

NC Project AWARE/ACTIVATE

Advancing Wellness and Resiliency in Education/ Advancing Coordinated and Timely InterVentions, Awareness, Training, and Education

An Innovation Station Cutting-Edge Practice

Purpose: This document is intended to support MCH professionals to implement a practice found in Innovation Station. This resource provides the information needed to replicate the practice and is divided into two sections: the first section provides a high-level overview of the practice while the second section describes how to implement the practice. For additional information on any of the content provided below, please reach out to the practice contact located at the bottom of this document.

Section I: Practice Overview

Location:	North Carolina	Title V/MCH Block Grant Measures Addressed
Category:	Cutting-Edge	NPM 9: Bullying NPM 12: Transition NOM 13: School Readiness NOM 16.3: Adolescent Suicide NOM 18: Mental Health Treatment NOM 25: Foregone Health Care
Date Submitted:	5/2020	

Practice Description

North Carolina’s Project AWARE (Advancing Wellness and Resiliency in Education) also locally known as NC Project ACTIVATE (Advancing Coordinated and Timely InterVentions, Awareness, Training, and Education) addresses the three tiers of mental health (promotion, prevention, and intervention) through a continuum of education, universal screening, and appropriate services and supports for all students in response to varying levels of need. Recognizing the interrelatedness of academic outcomes and mental health/well-being of students Project AWARE/ACTIVATE seeks to provide an embedded approach within an existing system (schools) versus fragmented and reactive approaches. Project AWARE/ACTIVATE promotes innovative service delivery based on the recommendations of the [NC School Mental Health Initiative](#) for equitable access to high quality and well-coordinated mental health and substance abuse services including 1) continuum of supports and services, 2) strategies to foster sustainability, and 3) engagement of all stakeholders. Project AWARE/ACTIVATE aims to provide NC students in grades PK-12 with access to universal screening and supplemental support based on behavioral or psychological measures of school engagement using evidence-based practices within the classroom and school settings.

Purpose

Based on the 2017-2018 National Survey of Children's Health*, 22.6% of children age 3-17 in NC have mental, emotional, developmental or behavioral problems (as compared to 21.9% nationwide). According to Mental Health America’s 2020 Youth Rankings*, NC ranks 44th (out of 51) in regards to 7 key youth indicators (at least one Major Depressive Episode (MDE) in the

past year, youth with substance use of disorder in the past year, youth with Severe MDE, youth with MDE who did not receive mental health services, youth with Severe MDE who received some consistent treatment, children with private insurance that did not cover mental or emotional problems, and students identified with emotional disturbance for an Individualized Education Program. States with rankings 39-51 indicate that youth have higher prevalence of mental illness and lower rates of access to care.

Schools are a natural and logical setting in which to employ a public health framework that focuses on promoting student well-being and healthy behaviors and preventing mental health problems before they occur. The Whole School, Whole Community, Whole Child (WSCC) model calls for schools to partner with communities and families to ensure that all students are healthy, engaged, safe, supported and challenged. The WSCC model aims to improve educational attainment and healthy development for students, and it recognizes mental health as a critical component for addressing the needs of the whole child. Developing comprehensive school mental health systems as part of the model is essential for supporting all students. School-linked mental health services eliminate common barriers for families such as taking time off from work, transportation, navigating complex systems, and longer wait times in the community clinic.

North Carolina's Project AWARE/ACTIVATE is a collaboration between the NC Department of Public Instruction and the NC Department of Health and Human Services to develop a comprehensive plan of activities, services, and strategies for connecting youth and families to mental health services in three pilot school districts.

