BREVARD PUBLIC SCHOOLS
SCHOOL SAFETY AND CLIMATE STUDY

Developing Knowledge About What Works to Make Schools Safe
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Will adding mental health services in low socio-economic schools improve school climate and safety?

Section One: STATEMENT OF THE PROBLEM

Each year, between 14-20% of children and adolescents experience a mental, emotional, or behavioral disorder (National Academy of Sciences, 2010). According to the Substance Abuse and Mental Health Services Administration (SAMHSA), over two million adolescents between the ages of 12-17 reported a major depressive episode in the past year and nearly 60% of those did not receive treatment (SAMHSA, 2006). Despite the demonstrated need for mental health services for children and adolescents, the mental health needs of children and adolescents remain largely unmet. As a result, the U.S. Surgeon General identified mental health services for children and adolescents as a national public health crisis. In addition, President Obama identified school mental health programs as critical components in early identification and referral, violence prevention efforts and overall community safety (The White House, 2013). In 2003, the President’s New Freedom Commission report, Achieving the Promise: Transforming Mental Health Care in America, identified schools as a major setting for mental health care and a critical avenue for enhancing service utilization. With improving and expanding school mental health programs as a target, President Obama’s four-point plan to protect children and communities included increasing access to mental health services, improving screening and referral of students with mental health needs to treatment, and increasing mental health services in schools (The White House, 2013).

School mental health programs, more so than community mental health centers, have greater access to children and adolescents for the provision of mental health care services. Between 70-80% of children and adolescents who receive mental health services access services are in the school setting (Rones & Hoagwood, 2010). Approximately 96% of children and
adolescents follow through with school mental health services after the initial referral while only 13% of children and adolescents follow through with referrals to community mental health centers (Cantro, Harris, & Weiss, 1998). Placing mental health services in the school eliminates barriers to traditional mental health services and removes the stigma associated with receiving services.

Over the past 20 years, research has demonstrated that school mental health programs help to improve service access and utilization in services for ethnic minority youth. As the U.S. becomes increasingly diverse, school systems must be responsive to shifting demographics (Clauss-Ehlers, Weist, Gregory, et al., 2010). The need for culturally sensitive and competent school mental health policies, programs, and practices should be highly prioritized given research demonstrating that minority and disadvantaged groups in the U.S. are likely to (a) not have access to mental health care and, (b) receive quality care when they are able to access services (Garland, Lau, Yeh, et al., 2005). Evidence suggests that school mental health programs help close the gap in services for ethnic minority youth (Snowden & Yamada, 2005). Even further, all youth in schools can benefit from school mental health policies and programs that successfully promote social, emotional and behavioral health, build positive school climate and prevent school violence and dropout (Bruns, Walrath, Siegel, & Weist, 2004; Schargel & Smink, 2001; U.S. Department of Health and Human Services, 2001; Weist & Cooley-Quille, 2001). When school mental health programs are successful in reaching the whole school, students and teachers feel that they are in a positive learning environment and there are fewer referrals to special education based on emotional/behavioral problems (Weist, Evans, & Lever, 2003).

Disturbances in mental health can affect individual student performance as well as negatively impact the overall school climate. A positive school climate is considered a prerequisite for a positive educational outcome. There is evidence that suggests school mental health programs
have an impact across a variety of emotional and behavioral problems in children and adolescents (Rones & Hoagwood, 2000). When students’ mental health needs are effectively addressed through school mental health programs, studies show a reduction in emotional and behavioral disorders and an increase in engagement and feelings of connectedness to the school (Hussey & Guo, 2003; Greenberg, et al., 2005). Hussey & Guo (2003) found that students who participate in a school mental health program demonstrated statistically significant reductions in disorder-related conduct, attention deficit-hyperactivity and depressive symptomatology over the course of one year. Other studies found reductions in disruptive, aggressive and inattentive behaviors (Tingstrom, Sterling-Turner, & Wilczynski, 2006). More directly, Bruns, Walrath, Glass-Siegel, and Weist (2004) found that expanded school mental health services had a positive impact on perceptions of school climate.

According to the National School Climate Center, a safe and caring school environment is one in which students feel positively connected to others, feel respected, feel that their work is meaningful and believe that they are good at what they do. School climate is a group phenomenon that reflects the school community’s norms, goals and values and emerges based on ways in which students, parents and school staff experience school life. Positive school climate is also associated with decreased student absenteeism in middle and high school and lower rates of student suspensions. Research has found that a positive climate contributed to less aggression and violence, less harassment (Attar-Schwartz, 2009), and acted as a protective factor for the learning and positive life development of young people (Otega, Sanchez, & Viejo 2011). The U.S. Department of Education, and other high level government agencies are focused on school climate reform and the importance of creating an evidence-based school improvement strategy that
supports students, families, and school personnel learning and working together to create safer, more supportive and engaging schools (What is School Climate, 2014).

In 2013, a group of six leading school organizations released a joint statement on creating safe and successful schools. The group included the American School Counselor Association, the National Association of School Psychologists, the School Social Work Association of America, the National Association of School Resource Officers, the National Association of Elementary School Principals and the National Association of Secondary School Principals. According to the group, school safety and positive school climate are not achieved through singular actions but rather by effective comprehensive and collaborative efforts. Schools require consistent and effective approaches to prevent violence and promote learning, sufficient time to implement these approaches and ongoing evaluation. In Best Practices for Creating Safe and Successful Schools, the Comprehensive, Integrated School Improvement Model is used as a tool for creating safe school environments. This model views improved school safety as a result of integrated services for students and families that includes behavioral, mental health and social services within the context of the school culture. As a best practice measure, the group recommends improved access to school-based mental health supports and intervention services (Cowan, Vaillantcourt, Rossen, & Pollitt, 2013).

