

MEMORANDUM

March 23, 2021

TO: Health and Human Services (HHS) Committee
Education & Culture (E&C) Committee

FROM: Vivian Yao, Legislative Analyst

SUBJECT: Strategic planning for school-based mental health and support services

PURPOSE: Receive information about efforts to provide mental health and support services to schools during the pandemic and discuss criteria and options for expansion of these services

Those expected to participate in the worksession include:

- JoAnn Barnes, Chief, Children Youth and Family Services, Department of Health and Human Services (DHHS)
- Rolando Santiago, Chief Behavioral Health and Crisis Services, DHHS
- Monica Martin, Senior Administrator, Child and Adolescent School and Community-Based Services, DHHS
- Kirsten Anderson, Administrator, Linkages to Learning, DHHS
- Ruschelle Reuben, Associate Superintendent, Office of Student and Family Support and Engagement (OSFSE), Montgomery County Public Schools (MCPS)
- Karen Stratman, Chief of Staff, MCPS

Additional OSFSE representatives are expected to attend the discussion including Karen Crews, Steve Neff, and Stephanie Iszard.

BACKGROUND

Councilmembers have long expressed interest in expanding school-based mental health and social support services. During discussions of the FY21-26 Capital Improvements Program, Joint Committee members indicated an interest in seeing a more aggressive approach to expanding access to Linkages to Learning and other school-based services, including a systematic plan to expand services to all students and the development of programmatic options that leverage and realign existing services and capacity efficiently.

More recently, the COVID-19 pandemic has intensified the need for these services. The pandemic disproportionately affected lower-income and diverse communities, exacerbating existing disparities in access to health care access and basic needs. The Council responded to

these needs by appropriating the following funding to DHHS: \$565,706 for family strengthening and intervention program, \$312,455 for therapeutic recreation services, and \$250,000 for increased mental health services for students. Council staff understands that the Executive has recommended continuing this funding for FY22.

In addition, the interest in expanding youth mental health services has been raised in the context of changes being considered to the School Resource Officer program. Councilmembers Jawando and Riemer sponsored Bill 46-20, which would prohibit Montgomery County Police Department from deploying school resource officers in schools, and recommended investment in mental health and restorative justice efforts. See November 21 memorandum from Councilmembers Jawando and Riemer to Council (©1-2). Councilmember Navarro subsequently circulated a proposed amendment to Bill 46-20 to move SROs out of school facilities into a cluster model and enhance school-based services and positive youth development and mental health supports. See March 21 memorandum from Councilmember Navarro to the chairs of the Public Safety and E&C Committees. In addition, there has been interest by a number of Councilmembers to add social worker services at all high schools.

DHHS and MCPS will present to the Joint Committee on recent efforts to address the behavioral health needs of students and coordinate the delivery and expansion of these services. Presentation slides that have been made available to the Joint Committee are attached at ©8-16 and the March 17 Memo to Councilmembers Alborno and Navarro from the Chief Administrative Office summarizing efforts by DHHS and MCPS to address the needs of vulnerable students and families is attached at ©17-22.

DATA ON YOUTH BEHAVIORAL NEEDS

Included in the packet is excerpted trend data from the Maryland High School Youth Risk Behavioral Survey 2018 Trend Report for Montgomery County at ©25-36. The report shows that pre-pandemic, the percentage of high school students who felt sad or hopeless¹ increased from 26.9% in 2013 to 31.5% in 2018. In addition, 16.7% of high school students surveyed in 2018 seriously considered attempting suicide (during the 12 months before the survey), and 13.8% made a plan about how they would attempt suicide (during the 12 months before the survey).

For middle school students the percentage of students who ever seriously thought about killing themselves rose from 15.5% in 2014 to 20.5% in 2018. The percentage of middle school students who felt sad or hopeless was 20.5% in 2018, and 13.4% made a plan about how they would kill themselves.

Also attached to the packet at ©37-38 is the DHHS School Referral Report, which shows trend data for school referrals for crisis services by school type, gender, race, referral reason, and Mobile Crisis Team (MCT) visits to schools. Given that students were learning virtually for much of the FY21 school year and the last quarter of FY20, it is not surprising that crisis referrals were much lower in FY20 and FY21 to date.

¹ Students responded affirmatively if they felt sad or hopeless almost every day for ≥ 2 weeks in a row so that they stopped doing some usual activities, ever during the 12 months before the survey.

	FY21 to date	FY20	FY19	FY18
Total Referrals	150	1169	1,954	1,804

Council staff surmises that trend data which more accurately shows the need for mental health and crisis services as a result of the pandemic will be available after students return to the school building and in future iterations of the YRBS report. All accounts from providers who work with youth speak to the increased demand for these services.

PANDEMIC PRIORITIES AND DHHS-MCPS RESPONSE

Information provided by DHHS and MCPS at ©8-16 summarizes the priorities and work of the two agencies during the pandemic. Some of the highlights include the following:

- **Food Security/basic needs:** Increased food distribution through Linkages to Learning and Positive Youth Development (PYD and at MCPS sites).
- **Engagement:**
 - Teacher referrals
 - Data collection from MCPS to identify and monitor students needing support and issues.
 - Partnership with DHHS PYD
 - Initiatives and partnerships including BTheOne.org (teen suicide and substance abuse prevention); MCPS Be Well 365; MCPS Virtual Town Halls, community conversations, (LGBTQ+ support, mental health and substance abuse awareness), MCPS Stay Connected, MCPS Ask OSFSE online referral system.
- **Assessment and identification of students/families in need of additional support:** PYD and Child and Adolescent School & Community-based Services (CASCBS) have worked closely with OSFSE to provide services to students who have been identified by local school wellness teams as experiencing chronic levels of complex trauma.
- **Responding to critical mental health needs:**
 - Expansion of School & Community-Based Youth Services and Child and Adolescent Behavioral Health Services through special appropriation.
 - Increase in mental health therapists and whole family trauma support by Linkages and community school family engagement activities through Blueprint for Maryland’s Future (Kirwan) funding.
 - LTL/SCYS therapists partnering with MCPS to provide support to school staff/administrators who have experienced vicarious or direct trauma.
 - Planning the use of therapeutic recreation funds with community-based providers and High School Wellness Centers.
 - Deployment of existing DHHS crisis services including the 24/7 telephone consultation, walk-in crisis assessments, Mobile Crisis Team support, Care and Connections for Children and Families Program.

- Ongoing support from MCPS OSFSE and Office of Teaching, Learning, and Schools including Parent Academy workshops, videos, and parent chats; Neediest Kids basic needs support; Families Helping Families gift card campaign; trauma informed supports and acculturation supports for international admissions and enrollment.
- MCPS waymaking video series on mental health, social emotional functioning, and community resources and supports.
- MCPS provision of student and family supports including Student Well-being Teams (triage and problem-solve student mental health, social emotional, learning, or engagement needs); individual and family therapy in 10 high-needs schools lacking community mental health services through Jewish Social Services Agency; psychoeducational lessons; Signs of Suicide Prevention Program, and Personal Body Safety Lessons.

BI-AGENCY PLANNING AND LINKAGES TO LEARNING ADVISORY GROUP PRIORITIES

FY22-FY24 Linkages to Learning Strategic Plan

Council staff understands that the Linkages Advisory Group met prior to the pandemic to discuss recommendations for the FY22-FY24 Strategic Plan. The Advisory Group developed the following priorities for the program:

- Develop an updated, more flexible model of staffing and services across sites to better address local school needs, expand impact and maintain local expertise. These changes would be implemented with the execution of the FY23 LTL contracts.
- Increase funding to ensure and expand impact by updating the logic model, data collection and evaluation protocols to better measure collective impact to current funders and potential investors.
- Ensure and expand provision of equitable services throughout the County by expanding equity training across the Linkages partnership using MCDHHS Equity Principals and Standards; aligning with the MCPS Equity and Achievement Framework to support work in addressing disparities in student outcomes, and incorporate MCPS Equity Accountability Model data in decision-making on allocation of new LTL resources and community to be served.

Expansion Criteria and Priorities

The presentation to the Joint Committee describes the recommended criteria for expansion of mental health services on ©10/slide 3 and for the expansion of family and community supports on ©11/slide 4:

For mental health expansion, the recommended indicators for expansion by school are:

- **Economic Stability/Food Insecurity/Poverty:**
 - % students eligible for FARMS
 - number of students eligible for FARMS
- **Education Access & Quality/High School Graduation:**
 - For secondary schools:
 - Attendance Rate
 - Suspension Rate
- **Health Care Access & Quality:**
 - Referral to the Crisis Center (School-specific proxy for mental health, substance abuse and suicide ER visit/hospitalization rates)
 - COVID penetration and mortality rates

For expansion of Family and Community Supports, the recommended indicators for expansion by school are:

- **Economic Stability/Food Insecurity/Poverty:**
 - % students eligible for FARMS
 - number of students eligible for FARMS
- **Education/High School Graduation/Early Childhood Education & Development/Language & Literacy:**
 - MCPS Equity Accountability Model
 - % ESOL
 - Attendance Rate for secondary schools
- **Health & Health Care/Access to Health Care:**
 - Health room utilization rate
 - Care for Kids Enrollment
 - COVID penetration and mortality rates

Bi-Agency Planning Group Tiered Priorities

The Bi-Agency Planning Group’s Tiered Priorities for expansion are provided on ©15/slide 8 and include the following:

1. **Schools where the highest indicators for all types of support exist** including Linkages to Learning at elementary and middle schools and High School Wellness Centers.
2. **If space does not exist to supports these sites, then provide access to services.**
 - a. **Mental health support** at schools with highest indicators for mental health need.
 - b. **Access to closest Cluster Project** at schools with highest indicators for family social services & community support needs only.

BEHAVIORAL HEALTH RESTORATIVE MODEL AS AN ALTERNATIVE TO SCHOOL RESOURCE OFFICERS (SROs)

In response to interest from Councilmembers to invest in behavioral health and restorative justice efforts in conjunction with potential changes to the SRO program, DHHS has developed a concept paper that outlines a Behavioral Restorative Model (BRM) that builds on MCPS restorative justice practices. See ©23-24.

The model incorporates existing School Well-Being Teams (SWBTs), trained in behavioral health interventions, to build a restorative justice component. This component will deploy trained restorative justice practitioners, including principals and teachers, to implement restorative justice practices across MCPS schools. These practitioners will be authorized to act by school leadership to deal with disciplinary incidents and prevent violence by holding student perpetrators accountable to student victims and the school community for their actions. The concept indicates that a fiscal analysis would assess any additional appropriation needed to support this effort.