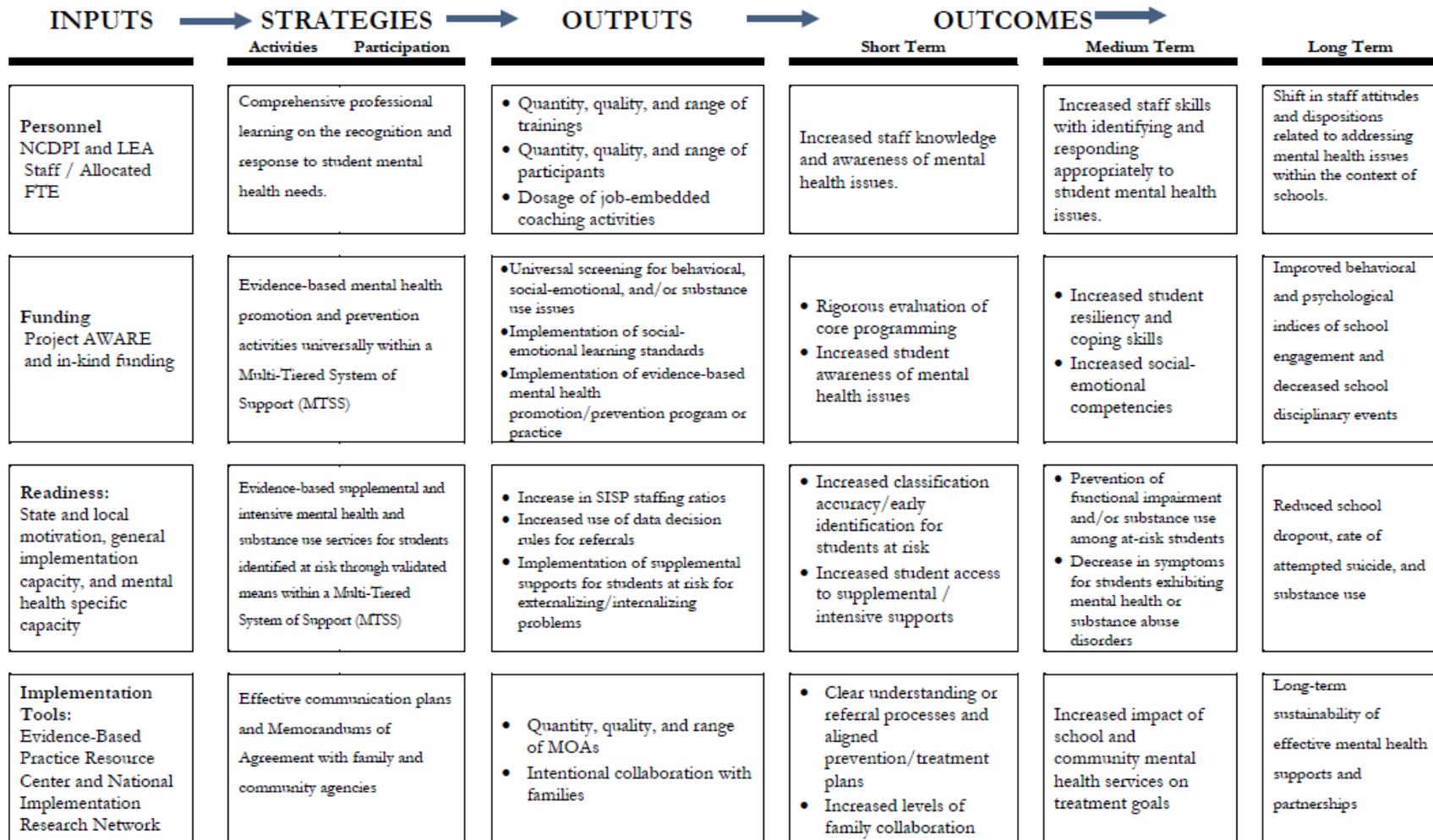
*Child and Adolescent Health Measurement Initiative. 2017-2018 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [6/20/20] from [www.childhealthdata.org].

*Mental Health America. [2020]. Ranking the States Data. Available at: <https://www.mhanational.org/issues/ranking-states>

Practice Foundation

The NC Project AWARE/ACTIVATE theory of action is based on the premise that when a full continuum of mental health and substance abuse services are equitably accessed by students within the context of schools, improvements will occur across key academic, behavioral, social, and physical indicators of student well-being. A full continuum of mental health services is operationalized by four primary critical components described in the theory of action on page 3.

