

Grant Programs for Behavioral Health and Safety in Schools

There are six grants administered by the Colorado Department of Education that are contributing to behavioral health and safety in schools. Two grants are federally funded and four grants are state funded. In addition, there are two state grant programs that are authorized in statute but are unfunded.

Colorado received two federal grant awards in 2014. The Office of Health and Wellness received the Substance Abuse Mental Health Services Association (SAMHSA) Project Aware Grant. This \$10 million grant will be spread over five years to build infrastructure and expand the capacity of the state and district partners around mental health. The Office of Dropout Prevention and Student Re-engagement received the US Department of Education School Emergency Management (SEM) Grant. This grant represents a partnership with the Colorado School Safety Resource Center. The goal is to train 100 school teams in developing high-quality emergency operation plans, with a focus on rural districts, charters and private schools.

In FY 2015-16, \$23,142,811 in grant funding will contribute to behavioral health and safety in schools. This represents \$2,363,411 in federal funds and \$20,779,400 in state funds. Descriptions of the state grant program are provided in the following table. Additional details on the federal grant programs are also provided.

State Grants Programs - Behavioral Health in Schools					
Grant Title	Description	Number LEAs/ Schools Served	State Funds Appropriated 2015-16		
Expelled and At-Risk Student Services Grant Program (EARSS)	Assists in providing educational services to expelled students and at-risk of expulsion students. Authorizing Legislation: Expulsion Prevention Programs, Part 2 of the School Attendance Law – of 1963 (§22-33-201 to 22-33-205, C.R.S., Effective April 1996)	34 districts /BOCES in 2013- 14	\$ 7,493,560		
Enacted in 1997	Through competitive grant process awards 4-year grants to local education agencies and facility schools. During the 2013-14 school year, 52% of 44 grantees utilized EARSS grant funds for mental health/counseling services. This refers to either school-based or community-based services by qualified school staff or other mental health professionals. In 2013-2014, 45 grantees located in 22 counties, serving 34 districts and 10 facility schools. Grantees served 8,635 students and 6,099 parents/guardians. For a copy of the 2013-14 evaluation report visit: www.cde.state.co.us/dropoutprevention/earss_evaluation				

Comprehensive	Originally enacted in 1075 was repealed and as acted in 1000	10	¢1.00F.30C
Health	Originally enacted in 1975, was repealed and re-acted in 1990. Authorizing legislation - §22-25-101 to 22-25-110, C.R.S.	10 districts	\$1,005,396
Education of	Encourages every school district to provide a pre K-12th grade	in 2013-	
1990	planned, sequential health education program. Parental and	14	
 Enacted in	community involvement in the program is stressed. Parents and		
Enacted in 1990	guardians have the right to exempt from any or all of the health		
	education program.		
	All Districts or BOCES can apply for this grant which can then be renewed for an additional two years.		
	For more information visit,		
	http://www.cde.state.co.us/healthandwellness/HS Comprehens iveHealthEducation		
School		70	¢10,000,000
Counselor	Authorizing legislation (§22-91-01, C.R.S., Effective May 2008) SB14-150 Amended Effective May 2014.	75 schools	\$10,000,000 – increased
Corps Grant	The purpose of SCCGP is to increase the graduation rate within	in 2013-	from
Program (SCCGP)	the state and increase the percentage of students who are	14	\$5,000,000 in 2013-14
(SCCGP)	appropriately prepared for, apply to, and continue into postsecondary education.		2013-14
	Through competitive grant process awards 4-year grants to local education agencies.		
Enacted in 2008	Award priority goes to schools with higher-than-average		
	remediation rates, numbers of first-generation students applying		
	to postsecondary schools, numbers of at-risk students at the		
	school, and dropout rates; in underserved geographic locations; and with higher-than-average counselor-to-school ratios.		
	School counselors are interventionists that assist in determining		
	how to meet a student's social/emotional needs in order for		
	them to be engaged in the classroom. They do not provide		
	intensive, individualized mental health supports.		
	School counselors recognize and respond to the need for mental		
	health and behavioral prevention, early intervention, and crisis services that promote psychosocial wellness and development		
	for all students.		
	In 2013-14, SCCGP Cohort 2 consisted of 23 grantees funding a total of 75 secondary schools.		
	Served 44,489 students, 64 percent of whom qualified for free or		
	reduced lunch on October 1, 2013.		
	For a copy of the 2013-14 evaluation report visit:		
	http://www.cde.state.co.us/postsecondary/schoolcounselorcor		
School Health	Authorizing logislation \$22.06.101 to 22.06.105 C.R.S.	20	¢2 200 444
Professional	Authorizing legislation - §22-96-101 to 22-96-105, C.R.S.	20 districts	\$2,280,444
i roiessional	This program enhances the presence of school health professionals in secondary schools throughout the state to	in 2015-	
Enacted 2014	facilitate better prevention education, screening for early	16	
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identification, and referral care coordination for secondary school students with substance abuse and other behavioral health needs.

