

**WILLINGTON BOARD OF EDUCATION**  
**Wednesday, October 7, 2020**  
**Special Virtual Meeting: Zoom**  
**6:00 p.m.**

**Join Zoom Meeting:**

<https://willingtonct.zoom.us/j/87549225709?pwd=NTZFSEpMaUZKOXVOOFdqbdZiQ0Y4QT09>

Meeting ID: 875 4922 5709

Passcode: Ria1KR

**Dial by your location**

+1 929 205 6099 US (New York)

Meeting ID: 875 4922 5709

Passcode: 796198

Audio Recording: Yes

Notes Taken: Yes

**Members Present:**

Herb Arico

Michelle Doucette Cunningham

Elena Testa

Ann Grosjean

Tracey Anderson

Donna Cook

Laura Rodriguez

**Members Absent:**

None

**Also Present:**

Superintendent of Schools, Phil Stevens

Director of Pupil Services, Marcia McGinley

EASTCONN Director of Psychological and Behavioral Consultation, Dr. Ravit Stein

Members of the Public

**Chairman Arico called the meeting to order at 6:07PM.**

**Chairman Arico led The Pledge of Allegiance.**

**Communications**

Chairman Arico stated he received a letter from CABA thanking the Willington BOE for continuing their membership. The letter stated CABA's primary mission has always been to support its individual boards and it strives to offer timely and meaningful workshops, seminars, access to information and personalized help on current issues.

Chairman Arico stated he received a letter from Superintendent Stevens which listed some questions provided by board members regarding social and emotional learning and mental health which would be discussed and answered at tonight's meeting.

Chairman Arico stated he received a letter from board member Donna Cook which stated: in preparation for the special meeting to further discuss Willington Public Schools behavioral health services I would like to share some thoughts. Since the Community Health Center, Inc. did not receive the necessary votes to use our schools as their facility to provide mental health care to students, I hope that the new options presented will be in conformity with board policy. Board policy (regulation 1330 B. 17) states that the "use of school premises for non-school activities is not permitted during school hours". For those in our community that feel comfortable with CHC and their mission statement, they could take advantage of CHC's mental health services from the privacy of their own homes. CHC does accept insurance and does not have a sliding scale fee. The tele-health option would take the school out of the process allowing parents and guardians to be involved and eliminate transportation concerns which were expressed earlier. CHC also provides medical care, please make sure any outside organizations who want to use our facilities after hours to provide mental health services do not also provide medical care or have a division which provides medical care. By allowing an organization which provides medical care into our school, I am concerned we are opening a door for organizations to be allowed to provide medical care to our students. CHC or any other organizations which provide medical care including gender or hormone treatment and family parental services should not be allowed in our schools. If these services are needed by anyone, they should be obtained outside of school and under the supervision of parents or guardians. My concern that students could end up receiving medical care without parental consent is not uncommon. California allows any student twelve or older to leave class for medical reasons without parental permission, this also happens in Michigan, New Jersey and Wisconsin. Connecticut does not require parental involvement to terminate a pregnancy, we should not allow this to happen to our students and our families. Phil did mention there are curriculum options available to satisfy mental health requirements, and these curriculums should be seriously considered. A list of local practitioners and credible online resources should be available for families. I strongly believe that parents and guardians need to be involved in the mental health care of the student and that our children are our most precious resource and we need to guard them as such.

### **Present to Speak**

Peter Latincsics of 97 Trask Road was present. He stated I attended the original presentation by CHC and listened to their discussion of their services and I had concerns that evening as I think many townspeople did about the cost and ambiguity about parental insurance being attached and safeguards to protect parental rights. There is also the issue of the use of our building which I will point out can't even be used for town meetings. I think the correct decision was arrived at by the board when it voted to not pursue this option. It is puzzling me as to why this issue has returned if a majority of the board voted to not pursue it, secondly I'm asking you to address in your discussion, what is driving this need in general. We have a school psychologist, guidance counselor, special services, outside placements. Is something failing internally in our system requiring us to bring outside resources like this in? It doesn't feel right for our community. I strongly urge the board to stick by their original decision.

Sarah Smith was present. She stated the way I look at this is I would like for us to try it. It looks like resources, which schools always need. I think there will be scrutiny to see if this fits us or if there are any problems. I also have a lot of trust in our administration, teachers, and nurses that are in our schools

and I appreciate that we have visited this. I think it would be good to give it a try because schools never have everything that they need. That is where I stand.