Although previous studies have examined benefits to schools from mental health policies and programs, relatively few have explored the relationship between mental health services, school climate and school safety (Bruns, Walrath, Siegel, & Weist, 2004; Schargel & Smink, 2001; U.S. Department of Health and Human Services, 2001; Weist & Cooley-Quille, 2001). For the proposed program, we seek to implement mental health services into each school to improve school climate as a component of school safety. The primary research question for this study is:
Does providing school mental health services in low socio-economic schools improve school climate and school safety? Enhanced mental health services impact individual and school-level outcomes; therefore, in examining this question, individual and school-level outcomes are considered.

Community-Level Data

We are proposing to implement a program to improve mental, emotional and behavioral health through the provision of mental health services for students, families and school personnel. Utilizing this strategy, we seek to improve relationships and functioning in schools serving the lowest socio-economic areas to improve school climate. Through the effort of building positive relationships and targeting individual student needs, our goal is to transform the school into a safe place for learning. The target schools for the proposed study are Cocoa Junior/Senior High School and the four feeder schools: Cambridge Elementary, Endeavour Elementary, Saturn Elementary and Emma Jewel Charter School. These schools, located in Brevard County, FL zip codes 32926 and 32922, are in a low socio-economic area and each have documented higher levels of challenges and poorer school climate compared to other schools in the district and state.

For example, the median household income in Brevard County from 2008-2012 was $60,792 while the median household incomes in ZC’s 32922 and 32926 during the same time period were $31,263 and $53,926, respectively. Similarly, the percent of the population (over the age of 16) that was unemployed was 7% in Brevard County, but was 10% in 32922 and 8% in ZC 32926. In 2012, 15% of families with children under the age of 18 lived below the poverty line in Brevard County; however, 48% of families with children under 18 lived below the poverty line in ZC 32922 and 19% in 32926. Additionally, 9% of families living in Brevard County from 2008-2012 were single-parent, female headed-households with children under the age of 18. During that
same time period, 26% of families in ZC 32922 and 7% in 32926 were single-parent, female headed-households.

DCF data indicates residents in the target zip codes received more government assistance compared to the county average. In 2012, the average rate of food assistance clients in Brevard County was 151 per 1,000 residents and the rate of clients that received Temporary Assistance for Needy Families (TANF) was 4 per 1,000 residents. The average rate of food assistance clients in ZC 32922 was 438 per 1,000 residents and the rate of TANF clients in ZC 32926 was 13 per 1,000. In ZC 32926, the rate of food assistance clients was 179 per 1,000 residents and the rate of TANF clients was 7 per 1,000. Research shows children and families residing in lower income areas are often faced with a range of problems including violence, disengagement and poor access to community services (Sampson, 2011; De Coster, Heimer, & Wittrock, 2006; Kirby & Kaneda, 2005). DCF data indicates in FY 2012-2013, ZC 32922 led the county in verified abuse cases, accounting for 10% of cases in the county and ZC 32926 accounted for an additional 6%. Research suggests that lower income areas impacted by violence, abuse, and disengagement are more likely to house schools with high levels of school disorder, poor school climate and disciplinary problems (Chen, 2008; Khoury-Kassabri, Benbenishty, Astor, & Zeira, 2004; Welsh, Stokes, & Greene, 2000). In May 2014, the Brevard County helpline for mental health services logged 3,016 calls for the entire county. Of those calls, 236 (or 12%) were from residents living in the 32922 ZC which accounted for the highest number of calls from a single zip code. According to the Brevard Public School System Data provided in the following section, it is clear that these community problems are negatively impacting the climate and safety of the targeted schools.

**Brevard Public School System Data:**
Brevard Public Schools has identified these five LSE feeder pattern schools: Cocoa Junior/Senior High School, Cambridge Elementary, Endeavour Elementary, Saturn Elementary, and Emma Jewel Charter School. Table 1 describes the Free and Reduced Lunch and Homeless demographic characteristics of the five target schools compared to the rest of the district.

| Demographic Characteristics of Students Attending Target Schools (SY 2013-2014) |
|---------------------------------|--------------------------------|---------------------------------|---------------------------------|--------------------------------|
| **Table 1:**                    | Cambridge (PK-6)               | Endeavour (PK-6)                | Saturn (PK-6)                   | Emma Jewel (K-6)                |
| **Grades**                      |                                |                                |                                |                                |
| **Total Population**            | 630                            | 845                            | 820                            | 194                            |
| **% Free and Reduced Lunch**    | 100%                           | 100%                           | 100%                           | 94%                            |
| **% Homeless**                  | 12%                            | 5.5%                           | 5%                             | 11%                            |

As shown in table 2 below, Cocoa Junior/Senior High has substantially higher levels of school discipline problem including discipline referrals, suspensions, and expulsions compared to the average across all of the other junior/senior high schools in the county.

| School Problems at Target School Compared to all other Secondary BPS (SY 2013-2014) |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|--------------------------------|
| **Table 2:**                    | Cocoa Junior/Senior High School (Target School) | Average from all other Junior/Senior High Schools in BPS (n = 4) |
| **Total Enrollment**            | 1,419                           | 756                             |
| **Discipline Referrals**        | 4,491                           | 974                             |
| **Suspensions**                 | 1,022                           | 175                             |
| **Expulsions**                  | 66                              | 1                               |
| **Absentees**                   | 7119                            | 663                             |

Similarly, as shown in table 3 below there are also heightened disciplinary problems at Cambridge and Endeavour elementary schools which are two of the Cocoa Junior/Senior High feeder schools.
Based on the research described above, the problems reported by these schools can have a negative impact on school climate and school safety.