It intends to reduce the risk of marijuana and other substance use and abuse by secondary school students.

School health professionals need to be licensed school practitioners or eligible for CDE licensure; this includes psychologists, nurses, counselors and social workers.

Competitive 1-year grant awards to local education agencies and are granted depending on the number of health professionals added to help bring the student-to-school health professionals to the recommended ratio.

For more information visit, http://www.cde.state.co.us/healthandwellness/schoolhealthpro fessionalgrantprogram

Unfunded State Grants Programs - Behavioral Health in Schools

Healthy Choices Dropout Prevention Pilot Program

Creates a pilot out-of-school program to enhance academic achievement and physical and mental health of adolescent students to encourage healthy choices and reduce dropout rates.

(§ 22-82.3-102, C.R.S., Approved May 21, 2009) The objective is to enhance the academic achievement and physical and mental health of adolescent students and thereby improve student attendance and reduce the number of students who fail to graduate from high school.

Authorizes CDE to seek and accept gifts, grants and donations from private or public sources for the program.

After implementation requires report to the Education and the Health and Human Services Committees of the General Assembly concerning the activities carried out under the program and the effectiveness of the program.

Bullying Prevention and Education Grant Program Creates the school bullying prevention and education grant program in the department of education to allow a public school, a facility school or a collaborative group of public schools or facility schools to apply for grants to fund programs to reduce the frequency of bullying incidents.

(§22-93-102, C.R.S., Effective May 13, 2011) The department shall solicit and review applications from public schools and facility schools for grants. Applying certain minimum criteria, the department may award grants for periods of one to three years (§ 22-93-103, C.R.S.)

The school bullying prevention and education cash fund is established in the state treasury. The department may seek, accept and expend gifts, grants and donations from public and private sources to fund the program. (§ 22-93-105, C.R.S.)

Requires district charter schools and institute charter schools to adopt and implement policies concerning bullying prevention and education. (§ 22-30.5-116, C.R.S.)

Federal Grants Programs for Behavioral Health and Safety in Schools					
Grant Title	Description	Number Districts/ Schools Served	Federal Funds Appropriated 2015-16		
Substance Abuse Mental Health Services Association (SAMHSA) — Project Aware 5-year grant	Colorado's Project Aware project aims to build a comprehensive, coordinated and integrated school behavioral health services system that supports every student in Colorado in reaching their fullest potential in school and life. Involves collaborating with behavioral health stakeholders across the state to improve mental health awareness and response. Includes partnership with three school districts, Aurora Public Schools, Fountain-Fort Carson and Thompson. In addition, Project AWARE will be working with Mental Health First Aid Colorado to provide Youth/MHFA training across the state. For more information visit, http://www.cde.state.co.us/healthandwellness/projectawar	3 district and multiple state partners in 2015-16	\$1,950,000		
USDE School Emergency Management Grant 1-year grant	The Colorado Department of Education and the Colorado School Safety Resource Center are partnering to provide training to schools and districts in developing and implementing high-quality, school emergency operations plans (EOPs). The goal is to train 100 schools teams, with a focus on serving rural school district, charter school, and non-public school teams. Centennial BOCES, San Juan BOCES, and Thompson School District received cooperative agreements to provide training coordination and planning in six Colorado regions. Grant funds are available to cover travel expenses and hiring of substitute teachers to help reduce barriers in training attendance. In addition to effective emergency planning, the project seeks to organize a training engagement committee to improve coordination of regional trainings that supports school safety and behavioral health. For more information visit, http://www.cde.state.co.us/dropoutprevention/schoolemergencymanagementgrant	TBD	\$413,411		

State Source: Bill summaries were taken from the digest of bill, which is prepared each year by the Colorado Office of Legislative Legal Services