In addition, the BRM contemplates the use of social workers and therapists with training in behavioral health and case management practices, navigation and referrals, social determinants of health, and family interventions to address the behavioral health needs and substance use of students in grade K-12. These practitioners will also make referrals to specialized child and youth crisis intervention teams in the community and cultivate and expand partnerships that MCPS has with DHHS Support programs like Positive Youth Development and other community-based behavioral health programs.

The Concept paper outlines the following next steps:

- Creation of a community advisory group consisting of parents, students, school personnel, community providers, and experts in behavioral health, restorative justice, crisis intervention and student wellness, to guide the development of the BRM.
- Create an executive committee of MCPS, DHHS, Police Department, and community partners to implement the BRM as soon as a decision is made on the SRO program.
- Identify a flexible BRM implementation plan that prioritizes high schools.
- Develop a timeline for implementation that includes a phase-in of the new model and phase out of the old model within a three-year period.

ISSUES FOR DISCUSSION AND FOLLOW UP

The Joint Committee may want to seek further information from DHHS and MCPS about the following:

- **Changes in expansion criteria:**

- Linkages expansion is currently based on a school's percentage of students who have ever received FARMS. How will the change to percentage FARMS and additional criteria including the number of FARMS students result in a more equitable distribution of resources?
 - How will each criterion for Mental Health and for Family & Community Supports be weighted?
 - Is there any idea how these criteria would change the order of schools who would receive additional services? See also excerpted list of schools ranked by FARMS and EverFARMS for School Year 2020-2021 at ©39-43.
 - Why is the MCPS Equity Accountability Model only being considered in terms of Family and Community Supports and not Expanded Mental Health?
- **Alternative Indicators:**
 - Are there any better indicators for high school graduation than attendance and suspension rates given MCPS' efforts and success in reducing the number of suspensions in recent years? Could office referrals, chronic absenteeism, or habitual truancy be other possible metrics?
- **Updated Models:**
 - Why is a more flexible model of staffing and services needed for Linkages? Will the changes result in a more equitable or efficient distribution of resources? Will all the core functions of each Linkages site-based team remain intact at each school? When will the report for re-allocation of staff and resources at Linkages schools be completed?
 - The percentage of FARMS eligible students (see ©39-43) at Linkages to Learning schools have changed, in some cases, substantially, over the years. Differences between the relative need at current Linkages schools may also be more apparent with the change from the % EverFARMS indicator to the % and number of FARMS indicators.

Has the Linkages Advisory Group considered whether to reduce or withdraw services at schools that have much lower need in order to serve schools that have great need?
 - Slide 8 references an updated Linkages middle school model and an updated Cluster model. What changes are being considered to these models?

- **Aligning Initiatives:** DHHS and MCPS have begun new initiatives to support student well-being. To what extent are these efforts coordinated? How are the agencies ensuring that all partners are working collaboratively to achieve common goals at the school level?
- **Expansion/budget considerations:**
 - To what extent does funding from non-County sources impact local funding and expansion decisions? For examples, the Governor’s FY22 Budget includes Blueprint for Maryland’s Future (Kirwan) funding, including a total of \$4,727,828 in grants for 19 MCPS schools.² Would this funding support increasing local investment to schools that do not have Linkages program in order to provide more comprehensive services or would it support reducing the amount of local funding to be invested at those sites in order to spread services across more schools?
 - What is the relative priority for investing in the proposed Behavioral Restorative Model and social workers/therapists at high schools compared to other school-based services?
 - How will the changes in expansion criteria impact the current recommendations in the HHS CIP for school-based programs? How should the MCPS construction schedule impact the priority order of school-based service expansion? What is the plan for funding/opening the Seneca Valley High School Wellness Center, which is scheduled for completion this year?
 - **If the Joint Committee is interested in expanding school-based services in FY22, it should request that DHHS provide a priority ranked school list for mental health and family and community support services using the identified criteria prior to the Joint Committee’s deliberation of the DHHS budget in April. In addition, the Joint Committee should request that MCPS provide any data needed to complete the analysis.**

² The FY22 Concentration of Poverty Grants would provide \$248,833 for each of the following elementary schools: Arcola, Leleck (Broad Acres), Capt. James E. Daly, Gaithersburg, Georgian Forest, Harmony Hills, Highland, Jackson Road, Kemp Mill, New Hampshire Estates, Oak View, R. Sargent Shriver, Rolling Terrace, South Lake, Summit Hall, Watkins Mill, Weller Road, Wheaton Woods, and Whetstone.

The packet contains the following attachments:

	<u>Circle #</u>
November 12 Memo to Council from Councilmembers Jawando and Riemer	©1-2
March 21 Memo to Public Safety and E&C Committee Chairs from Councilmember Navarro	©3-7
March 24 DHHS-MCPS Presentation: School-Based Mental Health and Support Services: Priorities and Preliminary Recommendations	©8-16
March 17 Memo to Councilmembers Albornoz and Navarro from the CAO	©17-22
DHHS Concept Paper on Behavioral Restorative Model as an Alternative to SROs	©23-24
Data compiled from the Maryland YRBS Trend Report for Montgomery County	©25-36
FY21 DHHS School Referral Report	©37-38
School Year 2020-2021 FARMS and Ever FARMS School List	©39-42
CM Glass Memo to CE - SROs and Mental Health	©43-44



MONTGOMERY COUNTY COUNCIL
ROCKVILLE, MARYLAND

WILL JAWANDO
COUNCILMEMBER
AT-LARGE

MEMORANDUM

TO: Montgomery County Council
FROM: Will Jawando and Hans Riemer, Councilmembers
DATE: November 12, 2020
SUBJECT: Removing SRO's from MCPS and Special Appropriations

Today Montgomery County has a police officer in every high school and several middle schools. At the same time, our counselor-to-student ratios lag far behind other school systems both in the region and nationally. Over time, our county government has chosen to prioritize funding of police in schools who can quickly make arrests, instead of professionals and services that can assist our students with non-law enforcement-based interventions and mental health or wellbeing.

Over the past four years, almost half of all student arrests were of Black children, a cohort that is one-fifth of the student body.¹ These disparities raise serious concerns about the school-to-prison pipeline. In fact there are broad disparities in how students are treated once they enter the criminal justice system. Black students are nearly 20 times more likely to be held by the Department of Juvenile Services for pretrial detainment for misdemeanor offenses than their white peers.² Black students are 85% less likely to be referred for Screening and Assessment Services for Children and Adolescents (SASCA) Diversion Programs for substance abuse and mental health.³ Black students are 320% more likely to be incarcerated at the conclusion of their trial than white students.⁴

While we know our SRO's are good people doing the job they have been assigned, there are better research-based approaches to resolving disciplinary problems and more effective ways to use precious county resources. School counselors, nurses, therapists, and security guards are better equipped to help students deal with the challenges that today may result in arrests. We should address behavioral problems early through guidance, mental health support, and restorative justice techniques rather than criminalizing adolescent mistakes.

School discipline begins with the teacher, ensuring that all teachers are properly trained in mediating conflicts. Students are another key factor: ensuring that students take steps to atone for the harm they have caused has been correlated with lower suspension and expulsion rates and with students feeling

¹ Statistic derived from previous 4 years of Maryland Department of Education Public School Arrest Data reports. These reports indicate that from SY 2015-2016 through SY 2018-2019, 475 of the 1042 students arrested on MCPS property were Black.

² Statistic is derived from Table 5.24 of the 2016-6 OLO School to Prison Pipeline Report, page 72

³ Statistic is derived from Table on page ii of 2016-6 OLO School to Prison Pipeline Report.

⁴ Statistic is derived from Table 5.27 of the 2016-6 OLO School to Prison Pipeline Report, page 73

safer in the school community. Principals and other administrators are also a key component, as they frequently request arrests or police intervention as a means of resolving disciplinary problems. Training all employees in MCPS in restorative justice and other practices to ensure equitable discipline from the classroom up through the administration is essential to reducing disparities and ensuring better outcomes for all students. That is one of the key goals of our appropriations.

The package of appropriations and legislation we are introducing today will invest in mental health professionals and restorative justice while prohibiting the Montgomery County Police Department (MCPD) from placing SROs in school buildings. The discontinuation of the SRO program would achieve approximately \$3 million in annual cost savings in future fiscal years. We are not suggesting firing these officers, rather they should be moved to other unfilled positions within MCPD.

Beginning next year, the \$3 million in savings would be allocated to 3 separate programs that will better address the needs of students: 1) Providing funding for an after school student service hub model to reduce risk factors for students through the Montgomery County Collaboration Council (\$406,000), 2) Providing recreational therapeutic group activities for students through HHS (\$312,455), and 3) Providing funding for restorative justice training for MCPS educators and staff (\$750,000). Our goal is to provide at least some funding before the end of the fiscal year. Next year when we begin to work through the budget, we need to take a closer look at the counseling and therapy needs for students and look at addressing mental health professional ratios. It is necessary to begin to address these mental health challenges as soon as possible. Thank you for your careful consideration of these proposals.



MONTGOMERY COUNTY COUNCIL

ROCKVILLE, MARYLAND

**COUNCILMEMBER NANCY NAVARRO
DISTRICT 4**

**CHAIR, GOVERNMENT OPERATIONS AND
FISCAL POLICY COMMITTEE**

EDUCATION AND CULTURE COMMITTEE

MEMORANDUM

Mar 23, 21, 10:50 AM

TO: Sidney Katz, Chair, Public Safety Committee
Craig Rice, Chair, Education and Culture Committee

FROM: Nancy Navarro, Chair, Government Operations & Fiscal Policy Committee

SUBJECT: Proposed amendment to bills on School Resource Officers

The Public Safety (PS) Committee and the Education (E&S) Committee will be holding a joint session on two bills that address the future of School Resource Officers (SROs) in Montgomery County Public Schools (MCPS). [Bill 46-20](#), *School Resources Officers – Prohibited* (introduced by lead sponsors Will Jawando and Hans Riemer on November 17, 2020, with a public hearing held on February 4, 2021), would prohibit the Montgomery County Police Department from deploying school resource officers in schools. [Bill 7-21](#), *Police – School Resource Officer – Building Positive Law Enforcement Relationships Within Schools* (introduced by lead sponsors Craig Rice and Sidney Katz on February 2, 2021, with public hearing scheduled for March 4, 2021), would authorize the Chief of Police to assign a law enforcement officer to work as a school resource officer in a County school upon the request of the Superintendent of Schools, with a requirement for enhanced training for a school resource officer.