George Debski of 12 Fenton Bluff Drive was present. He stated I would like to thank Herb, Donna, Elena, and Liz for all the efforts you have made to make the schools better for our kids in this town. The program being re-discussed today does not help classroom instruction, it does not help the classroom teacher to provide the best instruction, and it does not keep the parents fully engaged in helping the classroom teacher to provide the best instruction. The program at its worst is a radical, liberal, social engineering program and at its best is anti-good classroom instruction, anti-help for the classroom teacher and specifically goes around the parents and uses the parents insurance to pay for it all. It is appalling to me how the democrats on the BOE have been behaving since the last election, and now with the help of a few democrats on the BOS, they have majority on the board which is contrary to what the people of Willington voted. The democrats on the BOE I feel do not accept election results and they don't really care about instruction for students. They care about power, money, and indoctrination and I think this is nasty. The program that is being discussed today has been voted on and was not accepted and should stay this way. Please do not let the partisan democrats ruin our school.

Sarah Baker was present to speak. She stated I was present to speak at one of the summer calls regarding this topic. I am a healthcare professional, I work in the insurance industry and I can assure you that these services are needed. I am also a parent of a student at Hall Memorial School, again from the perspective of many parents asking for the service to at least try as Sarah Smith indicated. There is no cost to the school or to the community and so there is no financial risk. There is a mental health crisis in this country and a lack of services with not enough providers, so the fact that they are offering to bring them to us is phenomenal and an incredible opportunity we are walking away from. The latest data from the CDC is 1 in 4 young people have considered suicide. Young people are more likely to die from suicide than in a car crash. We are walking away from something that is easily accessible which is the other issue we talked about. It is not easy for parents to find these services and access them.

Sarah Smith was present. She stated I would like to make an appeal for this board and the leadership. This town has wonderful people, we are democrats, we are unaffiliated, and we are republicans, my heart is big enough for all of us even if someone strongly disagrees with me I try to be respectful and listen to them. I would like for people not to call each other names. I would like for us to keep this as respectful as possible.

Kristen Bryant of 29 Y Road was present. She stated thank you for bringing this up again for discussion with the BOE. I have a son in Hall School and another son who went through this school system. I wanted to really express the need and say it is very important for mental health services right now more so than ever although it has always been an issue. I am also coming from an insurance company and my son's father is a guidance counselor at a middle school and sees first hand some of the mental illness and mental health issues and the needs our students have. I will also say my sons have used both the mental health services in school which have been very helpful and also we have sought outside help just due to children's needs. My thoughts here are that any additional resource that we can bring to the town would just be beneficial, there is no cost here, and while school may work for some, other kids may have issues where they need outside help. A lot of parents struggle to leave their job during the day or just be able to access mental health services outside the classroom. It's not in any way a fact that the school is not doing enough, they do a wonderful job but the more resources we have access to as a small town, the better. I believe if there are resources available, there is no harm in trying it out and seeing how it can benefit our school.

Chris Toomey of 33 Baxter Road was present. He stated I have also spoken a couple times at board meetings over the summer requesting that the board reconsider this proposal. I spoke this summer about the heavy emphasis being placed in schools on social and emotional learning and health. The baseline instruction while very beneficial to most students is not enough for all students. There are students who need services above and beyond what can be offered in the classroom and when we are faced with a situation where we have more students than we can provide services for, it seems like an obvious decision to bring in this much needed additional services and expertise to handle the emotional and social needs of the kids in our town who are struggling. I respectfully request that the board reconsider this proposal and vote to take advantage of this opportunity.

Melissa McKinnon of 63 Luchon Road was present. She stated I have three kids in this school system. We were gone for the last two years and came back to the system this year, due to the Covid I think the social and emotional well-being of the kid's definitely needs additional outside help. I think that anything especially if there is no cost to the taxpayers is helpful. I think there is an added stress because of Covid and the kids being at home.

### **Presentations**

#### **a. Dr. Ravit Stein, Director of Psychological and Behavioral Consultation Services, EASTCONN**

Superintendent Stevens introduced Dr. Ravit Stein and stated Dr. Stein is the Director of Psychological and Behavioral Consultation Services at EASTCONN. She has a Ph.D. in psychology where she received extensive training in applied behavior analysis and evidence based practice across school and clinical settings. Dr. Stein has served as an educational and behavioral consultant for schools and hospitals throughout the northeast where she conducted diagnostic assessments, developed evidence based behavioral interventions for children with brain injury, ADHD, developmental disorders, and a variety of other presenting problems. Dr. Stein is a licensed psychologist; she is a board certified behavior analyst and a nationally certified school psychologist. She helps supervise the provision of school based consultation on an individual level, on a classroom level, and a system wide basis. She also teaches at NEAG at UConn and conducts professional development throughout the region. She is committed to working with a variety of colleagues including pediatricians, educators, administrators, and her purpose is to provide quality behavioral health supports and services for children.

