TO: Mike Riggle

FROM: Rosanne Williamson

RE: Student Wellness Follow-up

DATE: April 22, 2014

CC: Board of Education

A student wellness study was conducted during the 2012-2013 school year. Data from the Illinois Youth Survey (IYS), High School Survey of Student Engagement (HSSSE) and trend data relative to student hospitalizations, homebound and concussions were reviewed. Needs were identified in relation to emerging trends in the student population.

As part of the 2013-2014 District Initiatives a plan to address student needs identified in 2012-2013 included the following tasks:

- 1. Review models used by other area schools to support students returning from homebound/hospitalization
- 2. Incorporate a clinical supervision model to supplement Glenbrook staff
- 3. Explore options for data warehousing including those available in PowerSchool
- 4. Develop a plan to expand communication efforts to students and parents regarding school/community resources

The following provides an update on tasks contained within this District Initiative. These tasks have been completed using existing district funds and no action by the board is being requested at this time.

### 1. Homebound/hospitalization Re-entry

Models to support students returning from homebound/hospitalization used by other schools in the area were studied during the 2013-2014 school year. The schools will incorporate existing staffing resources in the Guided Studies program and clinical staffing in a focused approach to support students in their return to the day school.

#### **Guided Studies**

A portion of existing staffing in the Guided Studies program will be utilized to better meet the needs of students upon reentry. In the future, additional FTE may be needed in this area. In this model, students are assigned to a teacher who serves as a liaison for the student for a portion of the day. Teacher responsibilities include contacting the student's teachers to determine work that remains to be made up, accessing other school resources to provide support and ultimately transitioning the student back to their regular schedule.

# **Clinical Staffing**

Existing clinical staff has been utilized to support students upon reentry and will continue to be incorporated in this capacity. Although the schools have provided social/emotional support for returning students, the intensity of services needed immediately upon reentry has put a strain on existing school resources. In the future, additional FTE may be needed in this area.

### Clinical Staff Responsibilities:

- Create reentry plan for students entering program
- Serve as program representative at reentry meeting
- Provide daily check-ins with some students (as necessary), post-hospitalization individual and group counseling, and/or short term crisis management/counseling
- Collaborate with outside providers (i.e., hospital therapist, psychiatrist, private therapist, etc.)

- Coordinate initial eligibility evaluations (as necessary)
- Consult with program case managers and teachers
- Communicate with parents
- Collect progress monitoring data

## 2. Clinical Supervision Model

Given the intensity of some cases seen by school psychologists and social workers, a clinical supervision model is being implemented in which outside consultants are used to confer with Glenbrook clinical staff on more difficult cases. Both schools are implementing this model and utilizing community resources to consult with staff. This resource is already provided for within the school's budget.

#### 3. Data Warehousing

Managing data regarding student wellness and those receiving interventions needs to be more accessible and centrally located so that student service personnel can quickly and easily access all relevant information when working with a student. Various digital data warehousing products were explored and continue to be pursued during the 2013-2014 school year. However, at this time there is no resource that has emerged as a solid solution to data warehousing. Elements within the new student information system, PowerSchool, have been further developed, but a need still exists in this area.

# 4. Student/Parent Education/Communication

Both schools are using the Elyssa's Mission, Signs of Suicide, curriculum within Health classes. As part of this, Erika's Lighthouse presents to all Health classes and provides information to students regarding resources at the high schools, as well as in the community. In addition, this same information regarding warning signs and resources are being given to staff, parents and community members. As newly required by State Code, staff have completed required training regarding the warning signs of suicide. We continue to educate parents and students on how to be technologically aware of the advantages and concerns with social media.