It is appropriate that the PS/EC joint committee session is taking up both bills at the same time. This approach allows the Council ultimately to take a holistic approach. It affirms the fact that we all have a shared interest – how to focus on our students’ mental and emotional well-being without compromising their physical safety as our parents and students expect, and as mandated by state law.

After listening to the community, especially our youth, studying both bills and related proposals in the General Assembly, the reports of the Reimagining Safety Task Force workgroup as well as the school system’s workgroup, I am proposing a model that eliminates the current SRO model, de-emphasizes a law enforcement focus within our schools and instead focuses on the mentoring and mental health needs

of students. However, it includes a Public Safety cluster model comprised of Police Officers, mental health professionals and Positive Youth Development staff. This approach Patterned after the Kennedy Cluster model which I worked on and helped implement in 2007 when I was President of the Board of Education, this model would incorporate multi-agency and interdepartmental collaboration, Positive Youth Development (PYD) initiatives, and mental health support that our County has previously invested in, and that can be strengthened with nationally recognized programs.

On February 5th, I sent a memorandum to County Executive Marc Elrich, outlining my alternative option to the physical presence of SROs in schools (attached). I have since met with the County Executive, the Police Chief, the leadership of the department of Health and Human Services, and MCPS to make sure that this approach can be implemented. I am pleased with their feedback and their proactive work in this space. The County Executive has shared his proposed cluster model with me, and I look forward to us working with him as a team to stand up a policy and an instrument that have the teeth and compassion to support and protect our students.

My amendment to the proposed bills is attached. For purposes of the joint committee's work, I have chosen to amend Bill 46-20 with this team model and incorporate training for the team members with the requirements in Bill 7-21. The result is a new structure that addresses all the concerns I have heard, and that is also consistent with the research findings and recommendations of the Office of Legislative Oversight. In summary, under the umbrella of Racial Equity and Social Justice, my proposed amendment:

- Creates a team that resides outside the schools and moves SROs out of school facilities and into a “cluster” model.
- Includes PYD initiatives and mental health supports in the “cluster” model with appropriate training for team members.
- Defines and restricts the offenses for which school personnel can call the law enforcement team.
- Enhances school-based services and student-centered supports (pupil personnel workers, counselors, Parent Community Coordinators, Street Outreach Network, Wellness centers, Linkages to Learning, and other student-centered programs). In addition, there should be an awareness program for school personnel to make sure they are informed of the availability of student support services, so they may promote prevention.

In closing I would like to sincerely thank Councilmembers Jawando, Rice, Riemer, Katz and County Executive Elrich for all their work on this issue. I appreciate their commitment to racial equity and social justice, and a truly re-imagined public safety structure. We have an opportunity here to provide the appropriate leadership as a team and rally behind the joint committee as it puts forward a recommendation to the full council.

Copy to:

Members of the County Council
Marc Elrich, County Executive
Brenda Wolff, President, Montgomery County Board of Education
Jack Smith, Superintendent of Schools
Raymond Crowel, Director, Health and Human Services
Marcus Jones, Chief of Police

Attachment

Bill 46-20 - Navarro Amendment 1

Amend lines 23-30 as follows:

- (8) Montgomery County Public Schools fall well short of the student to mental health and counseling staff ratios recommended by the National Association of School Psychologists and the American School Counselor Association; [[and]]
- (9) students of color would benefit from more opportunity to speak with therapists, nurses, and school psychologists with diverse backgrounds who can speak to the challenges they are facing; and
- (10) Montgomery County Public Schools must enhance mental health and counseling support for students.

Add the following after line 40:

- (d) Local law enforcement coverage program for public schools. The Executive must establish a local law enforcement coverage program for each public school that incorporates positive youth development principles while prioritizing safety through the use of multidisciplinary school teams that are not based in a school. The Chief of Police must assign police officers to different geographic areas to work on a school team with mental health professionals and counselors assigned by the Director of Health and Human Services. Each member of the school team must receive training on:
 - (1) de-escalation techniques;
 - (2) mediation and conflict resolution;
 - (3) childhood and adolescent development;
 - (4) alcohol/drug response;
 - (5) gang prevention and response;
 - (6) truancy prevention;
 - (7) child abuse and neglect;

- (8) culturally competent community engagement and outreach;
 - (9) emergency preparedness and response to critical incidents;
 - (10) threat assessment;
 - (11) mental health triage and crisis intervention;
 - (12) trauma-informed response practices;
 - (13) restorative justice;
 - (14) physical and developmental disability awareness; and
 - (16) mentoring.
- (e) Memorandum of Understanding. The Executive must negotiate a memorandum of understanding (MOU) with the Superintendent of Schools establishing guidelines for the operation of the school teams established under subsection (d). The MOU must:
- (1) include a comprehensive data sharing agreement between the Police Department and the Montgomery County Public Schools; and
 - (2) define the type of issues that:
 - (A) should result in a call for law enforcement assistance; and
 - (B) should be handled as a school discipline matter instead of a call for law enforcement assistance.
- (f) Reporting. The Chief of Police, after consulting with the Superintendent of Schools, must submit an annual written report to the Executive and the Council on or about July 15 of each year that includes:
- (1) the number and discipline of personnel assigned to each school team during the school year;
 - (2) the number of calls for law enforcement assistance for each school during the school year;
 - (3) the number of arrests of a student at each school broken down by race, gender, ethnicity, and disability during the school year;
 - (4) a description of each incident that resulted in an arrest of a student;

- (5) recommendations for improvements in the program; and
- (6) any other metrics that can be used to measure success of the program.

F:\LAW\BILLS\2046 Police - School Resource Officers - Prohibited\Navarro Amendment 1 For Bill 46-20 V3.Docx

School-Based Mental Health and Support Services: Priorities and Preliminary Recommendations

Joint HHS and E&C Committee Meeting

3/24/21

Pandemic Priorities & DHHS-MCPS Response

- Food security/basic needs
 - Increased food distributions via Linkages to Learning & Positive Youth Development
- Engagement
 - Referrals from teachers
 - MCPS Collected data from all schools (and whether issue resolved)
 - Large percentage of disengaged students are in high school and are Latinx – partnership with DHHS Positive Youth Development
- Ongoing assessment and identification of students/families in need of additional support
- Adding more mental health therapists and whole family trauma support/programming to Linkages sites with Kirwan funding
- Child/Adolescent School & Community-Based Services oversaw Testing Coordination Team
 - Cluster Projects took referrals from Contact Tracing/other public health entry points

Social Determinants of Health Guide Decision-Making

Short-Term (~ 1 year) Indicators of Success

- Improved psychosocial functioning of students engaged in new mental health services (per clinical scales)

Long-Term (2-3 years) Indicators of Success

- Reduction in disciplinary and mental health crisis/incident indicators (joint accountability, in conjunction with MCPS supports/ strategies)

Expanded Mental Health		
SDOH Domain	Key Issue	Recommended Indicators <i>(available by school)</i>
Economic Stability	Food Insecurity Poverty	<ul style="list-style-type: none"> • % FARMS • # FARMS
Education Access & Quality	High School Graduation	For secondary schools: <ul style="list-style-type: none"> • Attendance Rate* • Suspension Rate* <i>*Pre-pandemic</i>
Health Care Access & Quality	Access to Health Care	<ul style="list-style-type: none"> • Referrals to Crisis Center (<i>school-specific proxy for mental health, substance abuse and suicide ER visit/hospitalization rates</i>) • COVID penetration and mortality rates* <i>*Overlay census tracts & school boundaries</i>

Social Determinants of Health Guide Decision-Making

Short-Term (~ 1 year) Indicators of Success

- *For family supports, improved family self-sufficiency or family stability (measure per intensity of service)*

Long-Term (2-3 years) Indicators of Success

- *Improvement in attendance and MCPS Equity Accountability Model achievement scores for targeted focus groups (joint accountability, in conjunction with MCPS supports/strategies)*

Family & Community Supports		
SDOH Domain	Key Issue	Recommended Indicators <i>(available by school)</i>
Economic Stability	Food Insecurity Poverty	<ul style="list-style-type: none"> • # FARMS • % FARMS
Education	High School Graduation Early Childhood Education & Development Language & Literacy	<ul style="list-style-type: none"> • MCPS Equity Accountability Model <i>(Achievement Scores for Focus Groups)*</i> • % ESOL <p>For secondary schools:</p> <ul style="list-style-type: none"> • Attendance Rate* <p><i>*Pre-pandemic</i></p>
Health & Health Care	Access to Health Care	<ul style="list-style-type: none"> • Health room utilization rate • Care for Kids Enrollment • COVID penetration and mortality rates* <p><i>*Overlay census tracts & school boundaries</i></p>

FY22-FY24 LTL Strategic Plan

Priority #1: Create an updated, more flexible model of staffing and services across sites to better address local school needs, expand impact and maintain local expertise

- Evaluate how resources and positions are allocated across the current 29 LTL schools and produce a recommendation report
- Incorporate changes recommended in report in FY22 RFP for LTL services
- Implement changes with execution of FY23 LTL contracts
- Evaluate successes of implemented changes

FY22-FY24 LTL Strategic Plan

Priority #2: Increase funding to ensure and expand impact

- Update logic model, data collection and evaluation protocols across MCPS & DHHS to better measure collective impact of partnership to showcase to current funders and potential investors
- Utilize Advisory Group to identify stakeholders and create at least one new major partnership/sponsorship with for-profit organizations per fiscal year
- Increase funding from public and private sources each fiscal year

FY22-FY24 LTL Strategic Plan

Priority #3: Ensure and expand provision of equitable services throughout the county

- Utilize MCDHHS Equity Principles and Standards to expand training on equity across LTL partnership in FY22 and FY23
- Align with MCPS Equity and Achievement Framework to support work in addressing disparities in student outcomes in FY22-FY24
- Incorporate MCPS Equity Accountability Model data in decision-making on allocation of new LTL resources and communities to be served, beginning with recommendations for FY22-FY24



Bi-Agency Tiered Priorities

At schools where highest indicators for all types of supports exist:

- Elementary/middle schools – Linkages to Learning, per updated strategic plan
 - Flexible staffing (not “one size fits all”)
 - Updated middle school model
- High schools - High School Wellness Center (*with growing whole-family supports*)

If space not available on site or via CIP, provide access to support models below:

- **At schools with highest indicators for mental health need only** (*in following order, by “dosage” per school*):
 - On-site SCYS mental health services
 - On-site BHCS/CABHS mental health services
 - Connection to community-based or on-site mental health via Cluster Project
- **At schools with highest indicators for family social services & community support needs only:**
 - Access to closest Cluster Project (*with updated model*)

Bi-Agency Recommendations



- Enhance supports in transitional years
- Integrate and align with alternative to SRO/Restorative Practice recommendations (*in development*)
- Streamline partnerships with growing Consolidated Service Hubs
- Increasing student access to telehealth during school hours and for students in the school building



OFFICES OF THE COUNTY EXECUTIVE


Marc Elrich
County Executive

Richard S. Madaleno
Chief Administrative Officer

MEMORANDUM

March 19, 2021

TO: Gabriel Albornoz, Council Vice President, Chair, Health and Human Services Committee
Nancy Navarro, Chair, Government Operations & Fiscal Policy Committee

FROM: Richard S. Madaleno, Chief Administrative Officer 

SUBJECT: Family Strengthening Pilot Initiative

This memorandum is in response to your memorandum dated January 29, 2021 regarding the special appropriation approved on June 23, 2020. In that appropriation, Council originally designated the funding for a Family Strengthening *Pilot* Initiative. Because Council appropriated funds for the program to be implemented in just two of the four areas outlined in the resolution – we interpreted this program as a pilot program to determine the efficacy of the service. As such, the Office of Management and Budget established a one-year appropriation for the Pilot Initiative, including a term Program Manager II that accompanied the Pilot program.