Section Two: PROJECT DESIGN AND IMPLEMENTATION

Project Aims

The overall goal of the proposed program is to improve the school climate and school safety at Cocoa Junior/Senior High and the four feeder schools through the implementation of mental health training for school personnel and mental health services for students and families. NAESP (2007, pg. 1) broadly defines school climate as the “feelings and attitudes that are elicited by a school’s environment. Most researchers agree that school climate is a multidimensional construct that includes physical, social and academic dimensions.” The proposed study seeks to focus on the social dimension of school climate by improving the quality of interpersonal relationships among students, teachers, parents, and the mental health and behavioral problems within the school. School climate can impact school safety because schools that foster positive relationships and are able to effectively address mental health and behavioral issues decrease the probability of discipline problems, low attendance rates and violence (Brand et al., 2003; NAESP, 2007; Welsh, 2000). Based on the issues occurring at the targeted schools (discussed above), there are three
objectives of the proposed program. We expect that meeting each objective will lead to improvements in school climate and school safety.

**Objective 1**: Train all school personnel on effective strategies to recognize, identify and respond to students’ mental health needs.

**Objective 2**: Increase the mental health services available to students and their families.

**Objective 3**: Train School Resource Officers (SRO) and community law enforcement agents on appropriate intervention techniques for students in crisis.

**Program Design**

The factors contributing to a poor climate and school safety are linked to connecting students and families to appropriate mental health services. This proposed program seeks to improve school climate and safety by assigning a dedicated social worker to each school, mental health awareness training and support, law enforcement crisis training and meaningful parent engagement opportunities.

For schools located in lower socio-economic areas (LSE), the responsibility of providing mental health services falls on the individual professional school counselors due to the lack of support from a qualified social worker directly serving the school. While professional school counselors are considered to be competent at counseling children and adolescents in a school setting, they are vastly limited by the number of students they must serve. According to the American School Counseling Association’s National Model, 1:250 is the recommended ratio between counselor and student (Student to School Counselor Ratio, 2011). This recommendation is not being met within BPS schools where the current staffing plan allocates at the Elementary (PK-6) 1:749, 1.5:750 ratios and Secondary (7-12) 1:637, 2:638-1062, 3:1063-1487 ratios. Additionally, the five targeted schools do not have dedicated social workers. The direct result has
been a delay in identifying and providing appropriate mental health services for students and families, which in turn, can potentially impact school safety through students having unmet mental health and behavioral needs. The current student-to-social-worker ratio recommended by the School Social Work Association (SSWA) is 1:400 students (School Social Work Advocacy, 2014). BPS had a reported 11 social workers during SY 2013-14 resulting in a 1:6374 ratio which is fifteen times higher than the recommended SSWA ratio of 1:400.

This significant discrepancy in the social worker recommended ratio coupled with the excessive disciplinary referrals and absenteeism prevalent at the named schools support the need for hiring full-time mental health therapists (social workers) for the target schools. By contracting with a community mental health agency it is anticipated that the agency will be assessing the ability to sustain the social worker positions beyond the grant cycle. The social workers will be responsible for a number of tasks aligning with the three program objectives.

**Objective 1: Train all school personnel on effective strategies to recognize, identify and respond to students’ mental health needs.**

Each social worker and two district level student services personnel will be trained as a trainer in Youth and Adult Mental Health First Aid. The Mental Health First Aid training is included in the Substance Abuse and Mental Health Services Administration’s (SAMHSA’) national registry of evidenced-based programs and practices. Social workers will be trained by Mental Health First Aid consultants in current strategies for supporting mental health services and will, in turn, be responsible for training school stakeholders. Both Adult and Youth Mental Health First Aid programs introduce participants to risk factors and warning signs of mental health problems, build understanding of their impact, and overview common treatments. The youth course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches
a 5-step action plan for how to help young people in both crisis and non-crisis situations. Topics covered in both trainings include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders. Individuals trained in these programs will increase knowledge of signs, symptoms, and risk factors of mental illness and addictions. The social worker will then administer the mental health first aid training to school personnel, including teachers, staff, administrators, law enforcement officers and community to include parents to assist them in addressing the mental health needs of the students and adults. Trainings will be offered at the start of each academic year during and beyond the grant cycle.

**Objective 2: Increase the mental health services available to students and their families.**

The social workers will also provide direct mental health services to students and their families. We estimate that each social worker will provide services to approximately 200 students per school year. This will include providing a psychosocial assessment (Children and Adolescent Needs and Strengths, Lyons, 1999) to identify mental health needs, brief counseling to students and their families and referring students and families to mental health services in the community for further treatment when indicated. Follow up referral services will be provided by the social worker and case management as needed. Providing these clinical services to problem students and their families is expected to prevent school-related discipline, attendance, suspension/expulsion issues as well as directly addressing students’ difficulties in making appropriate social and academic choices which should enhance their chances of success.