NC Project ACTIVATE Logic Model



Core Components

Project AWARE/ACTIVATE focuses on promotion of mental wellness, prevention of mental health problems, and interventions to reduce the effects of a mental illness and restore mental health. For students, Project AWARE/ACTIVATE includes the following tiers of services:

- Tier 1 (Core Supports), for all students:
 - Social-emotional learning curricula
 - Bullying prevention programs
 - Schoolwide mindfulness education
 - Mental health screening
 - Prevention and wellness promotion
 - Positive Behavior Intervention and Support
 - Schoolwide trauma informed practices
 - Restorative discipline practices
 - Youth Mental Health First Aid
- Tier 2 (Supplemental Supports), for students needing additional support:
 - Targeted social skill instruction
 - Group counseling and support groups
 - Coordinated referral process and progress monitoring
- Tier 3 (Intensive Supports), for students needing intensive mental health supports:
 - Individual social skill instruction
 - Crisis counseling
 - Wraparound services
 - Individual support teams and plans

Practice Activities

NC Project AWARE/ACTIVATE utilizes the [National Center for School Mental Health](#) definition of Comprehensive School Mental Health System to define the necessary framework vision to build a school-linked mental health program that best supports the child within the educational setting. This framework includes the following practice activities:

Core Component	Activities	Operational Details
Educators and Student Instructional Support Personnel	<ul style="list-style-type: none"> • Adequate staffing and support • Workforce development training 	Well-Trained Educators and Specialized Instructional Support Personnel (ex. school counselors, social workers, school psychologists, school nurses, etc.) to support the mental health needs of students in the school setting via assessment, diagnosis, counseling, educational, therapeutic and other necessary services to support student needs.
Collaboration and Teaming	<ul style="list-style-type: none"> • Needs Assessment and Resource Mapping • Memorandums of Agreement (MOA) • Outreach and Engagement 	<p>Family-School-Community Collaboration and Teaming to broaden the availability of potential supports that can be available to students and families, enhancing access to mental health care.</p> <p>Connecting families, schools, and communities to increase engagement and involvement in planning and implementing school and community programs for school-aged youth.</p> <p>Conducting outreach and engagement with school-aged youth and their families to increase awareness</p>

		and identification of mental health issues and to promote positive mental health.
Multi-Tiered System of Support	<ul style="list-style-type: none"> • Supports and services are fluid • Tiers are layered 	Multi-Tiered System of Support - Based on a public health framework, prevention is an underlying principle at all three tiers, with Tier 1 (Core Supports) focusing on promoting mental health and preventing occurrences of problems, Tier 2 (Supplemental Supports) focusing on preventing risk factors or early-onset problems from progressing, and Tier 3 (Intensive Supports) focusing on individual student interventions that address more serious concerns and prevent the worsening of symptoms that can impact daily functioning.
Evidenced Informed Services and Supports	<ul style="list-style-type: none"> • Ongoing monitoring of implementation success 	Evidence-Based and Emerging Best Practices within an MTSS increases the likelihood that youth will have access to effective interventions matched to their strengths and needs.
Cultural Responsiveness and Equity	<ul style="list-style-type: none"> • Disaggregate key data points • Culturally and linguistically appropriate services and supports 	Access to mental health supports and services in a manner that is equitable and reduces disparities across all students.
Data-Driven Decision Making	<ul style="list-style-type: none"> • Identifying student mental health needs • Matching students to appropriate services and supports • Monitoring progress to evaluate student response to interventions • Changing student services and supports over time as appropriate 	Data outcomes, data systems and data-driven decision-making are all critical components to supporting a comprehensive school mental health system.
Policies and Infrastructure	<ul style="list-style-type: none"> • Funding diversification to sustainable programs and services. • Develop/enhancement of an infrastructure that will sustain and expand mental health and behavioral health services and supports for school-aged youth when federal funding ends. 	Optimize financial and nonfinancial assets needed to maintain and improve school mental health systems over time.

Evidence of Effectiveness/Replication

An external evaluator ([AnLar LLC](#)) provides assessments of the Project AWARE/ACTIVATE annual implementation efforts as well as an overall impact evaluation on the extent to which Project AWARE/ACTIVATE shows evidence of improving North Carolina students' psychological indices of engagement; reducing rates of dropout, suicide attempts, and substance use; and demonstrating an increase in the number of at-risk students receiving supports.

