> <li>– Enrollment (disaggregated)</li> <li>– Days Absent</li> <li>– Days Tardy</li> <li>– Student Mobility</li> <li>– Suspensions (by category) and Expulsions</li> <li>– Special services</li> <li>– CTBS or Maryland Functional Tests</li> <li>– Grade Point Averages</li> <li>– Dropout</li> <li>– High Program Completion</li> <li>– Grade 12 documented decisions</li> </ul> </li> <li>2. Aggregate data by program participants as evidenced at Team consideration and at 12 month follow-up)</li> </ol>	<ul style="list-style-type: none"> <li>❑ MSDE School Performance Report</li> <li>❑ Chairperson/Systems Manager Checklist</li> <li>❑ <i>Number of completed assessments with action plan in place and flow-up documented... (Reported quarterly in Summary Form) Tracked over three-year period</i></li> <li>❑ Suspension rates for disruptive/violent offenses (define) reported for both school and program participants (quarterly)</li> <li>❑ See Formative (Process) data collection</li> <li>❑ <i>SED identification rates</i></li> </ul>

Expected Short-Term Outcomes	Formative (Process) Data	Expected Long Term Outcomes (after 3 years)	Specific Indicators to be used to monitor Program	Measures to be Used
<ul style="list-style-type: none"> <li>❑ Community resources that support families are accessed through the Student Support Team referral system</li> </ul>	<ul style="list-style-type: none"> <li>❑ Parent Satisfaction Survey is administered (see #11 in “Measures” column)</li> <li>❑ Number and types of community linkages               <ul style="list-style-type: none"> <li>– Gap identification</li> <li>– Provider satisfaction</li> </ul> </li> <li>❑ Learning Support Center established in each school               <ul style="list-style-type: none"> <li>– Available resources</li> <li>– Consumer number and type</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Fewer students are “labeled” as Seriously Emotionally Disturbed or needing special services out of school due to earlier assesment and intervention in-school</i></li> <li>❑ <i>Each school has a Learning Support Center with counselors, student learning workshops, and other support services for families and school staff</i></li> </ul>	<ol style="list-style-type: none"> <li>3. <i>Assessments of student needs result in appropriate intervention AND</i></li> <li>4. <i>Individual children with identification barriers to learning have action plans to place to support them at home at school</i></li> <li>5. <i>Fewer students are disruptive in school. Suspension rate for violent/disruptive offenses (as defined by team) are reduced by 20% by end of three year period.</i></li> <li>6. <i>More students are able to access services to overcome barriers to achieve success in school and other life domains</i></li> <li>7. <i>Number of students identified as SED in middle school is reduced by 20% over three year period</i></li> </ol>	

Somerset County School-Based Mental Health and Violence Prevention

Evaluation Matrix

Intervention Impact on Program and Systems

**Aim:** Promote and support restructuring of support services (including integration with instruction and management)

**Goal #2:** To create infrastructure that supports systemic change to create a true learning environment for children, school staff and families.

Expected Short-Term Outcomes	Formative (Process) Data	Expected Long Term Outcomes (after 3 years)	Specific Indicators to be used to monitor Program	Measures to be Used
<ul style="list-style-type: none"> <li>❑ <i>School Improvement Teams incorporate a new student support component motivates staff to think beyond academic programs to school climate change.</i></li> <li>❑ <i>Parents are involved in School Improvement Teams (SIT) as equal partners</i></li> <li>❑ <i>Resource Coordinating Councils at the "school family" and district levels are created to look systemically at how to coordinate, reallocate, and find new resources to support this initiative with input from school SITs.</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ School Improvement Teams incorporate Student Support Teams and address barriers to learning as part of their overall focus                             <ul style="list-style-type: none"> <li>– SITs are made aware of barriers to learning issues through training (frequency/ attendance)</li> <li>– Each SIT establishes a subgroup to focus on barriers to learning issues at each school</li> </ul> </li> <li>❑ Resource Coordinating Councils are created at both the "school family" and district levels                             <ul style="list-style-type: none"> <li>– Membership defined</li> <li>– Regular meetings documented</li> </ul> </li> <li>❑ Parent ambassadors link families to school and community</li> <li>❑ Parent support groups are organized and hosted by parent “ambassadors” (frequency and attendance)</li> <li>❑ Parents increase involvement in school                             <ul style="list-style-type: none"> <li>– Self-report measure at first contact with “ambassador” and at end of school year (mail survey)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Resource Coordinating Councils at both the "school family" and district levels will link all schools for children ages 5 -18 through recommending and overseeing resource sharing.</i></li> <li>❑ <i>The District Resource Coordinating Council will reallocate current funding for at-risk students to sustain the infrastructure established in this initiative as legally allowed by funding source.</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>In five-year intervals, school climate changes are tracked.</i></li> <li>❑ <i>By IT 2005, all schools are able to sustain infrastructure of Learning Support component.</i></li> <li>❑ <i>By FY 2005, District School System has reallocated 10% of funding for at-risk students to maintain the Learning Support Component.</i></li> <li>❑ <i>Families are active partners in school improvement efforts</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>School climate survey completed with staff, students and families (instrument TBD)</i> <ul style="list-style-type: none"> <li>– Effective School Battery/ Goddfredson</li> <li>– Classroom Environment Scale/ Trickett and Moos</li> <li>– UMD SBMH Instrument (info coming)</li> </ul> </li> <li><i>Baseline established in SY02. Survey conducted every five years</i></li> <li>❑ <i>Funding allocation tracked</i></li> <li>❑ <i>SIT parent representative satisfaction survey (see also Formative data)</i></li> </ul>