The social worker will also focus on teaching targeted students (students referred by faculty, staff or parents) new ways to regulate emotions. After receiving training in the Zones of Regulation curriculum (Think Social Publishing, Inc. 2011), the social workers will teach self-
regulation and emotional control skills lessons that help students develop coping mechanisms, allowing them to manage overwhelming, painful and stressful situations. The school professional guidance counselor will also receive the emotional regulation training to serve as a partner with the social worker. As defined by Devin Kowalczyk from the Education Portal, emotion regulation is the conscious or unconscious control of emotion, mood or affect. By developing healthy coping mechanisms, students will think through their emotions and use them in productive ways. Increasing their emotional regulation skills will help students self-regulate their behavior to make more appropriate decisions. Students will have the opportunity to practice these coping methods in peer support groups and will be encouraged to use these methods not only at home but also at school. Using non-violent, alternative methods to deal with stressful situations reduces the use of interpersonal violence to solve problems, positively impacts behavior in school and improves the school climate overall.

The social workers will also serve as community outreach liaisons for parents. The social workers will provide families with support for parenting skills, understanding the stages of child and adolescent development and creating home environments that support children as students at each age and grade level. They will increase opportunities for two-way communication between families, school programs and student progress. Connecting families to resources and services will increase family efficacy and develop a rich collaboration with the school staff and community.

In order for trusting relationships to be formed there needs to be an environment where the social workers can meet with the students and families. Confidentiality is necessary to develop the trust and confidence that is important for a therapeutic relationship between consumers and providers. Individuals are entitled to receive mental health services with the expectation that information about them will be treated with confidentiality. The Florida Mental Health Act of 2000
(FMHA) and The Health Insurance Portability and Accountability Act of 1996 (HIPPA) regulations require all medical records, medical billing, and patient accounts meet certain consistent standards with regard to documentation, handling and privacy. In planning for the study, principals of the schools were surveyed to determine if they had adequate and secure space for the social workers to interact with students and families as well as comply with both the FMHA and HIPPA requirements. Emma Jewel is a charter school opened in 2013 and is housed in one of the district’s former elementary schools and therefore has a dedicated classroom which will be assigned to the social worker. The other four schools, as shown in table 4, are currently at permanent student capacity and, according to the principals, there are no secure rooms that can be considered permanent, secure and safe locations for these meetings.

**Targeted Schools: Age of Building and Permanent Capacity**

<table>
<thead>
<tr>
<th>School</th>
<th>Year Built / Age of School</th>
<th>Student Enrollment</th>
<th>Permanent Capacity / Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cocoa Junior Senior High</td>
<td>1969 / 45</td>
<td>1419</td>
<td>1579 / 90%</td>
</tr>
<tr>
<td>Cambridge Elementary</td>
<td>1959 / 55</td>
<td>630</td>
<td>649 / 97%</td>
</tr>
<tr>
<td>Saturn Elementary</td>
<td>1967 / 47</td>
<td>820</td>
<td>830 / 99%</td>
</tr>
<tr>
<td>Endeavour Elementary</td>
<td>1958 / 56</td>
<td>845</td>
<td>870 / 97%</td>
</tr>
</tbody>
</table>

As a result of the age and capacity issues, portable classrooms will be located on the campuses creating safe and secure environments for the students and families of the four target schools. These permanent classrooms will enable the social workers to carry out the study objectives with fidelity. Funding is requested to support the relocations and set-ups during year one. The district will incorporate the use of the portable classrooms into the district Student
Accommodate Plan in April 2015 and will commit to the required maintenance and annual utilization costs beyond the grant cycle.

To further develop solutions for youth mental health concerns, the peer-to-peer strategy currently used by BPS will be expanded. In 2012-13, teams of secondary students and faculty leaders received training from the Bridgewater State University and the Massachusetts Aggression Reduction Center in peer-to-peer strategies to help address bullying and cyberbullying in BPS schools. While this strategy continued in the 2013-14 school year and has been effective in contributing to a more positive supportive school climate, the next level of training which involves providing peer mediation is needed. Facilitator leaders and peers will develop a site-based peer mediation program. Therefore, the proposed program will expand the peer-to-peer strategy by including peer mediation as a method for reducing school discipline issues. The faculty leader and youth will be trained by a district level peer mediation trainer. We need to engage our youth in developing strategies to prevent bullying and violence in our communities/schools. Children contribute valuable perspectives on the problems faced by their peers. Peer-to-peer groups participate in projects to prevent crime and bullying, volunteer in community-based prevention projects, mediate conflicts in schools and develop youth prevention-focused programs.

**Objective 3: Train School Resource Officers (SRO) and community law enforcement agents on appropriate intervention techniques for students in crisis.**

An estimated 25 law enforcement agents annually will be trained in appropriate children and adolescent crisis intervention techniques. Crisis Intervention Training (CIT) is currently offered by the Brevard County Sheriff’s Office in conjunction with Brevard Partners in Crisis. The CIT model offered in Brevard is based on the Memphis Model (Dupont, Cochran, & Pillsbury, 2007). It is a voluntary program where law enforcement officers from agencies across the county are
encouraged to participate. CIT is administered by local mental health professionals and is a 40-hour innovative first-responder model of law enforcement based crisis intervention.

As part of the proposed program, specialized Crisis Intervention Training – Youth (CIT-Y) curriculum will be added to the existing Crisis Intervention Team (CIT) training for SROs and community law enforcement officers who participated in the 40-hour CIT program. Law enforcement officers often serve as first responders during crisis situations involving children and adolescents within and outside of the schools (e.g., Baker Act cases). In addition, law enforcement officers assigned to jurisdictions where the target schools are located often work closely with school staff as a community liaison. Therefore, providing CIT-Y training to law enforcement officers assigned to the schools and the communities will help officers develop the skills to recognize childhood and adolescent mental health and/or substance abuse issues. SROs certified in CIT and CIT-Y will be better equipped to respond to school incidents where mental health issues are a factor. Through the CIT training, SROs will learn to effectively manage situations by accessing, evaluating and de-escalating situations, resulting in the best possible outcomes.