Funds were made available to the Department of Health and Human Services (DHHS) to carry out this program. Unfortunately, the original contractor identified declined to participate in the program once it was clarified that it was a one-year program and efforts to designate a new provider willing to do the pilot program have been unsuccessful. However, as part of the FY22 CE Recommended budget, we have identified funding for the program as a priority to continue into the next fiscal year.

In the meantime, DHHS and the Montgomery County Public Schools (MCPS) have continued to work together to address the needs of some of our most vulnerable populations, by leveraging existing programs as well as new mechanisms. The balance of this response outlines both separate and joint efforts, that DHHS and MCPS continue to provide.

DHHS

- DHHS' Positive Youth Development (PYD) and Child/Adolescent School & Community-Based Services (CASCBS) have also worked closely with MCPS' Office of Student and Family Support and Engagement (OSFSE) to provide services to students identified as most in need via a triage and referral flow that starts with local school wellness teams. When these teams identify students/families that need supports beyond those that the student support personnel assigned to that school can provide, they escalate those needs to the OSFSE district-wide wellness team. With this pathway, DHHS has been able to respond to many needs of students that have been disconnected from virtual learning due to experiencing chronic levels of complex trauma.
- CASCBS has been able to assist students with mental health treatment needs via the additional funding received this year for School & Community-Based Youth Services (SCYS), or via Child/Adolescent Behavioral Health Services.
- Linkage to Learning (LTL)/SCYS therapists partnering with MCPS staff to provide group support to school staff/administrators with vicarious and direct trauma as they keep supporting their school communities. We look forward to continuing this process as part of a Bi-agency Planning Group to provide a full system of care for the families that we serve.
- DHHS is also responding to requests to add services to specific schools based on critical needs identified by school principals- for example, using Blueprint for Maryland funds to increase programming specifically for families to address whole-family trauma at an LTL school; and
- DHHS has pressed forward with the therapeutic recreation funds that could be implemented through direct purchase orders as Club 480, and Doug Remer Sports have started programming, meanwhile IMPACT starts services in March. The larger amounts of funding will be distributed through contract amendments to the four high school based wellness centers.
- Our Safe Space staff works along with the Street Outreach Network (SON) staff to connect to youth and their families 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.
- SON is launching a community garden project led by youth to help them address their own family's food insecurities as well as support other families that suffer from food insecurity. Research suggests that gardening is a useful healing from complex trauma.
- The Montgomery County Crisis Center has remained available 24/7 for telephone consultation for both parents/caregivers and school counselors/teachers. In addition, our walk-in service for students to receive a therapist crisis assessment and our Mobile Crisis Team has remained available to support students experiencing a behavioral or mental health crisis.
- Students receiving a crisis assessment may be linked to a variety of supports including when appropriate The Care and Connections for Children and Families Program that can offer intense interventions/supports to families.
- In partnership with MCPS and EveryMind, Inc., BTheOne.org continues to address the issue of teen suicide prevention and substance abuse prevention and provide resources to school age youth.

MCPS

Through Student and Family Support and Engagement (SFSE), Office of Teaching, Learning, and Schools, MCPS continues to offer support to our families most impacted by COVID-19-related distance learning. Some of these supports and resources are presented below.

Student, Family, and School Supports

- Parent Academy (traditional workshops, parent chat, how to videos).
- Parent Academy to Go was created to continue to provide information, supports, and resources to families during COVID-19 and the ongoing school closures. Parent Academy to Go virtual workshops are listed on the MCPS website and have included topics such as supporting Lesbian, Gay, Bisexual, Transgender and Queer or Questioning (LGBTQ+) youth, improving family life while working at home, and working/studying from home. In addition, multilingual videos are available to provide technical support to families on the use of ChromeBooks.
- Neediest Kids provided basic needs to our students/families (grocery cards, eyeglasses, clothing, coats, etc.).
- Family Engagement Advisory Team consulted with MCPS senior leadership, including Dr. Jack Smith, Superintendent of Schools.
- Families Helping Families gift card campaign to distribute over \$35,000 in gift cards, via parent community coordinators (PCCs) and pupil personnel workers (PPWs), distributed prior to the end of 2020.
- Collaboration with PPWs to address food, clothing, health care insecurities, etc.

International Admissions and Enrollment

- Trauma-informed supports to students and staff
- Acculturation supports for newly enrolled students
- Introduction to MCPS and facilitation of enrollment for the entire family
- Homeless Student Enrollment (i.e., the McKinney-Vento Grant)
- Children Fleeing Violence Workgroup, a community group collaboration to support families

Community Schools

Through funding made available by the state's new Blueprint for Maryland education funding model, MCPS established 16 Community Schools, which were identified based on participation of 75% or more in the Free and Reduced-price Meals System (FARMS). In these schools, there have been concerted family engagement efforts, including the following activities:

- Virtual Coffee: Workshop/presentation regarding a particular topic (i.e., mental health, academic, family/community needs, etc.).
- Family Check In: Guided community circle/check in for families to connect to school staff to ask questions and share how things are going.

- Family Support Open Office: Informal office half-hours for families to join to ask individual questions, as needed. (i.e., technology, FARMS, mental health, Synergy student information system ParentVue portal, attendance, class dojo, etc.). Private breakout rooms offered as necessary.
- Parent Circles: Safe space to share concerns and ideas, and build relationships between the staff and families, hosted by the schools.

Virtual Town Halls and Community Conversations

- A virtual Pride Town Hall was held on May 27, 2020, to provide information, resources, and support to the LGBTQ+ student community.
- The virtual Mental Health Awareness Week, October 26–30, 2020, included daily activities and presentations to promote behavioral health. The week culminated in a Virtual Mental Health Fair on Saturday, October 31, 2020, to provide students and families with information on community-based resources.
- Collaboration with the faith-based community to hold a virtual Waymaking Watch Party on October 31, 2020. One of the Waymaking videos was screened, followed by a panel discussion with MCPS staff members and community mental health professionals. Additional interfaith watch parties are in development.
- MCPS collaborated with EveryMind and Children’s National Medical Center to host the virtual Back to School Town Hall: Supporting Mental Wellness for Parents and Youth during Remote Learning on September 16, 2020. The main event was followed by four follow-up virtual conversations that focus on the students with special education needs, elementary and secondary students, and one conversation held entirely in Spanish.
- The virtual Let’s Talk Respect Town Hall was a student-led town hall held on October 13, 2020, to help students identify and report bullying, harassment, and intimidation.
- A virtual anti-vaping symposium is in development for March 2021 to present students and community members with information on the dangers of e-cigarettes.

Video Series

- Waymaking video series, hosted by Dr. Christina N. Conolly, Director of Psychological Services, was launched in April 2020. Dr. Conolly talks about mental health, social emotional functioning, and community resources and supports to help students and their families. Topics have included anxiety during COVID-19, anxiety associated with distance learning, county crisis and behavioral health services, and more. All videos are available on the MCPS TV YouTube channel.
 - Waymaking *en Español* was held on August 11, 2020, to provide information and support on mental health, exclusively in Spanish.
 - Two-part Waymaking conversation on the intersection of race and mental health
 - June 30: Addressing barriers and stigma to receiving mental health
 - July 7, 2020: Eliminating stigma and advocating for the need of mental health service
- Mindful Moment video series, also launched in April 2020, includes short videos that students and families may use to engage in daily mindfulness practices.
 - Full compendium of Mindful Moment videos, including some in Spanish, is available online: <https://sites.google.com/mcpsmd.net/mindful-moments-video-series/home>.

- Well-being Matters video series was created by MCPS staff members for MCPS staff members. The first episodes were released in October 2020 and while geared specifically towards staff members, the information (e.g., on balancing work/life, anxiety) is relevant to all adults in Montgomery County.

Online Resources

- MCPS Be Well 365 webpage was expanded to include additional resources and supports, especially as related to COVID-19.
- A COVID-19 resource webpage was created to provide information and supports related to mental health, as well as links to community resources.

Student Supports

- MCPS contracted with the Jewish Social Services Agency to provide individual and family therapy to students in 10 schools that were identified based on lack of community mental health services, FARMS rates, and student referrals and concerns.
- Social-emotional learning psychoeducational lessons were developed and implemented in September 2020 to support students manage the stressors of the pandemic and ongoing distance learning.
- Signs of Suicide Prevention Program (SOS), an evidence-based suicide awareness and prevention program that has been shown to improve knowledge and attitudes about mental health and to increase help-seeking behavior, was revised during summer 2020 to be implemented in a virtual setting. SOS implementation began in October 2020 and lessons were delivered to all secondary students by March 5, 2021. SOS includes student, staff member, and family training on the warning signs of depression and suicide and what steps to take to connect individuals to adults who can intervene.
- Personal Body Safety Lessons (PBSLs), which teach students from Kindergarten through Grade 12 about personal space and how to report inappropriate interactions with caregivers, are being implemented currently and were completed by December 18, 2020. The PBSLs have been shown to increase reporting of abuse and neglect by students and educators.