*Somerset County School-Based Mental Health and Violence Prevention*  
**Evaluation Matrix**  
**Intervention Impact on Students**

**Aim:** Prevent and correct emotional, behavior, learning and health problems as barriers to learning

**Goal #3:** To implement prevention/early intervention programs that effectively help students build resiliency assets to have healthier lives and remove barriers to learning.

<b>Expected Short-Term Outcomes</b>	<b>Formative (Process) Data</b>	<b>Expected Long Term Outcomes (after 3 years)</b>	<b>Specific Indicators to be used to monitor Program</b>	<b>Measures to be Used</b>
<ul style="list-style-type: none"> <li>❑ <i>Current prevention programs are reviewed for consistent delivery and fidelity to program guidelines</i></li> <li>❑ <i>Needs assessment is done to evaluate gaps in prevention curricula programs</i></li> <li>❑ <i>Research-based prevention programs are introduced into schools and implemented under the direction of a school-based Prevention Coordinator</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Completion of current prevention program matrix (school-based)</i></li> <li>❑ <i>Evaluative report of current program implementation</i> <ul style="list-style-type: none"> <li>– <i>Participants</i></li> <li>– <i>student/parent satisfaction</i></li> <li>– <i>fidelity to program curriculum/guidelines</i></li> </ul> </li> <li>❑ <i>Report recommending programs(s) to fill prevention program gaps which are proven or promising practices.</i></li> <li>❑ <i>Completion of program improvement/ implementation plan.</i></li> <li>❑ <i>Plan reviewed and approved by Steering Committee</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Current prevention programs are better presented with fidelity to guidelines with additional staff training, and more classroom time allowed to present universally.</i></li> <li>❑ <i>Learning Support Centers become utilized by students and staff for individualized intervention and support through counseling services, peer mediation, and life skills training</i></li> </ul>	<ol style="list-style-type: none"> <li>1. <i>At risk behaviors for violence and substance abuse are reduced by 10% in three-year period as assessed by Maryland Adolescent Survey.</i></li> <li>2. <i>Class cutting rate reduced by 20% over three year period</i></li> <li>3. <i>Attendance is rated as satisfactory at all district schools as defined by the MSDE School Performance Report</i></li> <li>4. <i>75% of program participants/students self-report better knowledge of positive life skills such as problem solving, goal</i></li> </ol>	<ul style="list-style-type: none"> <li>❑ <i>Maryland Adolescent Survey</i></li> <li>❑ <i>Youth Tobacco Survey</i></li> <li>❑ <i>Class cutting records (Ask Rene - how are these kept now???)</i></li> <li>❑ <i>Attendance rates/ by school/ annually</i></li> <li>❑ <i>Pre-/Post- survey of prevention program participants (TBD by program)</i></li> </ul>