The CIT-Y curriculum will follow standards set by the National Association on Mental Illness (NAMI) and will utilize community experts with advanced skills in trauma-informed care, suicide awareness and prevention, and specific de-escalation techniques shown to be effective with children/youth (see Markey, Usher, Gruttadaro, Honberg, & Cochran, 2011). During the grant period, a localized CIT-Y program will be developed and offered to SRO’s and law enforcement officers in the community.

**Research Design and Methodology**

The overall research question addressed by the proposed program is: Does increasing the mental health services in a low socioeconomic school improve school climate and school safety?
Based on this research question, the evaluation of the proposed program will involve two levels of study. We will conduct a quasi-experimental, prospective longitudinal study of the aggregate effects of the program by comparing changes in school climate and school safety at Cocoa Junior/Senior High and its feeder schools (i.e., treatment group) to a comparable junior/senior high school and its feeder schools located in BPS. We will also conduct a school-level, non-experimental design to examine how implementation of the program influenced school climate and safety. Finally, we will conduct a student-level, non-experimental pre/posttest designed to assess changes in students’ mental health needs, behavior and academic performance among students who worked with the social workers. The evaluation of the proposed program will rely on administrative data collected by BPS and self-reported data collected from school personnel and students. The data will be collected at both the school and individual levels. The collection of data will involve an active consent process that requires parental consent to participate in the survey. All data collection protocols will be subject to approval from the University of Central Florida’s (UCF) Institutional Review Board (IRB) including surveys, consent forms, and the de-identification process for all administrative and self-report data. The school-wide surveys will take students and staff approximately 45 minutes to complete (i.e., length of one class period).

The first level of analysis will focus on comparing perceptions of school climate and school safety at the targeted schools to three comparison schools – Palm Bay High School, Stone Middle School and University Park Elementary School. These schools have been chosen due to their similarity in socio-economic characteristics to the zip codes as well as having comparably high levels of discipline and attendance problems. We will collect pre-test data prior to the implementation of the proposed program at all eight schools (the five targeted schools and the three comparison schools). Then, there will be two data collection points during each academic
year through the end of the grant period. These data collection points will occur at the end of each semester (Fall and Spring). We expect to find similar rates of negative school climate perceptions and school safety measures at the pre-test level (prior to implementation) and to observe higher levels of positive change in the targeted schools, compared to the comparison schools, after implementation.

To measure perceptions of school climate, we will utilize the American School Climate Survey sponsored by the Center for the Study of School Climate and the National School Board Association’s Council of Urban Boards of Education (CUBE). The series of surveys includes a 25 question survey for students and one for teachers. These surveys measure perceptions of safety, trust, opportunities to succeed and perceptions of the quality of interpersonal relations within the school. School safety will be measured using both administrative and self-reported data. BPS will provide administrative data on discipline incidents, absences and school-based arrests. Self-reported data will be collected from students at each school regarding bullying, delinquency, substance use, violence, and victimization experiences at school.

Program impact will be measured by comparing aggregate levels (e.g., percentages, means), percent changes, perceptions of school climate and measures of school safety at each time point, as well as overall change from the pre-test to the last wave of data collection across the target schools and the comparison schools. As exploratory analysis, we will also compare aggregate levels of academic achievement and scores on the Florida Comprehensive Standards Assessment across the schools. The hypotheses guiding this component of the evaluation include:

H1: The targeted schools will show higher rates of positive perceptions of school climate compared to the comparison schools following the proposed program implementation, and,
H2: The targeted schools will show less need for school safety measures compared to the comparison schools following the proposed program implementation.

The second component of the evaluation will compare data collected through the surveys and administrative data at the pre-test (prior to implementation of the program) to data collected at each of the time points (end of each semester) following implementation. The study will compare the number of students seen by a social worker, perceptions of school climate and measures of school safety. The hypotheses guiding this component of the evaluation include:

H3: Compared to the pre-test measures from each school, the number of students that receive services from the social worker at the targeted schools will substantially increase,

H4: Compared to the pre-test measures from each school, positive perceptions of school climate among school staff and students will increase, and,

H5: Compared to the pre-test measures from each school, measures of school safety (discipline incidents, school-based arrests) will decrease.

This component will also include an evaluation of the training programs. For each program (school personnel, CIT-Y for SROs), a short pre/posttest survey will be conducted to measure increases in knowledge and perceptions of the usefulness of the training. Overall change in knowledge will be analyzed using assessment of change in item responses. The hypothesis guiding this component of the evaluation include:

H6: Compared to the pre-test measures, school personnel (teachers, administrators, SROs) that participated in the training will show positive increases in knowledge regarding how to effectively identify students with mental health needs, and,
H7: Compared to the pre-test measures, school personnel (teachers, administrators, SROs) that participated in the training will show positive increases in their perceptions of their ability to effectively respond to students with mental health needs.

Measures of perceptions of school climate and school safety are described above. The number and type of mental health services provided during the grant period will include the number of trainings provided and the number of participants at each training. The study will also administer the pre/post surveys to all participants (see discussion above) to measure training effectiveness. To measure services, the number of students who receive mental health services and the types of services received will also be tracked by the social workers.