Indirect Student and Family Supports

- Development and implementation of Student Well-being Teams (SWBTs) at each school to triage and problem-solve student mental health, social emotional, learning, or engagement needs.
 - SWBTs consist of school administrators, teachers, psychologists, school counselors, and PPWs, at a minimum. If a school has been assigned a PCC, English for Speakers of Other Languages (ESOL) transition counselor, or school based ESOL counselor, those individuals also are part of the SWBT. The PPWs and PCCs are essential members of the SWBT and are especially important in family outreach to ensure access to necessary services, including mental health, and student engagement.
 - In August 2020, SWBTs were charged with proactively identifying students and families at risk for behavioral health challenges and asked to reach out, make connections, and provide supports and resources.

- The Stay Connected student engagement program was launched to support student participation in learning opportunities. This allows students to remain connected with their school and peers, as well as affording adults increased opportunities to interact with students and monitor them for warning signs of abuse, neglect, or mental health concerns. A Stay Connected infographic was developed, which includes information about SWBTs; home visit protocols; monitoring students for signs of abuse, neglect, or emotional distress; and engagement strategies.
- Pre-and post-COVID attendance data are being used to identify students and families that would require initial outreach and immediate monitoring at the start of the school year and as students begin to return to school buildings. School teams were encouraged to employ virtual intake meetings to consider the supports the students and families will need within the hybrid model of learning.
- MCPS collaborated with the Children’s Opportunity Fund to support Educational Equity and Enrichment Hubs to promote academic instruction and social opportunities by using CARES Act funding to provide scholarships so that students may participate.
- Use of restorative practices and community circles to reinforce connectedness between students and adults, as well as to provide opportunities to discuss topics that are important and of concern to students is encouraged in schools. These practices also serve as opportunities for staff members to monitor student affect, demeanor, and behavior in order to make appropriate referrals to school-based and county mental health professionals, as needed.
- Ask OSFSE, an online referral system for schools to notify SFSE of student concerns that warranted consultation, was launched in March 2020. Schools continue to use this resource to request central office support when they have significant concerns about a student’s mental health, engagement, and safety and wellness.

JOINT PROGRAMMING - Linkages to Learning

Broad flexibility was allotted within the Linkages to Learning (LTL) contracts so that partners could better respond to critical and emerging needs social, mental health and other community needs in the 29 school communities they serve. The services covered include:

- Collaborative efforts to provide supports for students and caregivers;
- Provide trauma-informed supports for students and caregivers;
- Support for the outreach of Ask OSFSE;
- Distribution of food, school supplies, and Chromebooks;
- Collaborative effort to provide and connect families to services and resources during the pandemic;
- Workshops for caregivers; and
- Tech support

We continue to advance additional options as part of our bi-agency planning.

Behavioral Restorative Model as an Alternative to School Resource Officers (SROs)

Concept

Summary. The Behavioral Restorative Model is proposed as an alternative to the current School Resource Officers (SROs) for addressing the behavioral health, safety, and equity needs of students in Montgomery County Schools (MCPS).

Need. For many years, the MCPS has relied on SROs to support a safe and violent-free environment for students in MCPS schools. While SROs have been helpful in many instances, it has become clear that students also have behavioral health needs that are not being addressed. These unaddressed needs make students vulnerable to incidents of self-harm or harm of others. These incidents often flare up into situations that require disciplinary action. Traditional methods of discipline tend to be punitive, and often require the intervention of the SROs. These traditional disciplinary actions tend to impact students of color to a greater extent than their white counterparts. MCPS has been growing restorative justice practices in a cohort of schools to address these student needs and incidents in a shift away from a punitive culture to a restorative culture. This proposal seeks to build upon these practices and their ability to address racial disparities via enhanced capacity and integration of social and behavioral health supports.

The Behavioral Restorative Model. Key points of this model include:

1. **Enhancing the School Well-Being Teams (SWBTs).** The SWBTs already exist in MCPS K to 12 schools. Personnel within the SWBT are trained in behavioral health interventions, restorative justice practices, and promotion of wholistic wellness among students and their families.
2. **Building the restorative justice component.** The restorative justice component of the SWBTs will include administrators, teachers, or both who are assigned part-time or full-time duties at each K-12 school building. Additional restorative justice practitioners will likely be needed to further implement restorative justice practices across MCPS schools in dealing with disciplinary incidents and situations at risk of erupting into violence. These practices include holding student perpetrators accountable to student victims or school personnel for their actions. Accountability practices may include peer circles to discuss with perpetrators the consequences of their actions and hold them accountable to their victims. The goal is to restore the dignity of the victim, to find ways for the perpetrator to compensate victims, and thus increase the possibility of restoring the perpetrator back into the school community. Restorative justice practitioners will be given authority by school leadership to perform their duties. They will be trained and evaluated in the performance of restorative justice duties. A fiscal analysis will assess any additional appropriations for supporting restorative justice practitioners, some of whom may be existing administrative and teaching personnel with special talents and skills in these practices.
3. **Building the behavioral health component.** This component will include social workers and therapists with training in behavioral health practices that address the behavioral health and substance use needs of students in grades K-12. They will also have specialized training in case management practices, navigation and referrals, social determinants of health, and family interventions. Practitioners in the SWBTs will also be adept at making referrals to specialized child and youth crisis intervention teams in the community such as Care and Connections and the Crisis Center mobile crisis and outreach teams (MCOTs). Some SWBT members in schools with co-located behavioral health and social work staff from the Department of Health and Human Services (DHHS) who currently hold licenses that authorize them to complete an emergency evaluation petition (EEP) for referring a student in crisis to a hospital. With additional funding, co-located DHHS staff from

programs such as Linkages to Learning, Child and Adolescent Behavioral Health Services, and Crisis Center can expand to more SWBTs in more schools. SWBT staff will also cultivate and expand existing partnerships that MCPS already has with other DHHS support programs such as Positive Youth Development (PYD), and with other behavioral health programs in community organizations. As appropriate and helpful, the DHHS will devote planning and supervisory staff to MCPS Central Office level meetings and processes to further facilitate teamwork within the SWBTs across the K-12 schools.

4. **Re-imagining the SRO's.** The SROs will be re-designated as **Community Resource Officers (CROs)** who will not be placed in school facilities but will be available to respond to school incidents that escalate toward violence and cannot be resolved appropriately by restorative justice practitioners and school personnel. These CROs will have specialized training in de-escalation practices and crisis intervention without the use of lethal weapons. The CROs will also have the same required training mandated by the State for working with State school systems, including MCPS. They will also become familiar with restorative justice practices and will develop formal relationships with restorative justice practitioners in each school for the most appropriate and coordinated response when CRO involvement is required. They will also partner with existing youth community interventions such as PYD to promote the wellbeing of students, especially as the students interact with their families and their neighbors when schools are not in session.
5. **Strategy and next steps.** This Behavioral Restorative Model is proposed as a discussion piece with stakeholders that include MCPS, DHHS, parent-teacher associations (PTAs), Montgomery County Council, community providers, and more. Success of the model will depend on broad consensus among stakeholders that it will work. At this juncture, MCPS has not made a decision on the SRO program. Therefore, this proposal should be viewed as a viable, effective, and acceptable alternative in case MCPS decides to abandon the SRO program. After doing so, MCPS will partner with DHHS, the Police Department, and community agencies to implement the Behavioral Restorative Model. This strategy for implementation will include, but is not limited to:
 - a. Creating a community advisory committee to give suggestions and guidance in the development of the Behavioral Restorative Model. It will consist of parents, students, school personnel, community providers, and experts in behavioral health, restorative justice, crisis intervention, and student wellness.
 - b. Creating an executive committee of MCPS, DHHS, Police Department and specified community partners to implement the Behavioral Restorative Model as soon as a decision is made on the SRO program.
 - c. Identifying a flexible Behavioral Restorative Model implementation plan that prioritizes high schools, especially those that may be considered at highest risk, and without enough resources.
 - d. Developing a timeline for implementation that includes a thoughtful phase-in of the new model and a phase-out of the old model, with a rigorous fiscal analysis of both cost savings and revenue enhancements that will be needed to implement the new model. The goal will be to implement the new model within a three-year period once a decision is made to phase-out the current SRO model.