Expected Short-Term Outcomes	Formative (Process) Data	Expected Long Term Outcomes (after 3 years)	Specific Indicators to be used to monitor Program	Measures to be Used
			<p>5. Ratings/behavior change by staff (at referral and end of SY)</p> <p>6. Ratings/behavior change by student (at referral and end of SY)</p> <p>7. Ratings/behavior change by family (at referrals and end of SY)</p> <p>8. Parents are satisfied with school and community programs and services designed to enhance family functioning and provide assistance</p> <p>9. Establishment of Learning Support Centers in each school by end of three years.</p>	<ul style="list-style-type: none"> <li>❑ Teacher Input Form/Follow Up Rating Form (UCLA? – or repeat of Input Form)</li> <li>❑ Student’s View of Problem (UCLA) / Follow Up Rating Form (UCLA? – or repeat of Student’s View of Problem)</li> <li>❑ Parent Guardian questionnaire/Follow Up Rating Form (UCLA? – or repeat of Questionnaire)</li> <li>❑ Parent satisfaction survey at close of intervention (also survey teachers, students, and providers re: process of LST assessment and referral)</li> <li>❑ See Formative (Process) Data</li> </ul>

*Somerset County School-Based Mental Health and Violence Prevention*  
**Evaluation Matrix**  
**Intervention Impact on Families and Communities**

**Aim:** Promotion of positive family development and functioning

**Goal #5:** To increase parent involvement in child's learning at home and school.

<b>Expected Short-Term Outcomes</b>	<b>Formative (Process) Data</b>	<b>Expected Long Term Outcomes (after 3 years)</b>	<b>Specific Indicators to be used to monitor Program</b>	<b>Measures to be Used</b>
<ul style="list-style-type: none"> <li>❑ <i>Parent education classes are provided for parents of infants to teens</i></li> <li>❑ <i>Ten parenting session are presented annually with a variety of curricula to address different learning styles and needs.</i></li> <li>❑ <i>150 parents per year will participate in parent support programs</i></li> <li>❑ <i>Schools refer families to parent education classes</i></li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Parent education curriculums identified for different learning styles, cultural diversity and age groups (both child age and parent age groups/ i.e. teen parents)</i></li> <li>❑ <i>Parent education class schedule set. Outreach materials produced</i></li> <li>❑ <i>Parent education classes held</i> <ul style="list-style-type: none"> <li>- attendance</li> <li>- Pre/post knowledge assessment</li> </ul> </li> <li>❑ <i>Parent "ambassadors" (2) are trained to link families with schools and community resources</i></li> <li>❑ <i>Staff training plan</i> <ul style="list-style-type: none"> <li>- Pre/post knowledge surveys</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>❑ <i>Family ability to reduce child risk factors that can be barriers to learning is increased.</i></li> <li>❑ <i>Parents are involved in supporting their children's learning</i></li> <li>❑ <i>Children have positive support for healthy psycho-social development in their families</i></li> <li>❑ <i>Schools actively promote parent education programs as they value the positive attitudinal change in family relationships with school</i></li> </ul>	<ol style="list-style-type: none"> <li>1. <i>80% of families who participate in the Parent Support Programs will learn how to use encouragement to foster positive behavior in their children</i></li> <li>2. <i>60% of families that participate in Parent Support programs will re-structure their homes as "school- smart homes" as defined by Parents on Board curricula.</i></li> <li>3. <i>50% of participants are referred by schools</i></li> </ol>	<ul style="list-style-type: none"> <li>❑ <i>Pre/post self report by program participants according to program curriculums</i> <ul style="list-style-type: none"> <li>- At point of first contact with Parent Support Program</li> <li>- Six month follow-up (mail survey)</li> </ul> </li> <li>❑ <i>Follow-up reports from SST care managers after referred families attend sessions</i></li> <li>❑ <i>Referrals source is tracked</i></li> </ul>

Expected Short-Term Outcomes	Formative (Process) Data	Expected Long Term Outcomes (after 3 years)	Specific Indicators to be used to monitor Program	Measures to be Used
	<ul style="list-style-type: none"> <li>– Funding analysis/report completed</li> <li>– Resource sharing framework designed with ongoing monitoring</li> <li>□ Parent representatives are actively involved in School Improvement Teams (membership/meeting attendance)</li> <li>□ Teacher training in student learning support structure, process and outcomes (frequency/attendance)</li> </ul>			

**Learning Support District Coordinator**  
**Somerset County Public Schools**  
**Job Specifications**

**Summary of Description of Classification**

The Learning Support District Coordinator will build the capacity of the Public School System to establish and sustain a Learning Support Component to support the healthy development of children and establish safe and nurturing learning environments for academic success.

**Job Goal**

To establish and facilitate the management of a Learning Support Component at the district level and to promote the coordination of resources within the county school system for sustainability.