The third component of the evaluation will focus on whether working with the social workers led to changes in mental health and behavioral needs, perceptions of school climate, and measures of school safety. Once a student is referred to the social worker, the social worker will review all school records, consult with teachers and guidance counselors, meet with each youth and parent/guardian, and administer an evidence-based needs assessment instrument to each student. Specifically, the CANS, a comprehensive instrument regularly used in mental health services, schools, medical settings and child and family services by child-serving agencies across the state, will be employed (Lyons, 1999). It is a tool that social workers use to measure a number of strengths and risk factors. These include behavioral and emotional needs, family/caregiver needs, life functioning, history of trauma and resiliency factors. The results of the assessment will be used as a pre-test measure. Each student will then be asked to complete a survey at the end of every semester that will include re-administering the CANS, responses from the school climate survey, self-reported bullying, delinquency, substance use and violent behavior. Questions measuring each student’s academic progress will be included. Administrative data provided by BPS on each
student’s discipline incidents, school-based arrests, tardiness and grades will also be collected at the end of each semester. The hypotheses guiding this component of the evaluation include:

H8: Working with the social worker will result in more positive perceptions of school climate,

H9: Working with the social worker will result in decreased discipline incidents, tardiness, unexcused absences, and school-based arrests, and,

H10: Working with the social worker will result in increased academic achievement.

The expected sample size for this study is the 200 students that are referred to the social worker per academic year. The analyses will also involve bivariate and multivariate comparisons of the pre- and post-test measures. To ensure valid comparisons, the number of visits with the social worker, services received, family environmental factors and previous and/or additional mental health services received will be collected and controlled. Student-level factors such as grade, previous grade failures and current classroom or teacher will also be controlled.

**Section Three: POTENTIAL IMPACT**

The potential impact of the program results is far reaching including the students and families attending the targeted schools, communities where the schools are located, and the school district. Improving the lives of the students and families attending the targeted schools through reducing mental health, family, and behavioral problems is the primary goal of the proposed program. Through improving school climate and school safety, students will feel more connected to the learning environment and will improve academic achievement. This, in turn, can lead to long term impacts such as increases in the number of students on target for college and career readiness, higher rates of employment, increased earning capacity opportunities and less dependency on social services in zip codes 32922 and 32926. In addition, the expectation is that
once school administrators and community stakeholders are exposed to the positive impact of the program they will seek to replicate it in other schools, such as the comparison schools included in the current evaluation.

The positive results achieved will significantly contribute to our knowledge regarding best practices in improving school climate and school safety while highlighting the need for adequately trained social workers and mental health training programs for school personnel within low income schools. The detailed evaluation of the program will provide empirical evidence that students and parents can positively impact school safety through education, training, and service linkage. The program design as well as a rigid evaluation process will provide strong evidence of its effectiveness. The final result will be a program model that can be replicated in jurisdictions across the country for school safety policies and programs that work.

The dissemination of program results will be critical to the success of the proposed project. This project is designed to inform both practitioners and academics. It will be written and disseminated in ways that are appropriate for reaching each intended audience. For practitioners (e.g., school administrators, teachers and school resource officers), as well as the media and general public, the research team will produce reports, press releases, and, if requested, presentations. In addition to the final project report, smaller, single-topic reports will be compiled. These mini-reports will contain descriptive data (e.g., means, percentages) and brief write-ups. They will be made available to outlets and organizations identified by the Brevard County Public Schools personnel.

Manuals outlining the program design, implementation process and evaluation plan will be developed. These resources will include an overall program manual, as well as a manual specific to the CIT-Y training program. Potential audiences for these documents include educators,
juvenile justice researchers and practitioners and social work organizations. These products will be disseminated through local, state, and national conferences, webinars, and possibly local, state, or national trainings. These documents will be accessible to the public through both the BPS and UCF websites. The longer term goal for the CIT-Y training manual is to expand the program to other child-serving agencies within the county and to create a model that can be replicated in other jurisdictions to train law enforcement officers, SROs, and other professionals that work with youth with mental health problems.

Academic audiences will be reached via the publication of studies utilizing the obtained data. Scholarly products will be developed and submitted to peer reviewed journals in the social work, criminal justice and education fields. The first manuscript will summarize the overall evaluation of the program. This paper will include a detailed description of the program, implementation process and a summary of the main school-level findings related to changes in school climate and school safety. The second scholarly product submitted for peer review will focus on changes in students’ perceptions of school climate, mental health needs, behavioral problems and academic performance after working with the social worker. These analyses will summarize the student-level findings and control for the time and longevity of the services received, academic and discipline history of the student and classroom factors such as grade and teacher. Finally, a paper that describes, in detail, the pre/post test results of the training programs and how these program impacted teachers’ perceptions of school climate and school safety will be developed.

Since this study involves policy and practice, it is appropriate for both general criminal justice/criminology journals, journals dedicated to educational audiences and journals that specialize in policy analysis. Journals such as *Criminology & Public Policy, Review of Educational*
Research, and Evaluation Review are examples of academic outlets in the fields involved. Finally, results will be presented at the annual American Society of Criminology and Academy of Criminal Justice Sciences conferences; potentially at the National Educational Association and other education-related meetings, as requested by the project team.