Initial proposal date: February 26, 2021

Montgomery County YRBS High School Data
All Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	3.9	2.6	5	4	No Linear change
23	% who were bullied on school property	18.9	17.5	16.3	14.3	Decreased
25	% students who felt sad or hopeless (almost every for ≥ 2 weeks)	26.9	27.5	28.5	31.5	Increased
26	% who seriously considered attempting suicide	14.6	15.6	15.6	16.7	No Linear change
27	% who made a plan about how they would attempt suicide	12.1	11.8	12.5	13.8	No Linear change
41	% who currently drank alcohol	28.9	24.7	23.6	20.4	Decreased
47	% who currently used marijuana	18.8	16.8	16	15.9	No Linear change
49	% who ever took prescription pain medicine without a Dr. prescription			10.3	11.4	No Linear change
70	% who ever used cocaine	6.2	4.5	3.9	3.2	Decreased
52	% who ever used heroine	3.9	3.1	2.6	2	Decreased
53	% who ever used methamphetamines	4.5	3.2	2.6	1.8	Decreased
58	% who ever had sexual intercourse	27.7	23.2	22.5	22	Decreased
119	% who would feel comfortable seeking help from $1 \geq$ adults besides parents if they had an important question	73.9	76.9	76.1	76.5	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS High School Data
Male Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	5.4	3.8	6	5.1	No Linear change
23	% who were bullied on school property	18	16.7	14.9	12.8	Decreased
25	% students who felt sad or hopeless (almost every for ≥ 2 weeks)	19.7	19.3	19.9	22.5	No Linear change
26	% who seriously considered attempting suicide	9.7	11.1	11.4	12.1	Increased
27	% who made a plan about how they would attempt suicide	8.9	8.4	9.5	11.4	Increased
41	% who currently drank alcohol	25.8	21.8	20.2	17.1	Decreased
47	% who currently used marijuana	20.3	19.1	15.4	15.6	Decreased
49	% who ever took prescription pain medicine without a Dr. prescription			10.2	10.3	No Linear change
70	% who ever used cocaine	8	5.3	5.3	4.5	No Linear change
52	% who ever used heroine	5.4	3.9	3.4	2.9	No Linear change
53	% who ever used methamphetamines	6	3.8	3.4	3.2	No Linear change
58	% who ever had sexual intercourse	31.1	25.8	23.4	24.7	Decreased
119	% who would feel comfortable seeking help from 1 \geq adults besides parents if they had an important question	72.8	77.4	75	77.5	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS High School Data
Female Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	1.9	1.3	3.4	2.3	Increased
23	% who were bullied on school property	19.4	18.2	17.4	15.5	No Linear change
25	% students who felt sad or hopeless (almost every for ≥ 2 weeks)	34.2	35.7	37.2	40.9	Increased
26	% who seriously considered attempting suicide	19.1	20	19.6	20.8	No Linear change
27	% who made a plan about how they would attempt suicide	15.1	15.2	15.4	16.4	No Linear change
41	% who currently drank alcohol	31.9	27.7	26.8	23.5	Decreased
47	% who currently used marijuana	17	14.7	16.6	16.2	No Linear change
49	% who ever took prescription pain medicine without a Dr. prescription			9.8	12.1	No Linear change
70	% who ever used cocaine	3.4	3.3	2	1.6	Decreased
52	% who ever used heroine	1.7	1.9	1.2	0.9	No Linear change
53	% who ever used methamphetamines	2.3	2.3	1.3	0.5	Decreased
58	% who ever had sexual intercourse	24.3	20.8	21.6	19.7	Decreased
119	% who would feel comfortable seeking help from $1 \geq$ adults besides parents if they had an important question	74.8	76.5	77.3	75.3	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS High School Data
White Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	2.5	1.5	3.4	4.8	Increased
23	% who were bullied on school property	20.6	18.7	18.8	17.3	No Linear change
25	% students who felt sad or hopeless (almost every for ≥2 weeks)	23.8	23.3	25.3	28.2	No Linear change
26	% who seriously considered attempting suicide	12.8	14.2	13.9	18.2	Increased
27	% who made a plan about how they would attempt suicide	10.4	9.7	10.8	11.7	No Linear change
41	% who currently drank alcohol	35.7	32	31.9	33.9	No Linear change
47	% who currently used marijuana	19.7	18.5	16.9	20.7	No Linear change
49	% who ever took prescription pain medicine without a Dr. prescription			9.5	9.1	No Linear change
70	% who ever used cocaine	3.1	3.5	2.1	2.5	No Linear change
52	% who ever used heroine	1.5	1.7	1.1	2.2	No Linear change
53	% who ever used methamphetamines	2	1.8	1.2	1.6	No Linear change
58	% who ever had sexual intercourse	24.8	19.8	20.9	21	No Linear change
119	% who would feel comfortable seeking help from 1≥ adults besides parents if they had an important question	78.9	82.4	82.7	80.5	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS High School Data
Black Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	3.3	2.4	5.6	4.2	No Linear change
23	% who were bullied on school property	16.7	14.9	15	14.8	No Linear change
25	% students who felt sad or hopeless (almost every for ≥ 2 weeks)	28.7	27	28.3	33.8	No Linear change
26	% who seriously considered attempting suicide	13.9	14.5	17	17.4	No Linear change
27	% who made a plan about how they would attempt suicide	10.7	11.4	12.7	16.4	Increased
41	% who currently drank alcohol	26.3	17.7	18	8.5	Decreased
47	% who currently used marijuana	21.8	18.6	17.2	14.5	No Linear change
49	% who ever took prescription pain medicine without a Dr. prescription			9.8	14.3	Increased
70	% who ever used cocaine	5.7	3.8	4.2	3.3	No Linear change
52	% who ever used heroine	4.8	3.2	3.6	2.4	No Linear change
53	% who ever used methamphetamines	5.2	2.9	2.7	2.4	No Linear change
58	% who ever had sexual intercourse	31.3	25.1	25.6	21.1	Decreased
119	% who would feel comfortable seeking help from $1 \geq$ adults besides parents if they had an important question	72	74.4	74.1	73.5	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS High School Data
Hispanic Students

Q#	Question	2013	2014	2016	2018	Trend*
13	% who ever carried a weapon on school property	6	3.4	6.9	3.4	No Linear change
23	% who were bullied on school property	18	18.9	15.6	12.1	Decreased
25	% students who felt sad or hopeless (almost every for ≥ 2 weeks)	30.7	35.1	34.7	34.5	No Linear change
26	% who seriously considered attempting suicide	15.5	19.8	16.2	14.3	No Linear change
27	% who made a plan about how they would attempt suicide	13.5	14.9	13.8	12.4	No Linear change
41	% who currently drank alcohol	27.6	26	23.2	15.3	Decreased
47	% who currently used marijuana	20	19	18	16.2	No Linear change
49	% who ever took prescription pain medicine without a Dr. prescription			13.4	11.9	No Linear change
70	% who ever used cocaine	9.7	6.2	6.4	4.3	No Linear change
52	% who ever used heroine	5.6	4	3.9	2.2	Decreased
53	% who ever used methamphetamines	6.6	4.2	4.6	2.2	No Linear change
58	% who ever had sexual intercourse	38.4	34.5	31.8	30.2	No Linear change
119	% who would feel comfortable seeking help from $1 \geq$ adults besides parents if they had an important question	71.7	75.1	73.1	73.8	No Linear change

* as defined in the YRBS trend report

Montgomery County YRBS Middle School Data
All Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	24.5	21	21.8	17.4	Decreased
14	% who ever seriously thought about killing themselves	17	15.5	20	20.5	Increased
15	% who ever made a plan about how they would kill themselves			11.6	13.4	No linear change
16	% who ever tried to kill themselves			7	6.8	No linear change
26	% who ever drank alcohol (other than a few sips)	20.2	13.5	16	13.5	Decreased
30	% who ever took prescription pain medicine without a Dr's Prescription			3.5	5.4	Increased
31	% who ever used cocaine	3.7	3	3.5	1.6	Decreased
32	% who ever used inhalants	8.7	5.2	5.7	4.2	Decreased
34	% who ever had sexual intercourse		4.5	4.9	2.5	Decreased
54	% who felt sad or hopeless (almost every day for ≥2 weeks in row)	23.8	18.7	23.5	22.4	No linear change
70	% who currently used marijuana	6.9	4.1	3.4	2.4	Decreased
84	% who feel comfortable seeking help from 1≤ adults besides their parents if they had an important question affecting their life	76.2	82.1	76.9	81.1	No linear change

Montgomery County YRBS Middle School Data
Male Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	33.7	29.1	29.7	24.6	Decreased
14	% who ever seriously thought about killing themselves	11.6	12.6	15.3	18.5	Increased
15	% who ever made a plan about how they would kill themselves			8.1	11.8	Increased
16	% who ever tried to kill themselves			5.2	5.5	No linear change
26	% who ever drank alcohol (other than a few sips)	21.7	14.9	18.6	13.8	Decreased
30	% who ever took prescription pain medicine without a Dr's Prescription			3.5	4.7	No linear change
31	% who ever used cocaine	4.2	3.4	4	1.8	Decreased
32	% who ever used inhalants	8.4	5.5	5.8	3.4	Decreased
34	% who ever had sexual intercourse		7	6.3	3.8	No linear change
54	% who felt sad or hopeless (almost every day for ≥ 2 weeks in row)	17	15.1	18.1	17	No linear change
70	% who currently used marijuana	8.5	5.4	3.9	1.8	Decreased
84	% who feel comfortable seeking help from 1 \leq adults besides their parents if they had an important question affecting their life	78	82.7	78.4	81.8	No linear change

Montgomery County YRBS Middle School Data
Female Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	14.8	12.4	13.3	10	No linear change
14	% who ever seriously thought about killing themselves	22.2	18.7	24.8	22.3	No linear change
15	% who ever made a plan about how they would kill themselves			15.1	14.6	No linear change
16	% who ever tried to kill themselves			8.7	8.2	No linear change
26	% who ever drank alcohol (other than a few sips)	18.1	12	13.2	13.3	Decreased
30	% who ever took prescription pain medicine without a Dr's Prescription			3.5	6.1	No linear change
31	% who ever used cocaine	2.7	2.7	2.9	1	Decreased
32	% who ever used inhalants	8.7	4.9	5.5	4.9	Decreased
34	% who ever had sexual intercourse		2	3.3	1.2	No linear change
54	% who felt sad or hopeless (almost every day for ≥2 weeks in row)	30.7	22.2	29	27.9	No linear change
70	% who currently used marijuana	5.1	2.8	2.8	3	No linear change
84	% who feel comfortable seeking help from 1≤ adults besides their parents if they had an important question affecting their life	74.4	81.5	75.4	81	Increased

Montgomery County YRBS Middle School Data
White Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	28.9	21.5	20.8	18.1	Decreased
14	% who ever seriously thought about killing themselves	13.2	11.7	12.5	14.5	No linear change
15	% who ever made a plan about how they would kill themselves			5.6	8.5	No linear change
16	% who ever tried to kill themselves			2.3	2.9	No linear change
26	% who ever drank alcohol (other than a few sips)	14.1	9.3	9.1	7.9	Decreased
30	% who ever took prescription pain medicine without a Dr's Prescription			1.7	1.9	No linear change
31	% who ever used cocaine	2.2	1.7	1.2	0.2	No linear change
32	% who ever used inhalants	5.3	2.1	1.8	2	No linear change
34	% who ever had sexual intercourse		2.3	1.3	1.4	No linear change
54	% who felt sad or hopeless (almost every day for ≥ 2 weeks in row)	16.6	13.3	13.5	13.5	No linear change
70	% who currently used marijuana	3.8	1.9	1.3	2	No linear change
	% who feel comfortable seeking help from $1 \leq$ adults besides their parents if					
84	they had an important question affecting their life	79.2	84	86.6	87.6	Increased

Montgomery County YRBS Middle School Data
Black Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	16.7	16.2	19.8	15.9	No linear change
14	% who ever seriously thought about killing themselves	15.9	18.8	23.2	27.1	Increased
15	% who ever made a plan about how they would kill themselves			12.9	17	No linear change
16	% who ever tried to kill themselves			8.6	9.7	No linear change
26	% who ever drank alcohol (other than a few sips)	20.5	20.4	19.2	18	No linear change
30	% who ever took prescription pain medicine without a Dr's Prescription			4.7	8.3	No linear change
31	% who ever used cocaine	4.2	3.9	5	3.4	No linear change
32	% who ever used inhalants	8.2	8.5	5.4	7.2	No linear change
34	% who ever had sexual intercourse		8.2	5	4.8	No linear change
54	% who felt sad or hopeless (almost every day for ≥2 weeks in row)	23.2	22.1	21.9	26.8	No linear change
70	% who currently used marijuana	9	6.7	2.2	4.1	Decreased
84	% who feel comfortable seeking help from 1≤ adults besides their parents if they had an important question affecting their life	73.5	79.6	72.9	76.6	No linear change