**Requirements**

**A. Educational Requirements**

LCSW-C (preferred) or Masters in Social Work or equivalent human services degree with two years work experience with children and families.

**B. Knowledge & Requirements**

1. Knowledge of the principles and practices of child development - understanding of ages and stages of behavioral and learning ability.
2. Knowledge of the principles and practices of mental health counseling and family support; with experience in care management with families.
3. Knowledge of educational systems - organizational and operational structures.
4. Ability to think systemically and understand change processes in institutional setting.
5. Ability to assume a leadership role within an educational system.
6. Ability to communicate effectively with and to gain the confidence and cooperation of students, parents, the school staff and community resource people including medical personnel.

**C. Duties**

1. Responsible for the day-to-day operation of the Learning Support Component established under the school-based mental health and violence prevention project for Somerset County. The Coordinator will be the administrative lead on the Multi-Agency Project Team and District Learning Support Resource Coordinating Council.
2. Coordinates the Student Support Team (SST) process & procedures at the district level to insure consistency and compliance with established standards across all schools. Provides clinical supervision for two lower level personnel who are the SST Site Coordinators in the schools.
3. Provides information, referral and follow-up to families & children as the specialized care coordinator to the Student Support Teams. The anticipated caseload will not exceed seven families at any given time.
4. Provides outreach to parents on the district level to insure optimum participation and provides needed support to families. Provides education on the SST process and the healthy development of children to parents and school staff. Solicits parents' input in developing policies and procedures.
5. Works with the school staff in developing in-school interventions. Evaluates and recommends training for staff development to increase the capacity within the school to implement creative interventions in the classroom that will lessen disruption of the learning environment.
6. Establishes relationships and works collaboratively with service providers and is thoroughly knowledgeable about resources available in the area. Insures confidentiality agreements are established with community services providers and collaborating agencies.
7. Facilitates a district resource council for the Learning Support Component to promote communication with school administrators and optimum use of resources.
8. Responsible for the collection and maintenance of any statistical data deemed necessary by project evaluator.
9. Expected to be an integral member of the District Crisis Intervention Team to mediate/intervene as necessary in case of an emergency.

**Learning Support Site Coordinator**  
**Somerset County Public Schools**  
**Job Specifications**

**Summary of Description of Classification**

The Learning Support Site Coordinator, through their work on the Student Support Teams and the School Improvement Teams, promotes the healthy development of children and a safe and nurturing learning environment in the Public Schools.

**Job Goal**

To facilitate and manage the Learning Support Component at individual school sites and to promote the coordination of resources within a regional family of schools for maximum efficiency.

**Requirements**

**A. Educational Requirements**

Bachelors in Social Work or equivalent human services degree with two years work experience with children and families.

**B. Knowledge & Requirements**

1. Knowledge of the principles and practices of child development - understanding of ages and stages of behavior and learning ability.
2. Knowledge of the principles and practices of mental health counseling and family support work with experience in care management with families.
3. Knowledge of educational systems - organizational and operational structures. Previous knowledge or work with Student Support Teams a plus.
4. Ability to assume a leadership role within an educational system.
5. Ability to communicate effectively with and to gain the confidence and cooperation of students, parents, the school staff and community resource people including medical personnel.
6. Ability to do screening assessments and make referrals for assistance and/or treatment.

**C. Duties**

1. Coordinates the Student Support Teams (SST) at multiple school sites. Provides information, referral and follow-up to families & children as care coordinator on the Student Support Teams. Insures a general screening assessment is completed and a plan of action developed for each child referred to team. The anticipated caseload will not exceed 15 families at any given time.
2. Provides outreach to parents to insure optimum participation and provides needed support to families. Provides education on the process, solicits the families' input, and gives assistance in accessing any services recommended by the SST.
3. Works with the school staff in developing in-school interventions. Evaluates and recommends training for staff development to implement creative interventions in the classroom that will lessen disruption of the learning environment. Participates on School Improvement Teams to promote discussion of ways the schools can become safe and nurturing learning environments.
4. Establishes relationships and works collaboratively with service providers and is thoroughly knowledgeable about resources available in the area.
5. Will assist in developing forms to be used district-wide for Student Support Teams; will insure case files are maintained, updated, and readily available to program evaluators.
6. Facilitates a regional resource council for the Learning Support Component to promote communication between schools and optimum use of resources.