Section Four: CAPABILITIES / COMPETENCIES

Qualifications and Experience of Proposed Staff

According to the Brevard Superintendent of Schools, Dr. Brian T. Binggeli, “School is a time to thrive, learn and discover interests and talents.” Increasing mental health services will enable schools to improve the climate by improving response to behavioral issues resulting in a safer school environment. Central to the Brevard Public School’s management plan is a dedicated instructional leader and visionary superintendent. Since 2009, Dr. Binggeli has worked tirelessly to connect the nobility of what we do to the mission of the organization. The overarching school district mission “to serve all students with excellence as the standard” is enhanced by the district Student Services vision: “to provide assistance and a variety of activities to help students develop their academic skills, broaden their educational experiences and overcome problems that could interfere with their academic success.”

Guided by the School District and the Student Services Division vision, all individuals involved have an obligation to ensure the success of the School Climate Safety (SCS) Study and its proper administration and efficiency. As shown in the BPS-SCS Support Structure organizational chart (Appendix A), over 30 key personnel are contributing to the support and oversight of the study. Through a collaborative partnership, BPS has the support of the University of Central Florida (UCF) College of Health and Public Affairs: Departments of Criminal Justice, Public Administration, and Social Work (See Appendix B) to serve as the study research entity.
All research methods and strategies will be submitted to the UCF internal review board for review and approval prior to implementation. The partnership between BPS and UCF will ensure protection of the rights and welfare of human subject research participants thereby complying with all Federal, U.S. Department of Justice (DOJ), Office of Justice Programs, and NIJ regulations and policies concerning the protection of human subjects and the DOJ confidentiality requirements. Additionally, the district has the support for this study from the State of Florida Department of Children and Families, many district and community mental health service agencies, the school principals, and local law enforcement agencies (Appendix C).

There are six levels of organization for the management plan: 1. Oversight, 2. Governance Council, 3. Administration, 4. Compliance, 5. Evaluation, and, 6. Fiscal Responsibility. Each level has a distinctive purpose and identified stakeholders. The following provides a brief summary and identification of the stakeholders involved in each level:

1. **Oversight**: To provide guidance and support for SCS alignment with Curriculum and Instruction, Student Services, School Choice, Equity and Financial Services for program success and sustainability. Receive program updates, analyze data and determine strategies for replication of programs at other schools in the district. Stakeholders: School Board Members, Superintendent, Assistant Superintendent Student Services, Associate Superintendent of Financial Services, Assistant Superintendent of Educational Technology and School Board Attorney.

2. **Governance Council**: To meet, at a minimum, twice annually (December and May) to review each SCS progress, gauge program development, and examine future program goals and milestones. Stakeholders: Director of Student Services, SCS Study Project Coordinator, social workers, community law enforcement officers, UCF research partner
representatives, school administrators, school faculty members and parent representation from schools.

3. **Administration**: To ensure all aspects of the SCS grant are being administered with fidelity by conducting on-site program reviews and constant review of program and financial activity. Stakeholders: SCS Study Project Coordinator, SCS Accounting Specialist, School Administrators, social workers, professional school counselors, and faculty members.

4. **Compliance**: To monitor SCS Study compliance with all federal grant requirements for program and financial activity. Stakeholders: SCS Study Project Coordinator, SCS Accounting Specialist, and UCF research partner representatives.

5. **Evaluation**: To collect program data for reporting to the Governance Advisory Council, Oversight personnel, and the schools. Stakeholders: SCS Study Project Coordinator, social workers, faculty members, BPS data management, BPS testing and accountability representatives, and UCF research partner representatives.

6. **Fiscal Responsibility**: To maintain accurate financial accounting of all SCS study program expenditures and prepare financial reports for submission to the NIJ, SCS Governance Council, SCS Oversight personnel and the schools. Stakeholders: SCS Study Coordinator, SCS Accounting Specialist, SCS, district Federal Fund Accountant, and UCF research partners.

BPS will maintain a high level of program transparency through shared governance with the SCS Governance Council. Within 30 days of grant award, BPS will begin the process of establishing a SCS Governance Council comprised of a diverse membership including representation from parents, teachers and the community. Advisory Council members will have
the opportunity to review the BPS SCS plan and to provide input on implementation. Advisory council members will have the opportunity to understand their roles in relationship to federal and other legal requirements. BPS plans to set dates for semi-annual meetings. By December 31, 2014, BPS will fully implement a system for governance, fiscal responsibility and organizational effectiveness as measured by program monitoring and reporting. The council’s initial meeting will be held in the spring of 2015 to review the goals and project timeline for implementation and the first meeting to review project progress will occur in December of 2015. The second council meeting for progress monitoring will occur in May of 2016. The SCS governance – advisory council will continue to meet semi-annually in December and May through 2017.

**Capacity to Manage the Effort**

BPS has policies and procedures which comply with existing Florida Statutes, State Board of Administrative Rules and the policies of the School Board of Brevard County. The policies and procedures for accounting are used in conjunction with Comprehensive Information Management System (CIMS) and procedures for purchasing. These policies and procedures will enable the district to effectively and efficiently administer the School Climate and Safety Study (SCS) program.

The Florida Department of Education requires all School Districts to use a uniform chart of accounts for budgeting and financial reporting. This document is incorporated by reference in Rule 6A-1.001, Florida Administrative Code, pursuant to the requirements of Section 237.01 and 237.02, FS.

The SCS Study budget is set up using the designated functions and object codes defined in statute. Object classification indicates the type of goods or services obtained relative to a specific expenditure. There are seven major object categories used to cover broad categories of services.
Each year, the budget narrative will be prepared and submitted to the Office of Budgeting and Cost Accounting. The accounting staff verifies that adequate funds are received to cover salaries and benefits and that the remaining budget items have been prepared using appropriate allowable codes.