Montgomery County YRBS Middle School Data
Hispanic Students

Q#	Question	2013	2014	2016	2018	Trend*
10	% who ever carried a weapon	25.5	22.5	24.3	16.1	Decreased
14	% who ever seriously thought about killing themselves	22.6	19.6	27.4	22.8	No linear change
15	% who ever made a plan about how they would kill themselves			17.4	12.6	No linear change
16	% who ever tried to kill themselves			13.8	10.8	No linear change
26	% who ever drank alcohol (other than a few sips)	34.1	21.3	26.2	18.8	Decreased
30	% who ever took prescription pain medicine without a Dr's Prescription			6.4	7.8	No linear change
31	% who ever used cocaine	5.4	5.1	6.2	2.1	No linear change
32	% who ever used inhalants	15.3	8.3	11.6	5.4	Decreased
34	% who ever had sexual intercourse		8.2	9.5	3.4	No linear change
54	% who felt sad or hopeless (almost every day for ≥ 2 weeks in row)	31.7	24.5	37.6	31.5	No linear change
70	% who currently used marijuana	10	6.5	7.3	2.6	Decreased
	% who feel comfortable seeking help from $1 \leq$ adults besides their parents if they had					
84	an important question affecting their life	73.9	78.4	70.6	79.4	No linear change

FY21 TO DATE: SCHOOL REFERRAL REPORT

TOTAL REFERRALS	FY21 TO DATE	FY20	FY19	FY18
	150	1169	1954	1,804

TOTAL SCHOOLS IN MCPS	FY21 TO DATE	FY20	FY19	FY18
	206	206	206	206

TOTAL SCHOOLS REF.	FY21 TO DATE	FY20	FY19	FY18
	65	n/a	178	180

SCHOOL TYPE	# OF SCHOOLS FY21	#OF SCHOOLS REF. FY21	#NOT REF.	% REFERRING
Elem.	135	14	121	10.37%
Middle	40	31	9	77.50%
High	25	19	6	76%
Edison Ctr.	1	1	0	100%
SPECIAL SCHOOLS	5	1	4	20%
ALT. PROGRMAS	1	0	1	0%
Private	n/a	4	n/a	n/a

TYPE OF REFERRAL	FY21 TO DATE	%FY 21	#Students FY20	%FY20	# Students FY19	% FY19
Elem.	18	12%	345	29.51%	442	22.62%
Middle	86	57.33%	506	43.28%	928	47.49%
High	38	25.33%	318	27.20%	534	27.33%
Edison Ctr.	1	.66%	n/a	n/a	3	.15%
Alt. Edu.	1	.66%	n/a	n/a	3	.15%
Private	5	3.33%	n/a	n/a	27	1.38%
MCT	n/a	n/a	n/a	n/a	17	.87%
Male	50	33.33%	616	52.69%	911	46.62%
Female	100	66.66%	553	47.30%	1043	53.38%
African American	28	18.66%	n/a	n/a	539	30.14%
American Indian	1	.66%	n/a	n/a	28	1.43%
Asian	22	14.66%	n/a	n/a	176	9%
Caucasian	19	12.66%	n/a	n/a	346	17.65%
Hispanic	65	43.33%	n/a	n/a	756	38.69%
Mixed	10	6.66%	n/a	n/a	70	3.58%
Other	5	3.33%	n/a	n/a	39	1.99%

HEAD START	KINDERGARTEN	FIRST	SECOND	THIRD	FOURTH	FIFTH
0	0	0	4	2	4	8
SIXTH	SEVENTH	EIGHTH	NINTH	TENTH	ELEVENTH	TWELETH
24	36	28	14	11	13	

REFERRAL REASONS	FY21 TO DATE	FY20	FY19	FY18
1. Suicidal Threat	72	579	1087	880
2. Behavioral Dysfunction	12	144	167	125
3. Suicidal Behavior	32	169	331	158
4. Self-Injurious Behavior	39	168	491	196
5. Homicidal Threat	3	50	144	91
6. Physical Attack	2	20	84	64
7. Bullying (Victim)	2	14	53	14
8. Bullying (Perpetrator)	1	4	18	7
9. Other	89	224	851	253

DISPO.	DESCRIPTION	FY21 TO DATE	FY20	FY19	FY18
1a	Student not currently at risk to self or others	118	538	1707	1425
1b	No follow-up needed	7	42	112	92
1c	Follow-up recommended	45	188	409	207
2a	Referred for Outpatient tx.	92	343	1131	499
2b	Inpatient hospitalization	16	84	144	86
2c	Referred for partial hospitalization	0	11	9	10
2d	Emergency petition initiated by CC Staff	1	8	13	7
2e	Other	119	304	1185	690

MCT'S TO SCHOOL'S					
Reason	FY19	FY18	Dispo	FY19	FY18
1 Suicidal	10	12	1. EEP	5	9
2 Homicidal	2	3	2. Voluntary to ER	1	1
3 Thought d/o	0	1	3. Remained in Community	4	5
4 Mood d/o	6	8	4. No answer	0	0
5 Family Conflict	0	1	5. Refuses to Participate	0	0
6 Crime Victimization	0	1	6. Ref. Out	10	6
7 Death	0	0	6. Referred to APS/CPS	0	0
8 Hoarding	0	0	7. Refereed APP/VASAP	0	1
9 TBI	0	0	8. Info Give	0	0
10 Substance	0	0	9. Arrested	0	0
11 Co-Occurring	0	0	10. Other	0	1
12 Other	3	3			
13 None	0	0			

MCT TO SCHOOL'S	ELEM	MIDDLE	HIGH	FEMALE	MALE	TOTAL
FY21	n/a	n/a	n/a	n/a	n/a	n/a
FY20	n/a	n/a	n/a	n/a	n/a	n/a
FY19	9	2	6	5	12	17
FY18	9	2	10	10	11	21

MCPS FARMS and EverFARMS Data (sorted by FARMS %)
School Year 2020-2021

SchoolNum	SchoolName	Enrollment	FARMS	EverFARMS	FARMSP	EverFARMSP
564	South Lake ES	790	695	731	88.0	92.5
553	Gaithersburg ES	825	702	755	85.1	91.5
791	New Hampshire Est	448	374	415	83.5	92.6
777	Weller Road ES	677	556	598	82.1	88.3
797	Harmony Hills ES	690	565	624	81.9	90.4
304	JoAnn Leleck at Bro	821	669	768	81.5	93.5
788	Wheaton Woods ES	494	399	438	80.8	88.7
771	Rolling Terrace ES	727	579	612	79.6	84.2
779	Sargent Shriver ES	736	581	648	78.9	88.0
805	Kemp Mill ES	458	361	408	78.8	89.1
111	Captain James Daly	578	440	497	76.1	86.0
786	Georgian Forest ES	568	424	496	74.6	87.3
561	Watkins Mill ES	749	556	654	74.2	87.3
774	Highland ES	530	393	432	74.2	81.5
557	Montgomery Village	776	568	678	73.2	87.4
563	Summit Hall ES	683	496	600	72.6	87.8
305	Jackson Road ES	696	498	567	71.6	81.5
790	Arcola ES	703	499	593	71.0	84.4
558	Whetstone ES	693	490	532	70.7	76.8
818	Odessa Shannon MS	795	554	671	69.7	84.4
766	Oak View ES	419	289	317	69.0	75.7
808	Cresthaven ES	491	337	418	68.6	85.1
334	Greencastle ES	743	504	562	67.8	75.6
311	Francis Scott Key M	966	652	819	67.5	84.8
811	White Oak MS	860	575	696	66.9	80.9
772	Viers Mill ES	503	335	378	66.6	75.1
552	Washington Grove E	403	268	298	66.5	73.9
807	Brookhaven ES	421	279	321	66.3	76.2
108	Lake Seneca ES	461	305	336	66.2	72.9
823	Argyle MS	1043	688	849	66.0	81.4
115	Neelsville MS	842	550	666	65.3	79.1
206	Twinbrook ES	508	331	399	65.2	78.5
303	Fairland ES	585	378	421	64.6	72.0
822	Strathmore ES	491	316	390	64.4	79.4
559	Brown Station ES	612	390	454	63.7	74.2
787	A. Mario Loiederma	996	631	766	63.4	76.9
309	Burnt Mills ES	607	381	423	62.8	69.7
100	Clopper Mill ES	478	298	354	62.3	74.1
109	Waters Landing ES	673	417	462	62.0	68.6
549	Flower Hill ES	441	273	315	61.9	71.4
545	Watkins Mill HS	1597	986	1346	61.7	84.3
313	Galway ES	750	463	518	61.7	69.1
307	Roscoe R. Nix ES	481	296	371	61.5	77.1
248	Forest Oak MS	920	562	728	61.1	79.1
555	Rosemont ES	602	363	414	60.3	68.8
792	Newport Mill MS	670	404	506	60.3	75.5

MCPS FARMS and EverFARMS Data (sorted by FARMS %)
School Year 2020-2021

780	Bel Pre ES	549	331	391	60.3	71.2
815	John F. Kennedy HS	1788	1071	1507	59.9	84.3
812	Parkland MS	1158	679	901	58.6	77.8
568	Stedwick ES	516	302	345	58.5	66.9
242	Dr. Sally K. Ride ES	475	275	307	57.9	64.6
817	Glenallan ES	707	407	449	57.6	63.5
775	Eastern MS	966	556	637	57.6	65.9
310	Cannon Road ES	421	240	275	57.0	65.3
110	S. Christa McAuliffe	565	321	366	56.8	64.8
212	Meadow Hall ES	406	230	266	56.7	65.5
215	Carl Sandburg Learn	94	53	63	56.4	67.0
514	Judith A. Resnik ES	591	333	379	56.3	64.1
333	Benjamin Banneker	864	482	636	55.8	73.6
767	Glen Haven ES	480	264	296	55.0	61.7
554	Gaithersburg MS	868	477	599	55.0	69.0
335	Briggs Chaney MS	978	537	692	54.9	70.8
782	Wheaton HS	2280	1231	1760	54.0	77.2
106	Fox Chapel ES	589	318	359	54.0	61.0
796	Northwood HS	1708	918	1252	53.7	73.3
551	Gaithersburg HS	2359	1255	1813	53.2	76.9
798	Springbrook HS	1694	886	1262	52.3	74.5
756	East Silver Spring ES	481	251	285	52.2	59.3
776	Montgomery Knolls	490	254	281	51.8	57.3
747	Dr. Charles R. Drew	468	240	278	51.3	59.4
521	Shady Grove MS	578	296	379	51.2	65.6
107	Martin Luther King,	888	442	568	49.8	64.0
761	Pine Crest ES	446	219	249	49.1	55.8
565	Sequoyah ES	368	179	204	48.6	55.4
784	Highland View ES	382	185	206	48.4	53.9
569	Strawberry Knoll ES	594	287	347	48.3	58.4
546	Goshen ES	522	252	294	48.3	56.3
562	Redland MS	646	311	395	48.1	61.1
795	Rock View ES	625	299	359	47.8	57.4
778	Sligo MS	738	344	428	46.6	58.0
104	Seneca Valley HS	1652	770	1124	46.6	68.0
315	Paint Branch HS	2064	962	1482	46.6	71.8
302	Burtonsville ES	608	275	322	45.2	53.0
157	Roberto Clemente N	1040	467	627	44.9	60.3
820	Earle B. Wood MS	998	446	571	44.7	57.2
647	Silver Spring Interna	1160	516	639	44.5	55.1
965	RICA SP	108	48	75	44.4	69.4
789	Albert Einstein HS	1921	828	1248	43.1	65.0
770	Flora M. Singer ES	613	264	301	43.1	49.1
340	Great Seneca Creek	538	226	282	42.0	52.4
210	Maryvale ES	571	238	277	41.7	48.5
321	James Blake HS	1815	755	1114	41.6	61.4
556	Mill Creek Towne ES	482	195	239	40.5	49.6