An important goal is to understand which strategies implemented over the five-year grant funding period are effective, under which contextual conditions to replicate these strategies, and how to scale up and sustain effective practices in North Carolina. Careful evaluation of the rationale for why the grant activities do or do not lead to the desired outcomes, or the empirical testing of the logic of the model, is critical to the long-term sustainability of NC Project AWARE/ACTIVATE. There are not yet outcome data measuring change from baseline as outcome measures require multiple years of implementation. In addition, the COVID-19 pandemic will likely impact outcomes. Pilot sites have utilized a variety of workarounds, tweaks, and other creative means to continue to meet grant deliverables. Once the pandemic is over, retrospectively assessing what has worked can play a useful role in order to improve preparedness for future pandemics.

Section II: Practice Implementation

Internal Capacity

Project AWARE/ACTIVATE is partnership between the NC Department of Public Instruction (NC DPI) and the NC Department of Health and Human Services (NC DHHS). On the state level, the Project AWARE Director position is housed within the Exceptional Children Division of NC DPI and the Project AWARE Co-Director position is housed within the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services of NC DHHS. The Co-Project Directors share responsibility for all essential aspects of the project, including technical or programmatic requirements, compliance with applicable policies and regulations, financial accountability, and administrative tasks as outlined by the Substance Abuse Mental Health Services Administration. Project AWARE/ACTIVATE partners with the School Health Unit of the Children and Youth Branch (C&Y Branch) of the NC Division of Public Health (NC DPH). The NC DPH C&Y Branch is the lead Title V agency. The Behavioral Health Clinical Consultant /Adolescent Health Coordinator with NC DPH, C&Y Branch serves as a key Project AWARE/ACTIVATE partner from the lead Title V agency and has fostered youth engagement in the project.

Local Project AWARE/ACTIVATE Directors at the Local Education Agency Level focus on promotion of mental wellness, prevention of mental health problems, and interventions to reduce the effects of a mental illness and restore mental health through:

- Early identification and referral systems
- Prevention and early intervention programs
- Memorandums of Agreement (MOA) between school districts and local mental health agencies to provide school-based services
- New policies and improved infrastructure to sustain the program after the grant period
- Connections with existing state and local programs
- Outreach and awareness campaigns to educate students and their families about mental health issues

One of the purposes of Project AWARE/ACTIVATE is to provide training for school personnel and other adults who interact with school-aged youth to detect and respond to mental health issues. To ensure this, one of the two FTE positions in each pilot district (Project AWARE/ACTIVATE Evaluator/Coach) leads the design and implementation of local professional development and coaching to ensure Public School Unit staff and stakeholders have the capacity to meet mental health needs of students using evidence-based practices.

Collaboration/Partners

The NC School Mental Health Initiative (NC SMHI) is a multi-disciplinary partnership of stakeholders related to the provision of mental health services to children and youth. NC SMHI reflects partnerships across disciplines, including community mental health providers, educators, advocates, lawyers, university officials, and parents, with the goal to provide policy/legislative support and recommendations for accessible, high-quality, and coordinated mental health services. The NC SMHI provides implementation and monitoring support related to mental health services that:

- Promote healthy development of social, emotional, and/or behavioral functioning;
- Prevent problems with social, emotional, and/or behavioral functioning;
- Respond to students experiencing concerns or problems with social, emotional, and behavioral functioning;
- Prevent and treat substance abuse.

The NC SMHI has crafted recommendations for equitable access to high quality and well-coordinated mental health and substance abuse that guide the work of NC Project AWARE/ACTIVATE including:

- 1) Continuum of supports and services for student mental health and substance abuse.
- 2) Strategies to foster sustainability.
- 3) Engagement of all stakeholders.

The NC SMHI meets every 2-3 months via a combination of in-person and virtual meetings. In-person meetings are rotated throughout the state. There are also regional SMHI networks in each of the 8 NC State Board of Education Districts. The regional networks support effective practices at the local level by providing an informed structure to guide implementation planning, identifying replicable practices that support effective implementation, and address challenges or barriers to implementation of comprehensive school mental health services and support. A standing agenda item for the NC SMHI and regional network meetings includes transfer of knowledge and resources from Project AWARE/ACTIVATE sites to surrounding counties. In addition, Project AWARE/ACTIVATE roles for the NC SMHI include sharing resources, especially universal/core practices, developed and/or implementing, supporting meeting agenda development, meeting logistics, raising awareness regarding Project AWARE/ACTIVATE, and demonstrating responsible sequence of local capacity-building.