BPS maintains budgetary controls over all financial transactions of the district to ensure compliance with federal, state and local mandates. Budgetary controls for the SCS Study will be established like all other projects at individual account level. Each program will be assigned a project number for tracking, monitoring, and accountability in the district electronic accounting system. Budgetary information is integrated into the district’s accounting system. To facilitate budgetary controls, budget balances are encumbered when purchase orders are issued. School Board policies are established to provide for fiscal accountability and fiscal authority regarding payroll, purchasing and vendor payments.

The district undergoes an annual audit by independent certified public accountants with the exception of every third year. These audits are then carried out by the State of Florida Auditor General’s Office. The district has an ongoing annual contract with a large national accounting firm that specializes in internal auditing services. The firm provides an annual risk assessment to the school board, to the audit committee and to the superintendent. The audits are operational in nature and measure the risk of the organization and its operational processes. The independent internal auditors report directly to the audit committee which includes five voluntary community members, each appointed by a respective board member. The audit committee assists the district’s management team with maintaining a high level of accountability and fiscal responsibility to the school board and its citizenry. School board policy provides the audit committee with oversight
responsibility for the internal audit function and also the authority to act in an advisory capacity to assist district management and the board in implementing change throughout the audit process.

**Demonstrated Ability to Conduct Sophisticated Research**

The evaluation portions of this project will be carried out by experienced researchers from the University of Central Florida’s (UCF) College of Health and Public Affairs (COHPA). Participating COHPA units include the Department of Criminal Justice (CJ), School of Social Work (SW) and School of Public Administration (PA). The PI Kristina Childs, Ph.D. (CJ) is a MacArthur Foundation funded researcher; Co-PIs Roberto Potter, Ph.D. (CJ) is completing a NIJ-funded project and has completed several BJA-funded projects, Vanessa Lopez-Littleton, Ph.D. (PA) is currently internship programs director with research interest in social determinants of health, Kimberly Gryglewicz, Ph.D. (SW) is currently working on research projects funded by Substance Abuse and Mental Health Services Administration (SAMSHA) and the National Institute of Nursing, has served as PI on numerous family violence prevention and intervention state contracts in Florida and Georgia. All researchers associated with the evaluation team have publication records demonstrating competency in research methods and data analysis. Each department/school involved has a Master’s program and participates in a college Ph.D. program in Public Affairs. The Department of Criminal Justice will be implementing a doctoral program in 2015. These graduate programs are the sources from which student research assistants will be selected.

UCF is a Carnegie Research 1 Institution. The Office of Research and Commercialization (ORC) is staffed to handle all phases of research administration from proposal development and submission, Institutional Review Board, grants management and close-out procedures. Within the College of Health and Public Affairs, there is also a Research Unit that provides all of the grants
management functions in conjunction with the ORC and closely with faculty researchers. The University processes more than $100 million annually in grants and contracts, and the COHPA Research Office manages more than $10 million annually.

**Relationship between Capabilities / Competencies of Project Staff and Scope of Project**

The SCS management plan and appointment of highly qualified key personnel was designed to achieve the objectives of the project on time and within budget, including clearly defined responsibilities, timelines and milestones for accomplishing project. To ensure a smooth implementation the district has identified Paula Ferrell, current district Students at Risk Resource Teacher as the most qualified individual to serve as interim SCS Study Project Coordinator (See Resume – Appendix D). Ms. Ferrell will provide continued support for the SCS Study Project Coordinator as needed throughout the grant cycle. All positions will be advertised and/or placed out for formal bid in accordance with state procurement administrative code and local school board policy requirements. Through this process the most qualified staff will be selected for all positions.

The following four positions are vital to the success of the SCS Study:

1. **Principal Investigator (PI) and Co-Principal Investigators Co-PI:** Kristina Childs PhD. (curriculum vitae – Appendix E) from the University of Central Florida will serve as PI for the study. Co-PI’s include Roberto Hugh Potter, Ph.D, Vanessa Lopez-Littleton, Ph.D., RN, and Kimberly Grygiewicz, MSW, Ph.D. (curriculum vitaes – Appendix F). The PI and Co-PI’s will oversee program accountability, administration of instruments for data collection, data analysis, and study performance measure reporting.

2. **SCS Study Project Coordinator:** The selected SCS Study Project Coordinator will supervise and manage all aspects of the SCS Study project for the district and serve as a
liaison between the district and external stakeholders directly involved in the study (See Appendix G for Job Description).

3. **SCS Study Accounting Specialist**: The selected SCS Study Accounting Specialist will coordinate all fiscal accounting responsibilities (See Appendix H for Job Description).

4. **Social Workers**: Five full-time (2 full-time social workers at Cocoa Junior/Senior High School serving 1,419 7th-12th grade students, one full-time social worker at each elementary - Cambridge, Saturn, and Endeavour serving 2,295 PK-6th grade students), and a half-time or .5 social worker (at Emma Jewel Charter serving 194 K-6th grade students.) The district will contract with a community mental health agency to hire and place social workers at each school site. The social workers will support and provide Mental Health Services, and monitor SCS study implementation at individual schools. The representative Mental Health Therapist – Social Worker job description submitted as Appendix I outlines specific job duties and responsibilities as well as job qualifications and abilities required of each social worker. Over the three year study period the district will work with the mental health agency to realize the value of having the social worker on the school site with the intent for the agency to continue funding for these positions.
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