MCPS FARMS and EverFARMS Data (sorted by EverFARMS %)
School Year 2020-2021

SchoolNumber	SchoolName	Enrollment	FARMS	EverFARMS	FARMSP	EverFARMSP
304	JoAnn Leleck at Broad Acres ES	821	669	768	81.5	93.5
791	New Hampshire Estates ES	448	374	415	83.5	92.6
564	South Lake ES	790	695	731	88.0	92.5
553	Gaithersburg ES	825	702	755	85.1	91.5
797	Harmony Hills ES	690	565	624	81.9	90.4
805	Kemp Mill ES	458	361	408	78.8	89.1
788	Wheaton Woods ES	494	399	438	80.8	88.7
777	Weller Road ES	677	556	598	82.1	88.3
779	Sargent Shriver ES	736	581	648	78.9	88.0
563	Summit Hall ES	683	496	600	72.6	87.8
557	Montgomery Village MS	776	568	678	73.2	87.4
786	Georgian Forest ES	568	424	496	74.6	87.3
561	Watkins Mill ES	749	556	654	74.2	87.3
111	Captain James Daly ES	578	440	497	76.1	86.0
808	Cresthaven ES	491	337	418	68.6	85.1
311	Francis Scott Key MS	966	652	819	67.5	84.8
818	Odessa Shannon MS	795	554	671	69.7	84.4
790	Arcola ES	703	499	593	71.0	84.4
815	John F. Kennedy HS	1788	1071	1507	59.9	84.3
545	Watkins Mill HS	1597	986	1346	61.7	84.3
771	Rolling Terrace ES	727	579	612	79.6	84.2
774	Highland ES	530	393	432	74.2	81.5
305	Jackson Road ES	696	498	567	71.6	81.5
823	Argyle MS	1043	688	849	66.0	81.4
811	White Oak MS	860	575	696	66.9	80.9
822	Strathmore ES	491	316	390	64.4	79.4
248	Forest Oak MS	920	562	728	61.1	79.1
115	Neelsville MS	842	550	666	65.3	79.1
206	Twinbrook ES	508	331	399	65.2	78.5
812	Parkland MS	1158	679	901	58.6	77.8
782	Wheaton HS	2280	1231	1760	54.0	77.2
307	Roscoe R. Nix ES	481	296	371	61.5	77.1
787	A. Mario Loiederman MS	996	631	766	63.4	76.9
551	Gaithersburg HS	2359	1255	1813	53.2	76.9
558	Whetstone ES	693	490	532	70.7	76.8
807	Brookhaven ES	421	279	321	66.3	76.2
766	Oak View ES	419	289	317	69.0	75.7
334	Greencastle ES	743	504	562	67.8	75.6
792	Newport Mill MS	670	404	506	60.3	75.5
772	Viers Mill ES	503	335	378	66.6	75.1
798	Springbrook HS	1694	886	1262	52.3	74.5
559	Brown Station ES	612	390	454	63.7	74.2
100	Clopper Mill ES	478	298	354	62.3	74.1
552	Washington Grove ES	403	268	298	66.5	73.9
333	Benjamin Banneker MS	864	482	636	55.8	73.6
796	Northwood HS	1708	918	1252	53.7	73.3

MCPS FARMS and EverFARMS Data (sorted by EverFARMS %)
School Year 2020-2021

108	Lake Seneca ES	461	305	336	66.2	72.9
303	Fairland ES	585	378	421	64.6	72.0
315	Paint Branch HS	2064	962	1482	46.6	71.8
549	Flower Hill ES	441	273	315	61.9	71.4
780	Bel Pre ES	549	331	391	60.3	71.2
335	Briggs Chaney MS	978	537	692	54.9	70.8
309	Burnt Mills ES	607	381	423	62.8	69.7
965	RICA SP	108	48	75	44.4	69.4
313	Galway ES	750	463	518	61.7	69.1
554	Gaithersburg MS	868	477	599	55.0	69.0
555	Rosemont ES	602	363	414	60.3	68.8
109	Waters Landing ES	673	417	462	62.0	68.6
104	Seneca Valley HS	1652	770	1124	46.6	68.0
215	Carl Sandburg Learning Center SP	94	53	63	56.4	67.0
568	Stedwick ES	516	302	345	58.5	66.9
775	Eastern MS	966	556	637	57.6	65.9
521	Shady Grove MS	578	296	379	51.2	65.6
212	Meadow Hall ES	406	230	266	56.7	65.5
310	Cannon Road ES	421	240	275	57.0	65.3
789	Albert Einstein HS	1921	828	1248	43.1	65.0
110	S. Christa McAuliffe ES	565	321	366	56.8	64.8
242	Dr. Sally K. Ride ES	475	275	307	57.9	64.6
514	Judith A. Resnik ES	591	333	379	56.3	64.1
107	Martin Luther King, Jr MS	888	442	568	49.8	64.0
817	Glenallan ES	707	407	449	57.6	63.5
767	Glen Haven ES	480	264	296	55.0	61.7
321	James Blake HS	1815	755	1114	41.6	61.4
562	Redland MS	646	311	395	48.1	61.1
106	Fox Chapel ES	589	318	359	54.0	61.0
157	Roberto Clemente MS	1040	467	627	44.9	60.3
747	Dr. Charles R. Drew ES	468	240	278	51.3	59.4
756	East Silver Spring ES	481	251	285	52.2	59.3
569	Strawberry Knoll ES	594	287	347	48.3	58.4
510	Col. Zadok Magruder HS	1606	635	936	39.5	58.3
778	Sligo MS	738	344	428	46.6	58.0
795	Rock View ES	625	299	359	47.8	57.4
776	Montgomery Knolls ES	490	254	281	51.8	57.3
820	Earle B. Wood MS	998	446	571	44.7	57.2
546	Goshen ES	522	252	294	48.3	56.3
761	Pine Crest ES	446	219	249	49.1	55.8
565	Sequoyah ES	368	179	204	48.6	55.4
647	Silver Spring International MS	1160	516	639	44.5	55.1
230	Rockville HS	1436	492	789	34.3	54.9
757	Montgomery Blair HS	3220	1254	1747	38.9	54.3
784	Highland View ES	382	185	206	48.4	53.9
302	Burtonsville ES	608	275	322	45.2	53.0
340	Great Seneca Creek ES	538	226	282	42.0	52.4



MONTGOMERY COUNTY COUNCIL
ROCKVILLE, MARYLAND

EVAN GLASS
COUNCILMEMBER
AT-LARGE

TRANSPORTATION & ENVIRONMENT COMMITTEE
HEALTH AND HUMAN SERVICES COMMITTEE;
LEAD FOR HOMELESSNESS AND VULNERABLE COMMUNITIES

MEMORANDUM

TO: Marc Elrich, County Executive

FROM: Evan Glass, Councilmember, Lead for Homelessness & Vulnerable Communities

SUBJECT: School Resource Officers and Mental Health

DATE: March 2, 2021

In recent months you have heard from my Council colleagues, students, parents and other advocates about school resource officers (SROs) and the need to prioritize more mental health services for students. It is clear that we are all committed to finding a solution for this systemic issue.

Montgomery County has led the way in enacting a law outlining our commitment towards racial equity and social justice, recognizing the need to implement policies that are more reflective and inclusive of our diverse community. By maintaining the SRO program in its current form, the Office of Legislative Oversight confirms what many of us know: “this [program] will not advance racial equity and social justice in the County because it does not prioritize diminishing disparities in student arrests or suspensions by race, income, or disability status.”

I ask that your proposed Fiscal Year 2022 Operating Budget includes police free schools and more mental health resources for students. Such an action would be in line with our shared policy goals of advancing racial justice.

MCPS students, particularly students of color, should not have more interactions with police officers than they do access to social workers. We must dismantle the school to prison pipeline — especially for students of color.

Maryland’s “Safe to Learn Act” stipulates that each local school system must have an SRO assigned to the school or that “adequate local law enforcement coverage” be provided. I believe that through the budget process, we can reach a balanced approach toward removing school resource officers from school campuses while still abiding by state law.

In addition, I request that mental health resources be increased by shifting funds to ensure that holistic mental health services are available and easily accessible to diagnose, treat and support students as well as their families. As we are now one year into the global crisis, I know many students are experiencing pandemic fatigue and increased depression. According to a survey conducted by Navigate360, 56% of teens have reported that they know someone who has considered self-harm or suicide but less than a third believe their school is prepared to address this concern.

Research has shown that prolonged exposure to stress is correlated with serious health concerns. We are still living in a health crisis and now more than ever, we need to safeguard the wellbeing of our youth. I am committed to working with you, my Council colleagues, Montgomery County Public Schools and the Montgomery County Board of Education to ensure that students have the physical, mental and emotional support that they need and deserve.

CC: Members of the County Council
Members of the Montgomery County Board of Education
Dr. Jack Smith, Superintendent of Schools
Chief Marcus Jones, Montgomery County Police Department
Chiefs of Staff
Rich Madaleno, Chief Administrative Officer
Marlene Michaelson, Executive Director, County Council
Caroline Sturgis, Assistant Chief Administrative Officer