Stakeholder feedback and engagement is assessed through a variety of methods including formal [Mental Health Technology Transfer Center](#) technical assistance provider training and technical assistance surveys, NC SMHI regional network meeting evaluations, and school mental health needs assessments surveys completed by local education agencies.

Practice Cost

SAMHSA funding for NC Project AWARE/ACTIVATE averages \$1.7 million per federal fiscal year. A detailed breakdown by budget category includes:

- Infrastructure Development, including Human Resources - 35% of budget
- Professional Development, Coaching, and Technical Assistance - 12% of budget
- Mental Illness Prevention and Mental Health Promotion - 18% of budget
- Direct Service Providers - 25% of budget

- Data Collection, Evaluation, and Performance Measurement and Assessment - 10% of budget

The average cost per student as determined by the combined student enrollment (32,120) divided by the school mental health annual budget for NC Project AWARE/ACTIVATE pilot sites (\$1,480,067) is \$46.

Budget			
Activity/Item	Brief Description	Quantity	Total
Personnel/ Fringe	Human Resources: <ul style="list-style-type: none"> • 1 State Education Agency Project AWARE Director • .5 State Mental Health Agency Project AWARE Co-Director • 3 Local Education Agency Project AWARE Directors • 3 Local Education Agency Project AWARE Evaluators/Coaches 	7.5 (FTE) positions	\$543,084
Travel	Travel as needed to attend local meetings, project activities, and training events.	Travel rate is based on NCPDI's policies/procedures	\$7,674
Supplies	Office supplies, computer equipment, copies, and video conferencing subscription for general operation of the project.		\$10,000
Contractual	Treatment services for students not responding to universal and supplemental supports.	Contract rates reported by 3 partnering LEAs.	\$794,000
Other	<ul style="list-style-type: none"> • Mental health awareness training for all LEA staff to meet program goals related to supportive school climate, reducing mental health stigma, increasing student engagement, and improving identification of students in need of support. • Mental health prevention/early intervention training for licensed staff to meet program goals related to identifying and effectively serving at-risk students and strengthening school-community service coordination. • Cost for universal screening, prevention, and standard treatment/early intervention program materials for each LEA to meet project goals related to application of effective practices of all school staff in recognizing and responding to student mental health needs. 		\$325,000
Direct Charges			\$1,679,758
Indirect Charges		Organization's Indirect Cost Rate	\$82,006
Total Amount:			\$1,761,764

Practice Timeline

Practice Timeline				
Phase	Description of Activity	Date/ Timeframe	# of hours needed to complete/ oversee activity	Person(s) Responsible
Planning/ Pre- implementation	Organize a State Design Team to respond to SAMHSA Funding Opportunity Announcement (FOA) for Project AWARE State Education Agency Grant	FOA Released: April 4, 2018	Ongoing/ dedicated time commitment among State Design Team in 3- month application window	State Design Team
	Selection of three LEA Pilot Sites /Secure Letters of Commitment	Application Due Date: June 4, 2018		
	Propose a comprehensive plan of evidence-based culturally competent and developmentally appropriate school- and community-based mental health services in response to FOA			
Implementation	Hire project leadership at state and local level to oversee implementation of Project AWARE/ACTIVATE.	Majority of project staff hired and onboarded by July 2019.	Variable depending on agency Human Resources and recruiting processes	<ul style="list-style-type: none"> • NCDPI • NCDHS/DMH • Local Education Agency Pilot Sites
	Implement the ability to respond immediately on-site, through employment of mental health professional(s) in each grant-funded school, if a school-aged youth exhibits behavioral signs warranting the need for clinical attention.	Project Timeline 09/30/2018 – 09/29/2023	State Project AWARE Director 40 hrs. per wk.	<ul style="list-style-type: none"> • State Project AWARE Co-Directors • Local Project AWARE Directors • Project AWARE Evaluators/Coaches • Technical Assistance from the Mental Health Technology Transfer Center as the SAMHSA TA provider to Project AWARE
	Provide coordinated referral, services, and follow-up to school-aged youth and their families for evidence-based school- and community based mental health practices and services.		State Project AWARE Co-Director 20 hrs. per wk.	
	Develop and implement a workforce development training plan to increase the mental health awareness and literacy of school staff, administrators, parents, and others who interact with school-aged youth to recognize the signs and symptoms and mental illness and link them to appropriate services.		Local Project AWARE Director 40 hrs. per wk.	
Develop and implement meaningful ways to engage students and their		Local Project AWARE Evaluator/ Coach 40 hrs. per wk.		

	families by involving them in the design and implementation of education and community initiatives.			
	Establish relationships with local businesses, families, and community groups to broaden and link all community resources available to school-aged youth and their families.			
	Evaluate and build the evidence base for a Best Practices Model via: <ul style="list-style-type: none"> • Creation of a Performance Assessment Plan • Development/revision of project Logic model • Development of a plan for data collection and analysis • Reporting of implementation and outcome data to SAMHSA (quarterly/annual reports). 	Ongoing until 09/29/2023	Contract AnLar Evaluation Team devotes 0.5 FTE to the evaluation activities of NC Project AWARE	AnLar Evaluation Team
Sustainability	Engage in local and state program and process development to support improvements in school-aged youth and family-serving systems through the coordination and integration of funding streams to support programs with similar goals. This includes (but is not limited to) improving the quality of school-based services, use of trauma-informed approaches, and social-emotional learning.	During Project Timeline 09/30/2018 – 09/29/2023 and post grant funding for statewide scaling of lessons learned	Same project staff/time as noted in Implementation section	<ul style="list-style-type: none"> • State Design Team • NC School Mental Health Initiative • State Project AWARE Co-Directors • Local Project AWARE Directors • Project AWARE Evaluators/Coaches • NC Social Emotional Learning State Implementation Team • AnLar Evaluation Team

Resources Provided

- NC Project AWARE/ACTIVATE featured in [Rural Health Models & Innovations](#), a national collection of successful rural health programs and interventions maintained by the [Rural Health Information Hub](#) (RHIfhub) because of its innovate services and impact on rural communities.
- [Cleveland County Schools Project ACTIVATE website](#)
 - EdWeek Leaders to Learn From 2020 [video](#) highlighting social emotional and resiliency initiatives in Cleveland County Schools
- NC Department of Public Instruction [Social-Emotional Learning/Crisis Response Practice Guide](#) developed with the assistance of Project AWARE/ACTIVATE pilot sites.

Lessons Learned

- Build district infrastructure and capacity to ensure that the supports, services, and alignment of school initiatives are taking place to support the behavioral health, substance use, and overall social-emotional learning for all students.
- Establish strong relationships and leverage community partnerships before initiating implementation. These relationships will help carry the program forward and will lead to sustainability once funding has ended.
- Take time with local MOAs. Since grant funds are limited in amount and time, the key to program sustainability and ensuring maximum impact is to develop strong and clear MOAs with local agencies and groups. Often, local agencies are looking for partners in this work and identifying these agencies and engaging them early will help with expansion and reaching the targeted audiences.
- Embed the work within other state initiatives. North Carolina has embedded the Project AWARE/ACTIVATE grant into the state [Multi-Tiered System of Supports \(MTSS\)](#) initiative, allowing for the continuation of evaluation.

Next Steps

The Project AWARE/ACTIVATE staff is building an infrastructure that will sustain the project after the grant period has ended. Each pilot site has set up teams that include both grant-funded and non-grant-funded staff to help with cross-training as well as selection and implementation of the chosen evidence-based practices. By training and including non-grant-funded staff, NC Project AWARE/ACTIVATE is ensuring that there will be staff in place to continue with training and delivery of the chosen practices and interventions after funding has ended.

Strategies to promote replication across the state include:

- Utilize existing university-school partners to replicate sustainable practices
- Create incentives for MOAs between schools, community providers, and payers
- Build mental health and substance use awareness education into professional development competencies.

Practice Contact Information

For more information about this practice, please contact:

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