Dr. Stein stated thank you for having me tonight. I am also a parent of three kids one town over in Mansfield. I can try to answer board questions tonight. I wanted to start by stating the disclaimer that in my role at EASTCONN, we provide a variety of supports to schools but we do not personally develop mental health centers in schools so I have nothing in this and this isn't a service my agency provides so I hope everyone knows I'm not trying to sell a service that we provide. We think of students in a triangle of support, there is what we call universal supports which are provided to all students, supports which are provided in addition to the supports provided to all students, then at the top of the triangle is the supports that are necessary for a smaller set of students whom the services of a school psychologist or counselor may not be enough. Our role in supporting schools is to start at the bottom of the triangle and look at what are the mental health supports that all students need. Right now it's a very big focus of every school district in our country with the understanding of the impact of the pandemic. If 1 in 5 students were suffering with mental health diagnosis prior to the pandemic we know those numbers have skyrocketed as a result. We recognize that the mental health needs in our schools have exploded in all schools due to the pandemic. All schools are beefing up their universal support and SEL which is social emotional learning which is all the skills we hope to teach all of our children that will help them become

successful in our ever changing world. In general our society has started to learn that in order to follow the quote “if we don’t take care of our wellness we will have no choice but take care of our illness” so what we are really thinking about when we think about students social and emotional health is about addressing their wellness and recognizing that from an all student perspective. My understanding of school based mental health centers is that they are a part of a continuum of services in schools, when we recognize what all students need and then work our way up the triangle.

Dr. Stein stated the documents she shared talk about how the mental health services in schools are part of student wellness, are part of the framework of understanding what health and wellness is for our students, and recognizing mental health as one part of behavioral health is an important distinction because I can understand that it might feel like a large job to think about all aspects of children’s health. There is more research then we can get our hands on to say that the mental health supports that are currently available by the providers that are in our schools are not as efficient for what they need. We need a wider scope of supports. Students are out-placed to our school when their school districts do not have enough mental health services to support them. We always want to look at what is called the least restrictive environment which provides students with the most time with peers.

Superintendent Stevens stated the first BOE question had to do with what Willington offers and the staff available to provide services. He added that Marcia McGinley who is the Director of Pupil Services for Willington Public Schools can help answer this question.

Marcia McGinley stated I am glad to see we are recognizing the need for mental health service and social and emotional learning. She stated I will start with the universal support that Dr. Stein was discussing earlier. At Hall School we have our advisory, where students meet, have discussions and we have our morning meetings at Center School where that social and emotional learning is happening. Another way we are providing these services is developing meaningful relationships with students. Our staff recognize when students are not having a good day or just feeling off. They really see the students and they know how to make referral and access mental health services in the schools. They may refer a student for counseling, they may go to a mental health provider and say I want to talk to you about a change in a student’s behavior and what we can do. Our counselors are also very active members of school teams which help them make sure they have a pulse on their student’s mental health.

Marcia McGinley stated we briefly talked about our staff but I want to give a clear view of who our counselors are. We have a school psychologist who is shared through the district and his role is also very involved with special education where he is providing assessments. We have a school social worker who is full time at Center School and then a school counselor who is full time at Hall. All three counselors provide crisis counseling, individual and group counseling, they are liaisons to community based services and also liaisons to parents. Counseling is just a piece of their job. There are many other roles and functions that they play.

Superintendent Stevens stated the next question is, are private providers available in the area and are they taking new patients?

Dr. Stein stated there are a lot of providers in Connecticut, but the number of providers in our area of the state is extremely limited. The number of providers that see students under the age of fourteen is just a small sliver. There was a parent earlier in the call who mentioned that waitlists are long and I wanted to reflect that this is my experience. If you go on somewhere like Psychology Today where you can look for providers, there will be names of people who provide these services, but the likelihood that

they are people who have been trained to work with adolescents is very low. There is a difference between someone who is licensed to work with students and someone who is actually an expert in working with students in an age range of pre-k through 8<sup>th</sup> grade. I don't have even five providers based on my experience in the last 10-15 years and the ones I do know of have waitlists.

Superintendent Stevens stated the next question is, how do mental health services provided during the school day impact the student's day?

Marcia McGinley stated we want to increase accessibility for students. As director of pupil services I spend my days thinking about how we can best serve our students with disabilities to make sure we are increasing accessibility and access to the curriculum. We do this by providing specialized instruction and accommodations and modifications. Looking at school based mental health services, we are increasing their accessibility to mental health which allows students to have increased time in school and increased school engagement. I have seen some students who will have to be out of school for a day because they don't have the transportation to be coming back and forth or they can only get an appointment at 1:00PM and have to leave early. For some students this happens on a weekly basis. Some other barriers that we need to think about is health insurance, some families don't have health insurance or are very limited as to providers. Some providers will have a very long wait list.

Dr. Stein stated when talking about access I think about our habits as adults, if we are hungry and want to order dinner out and I have somewhere I like but I have to pick it up but there is another place who will deliver, I will most likely choose the place who delivers because the access is higher. You should think about times in your own life where the access to something prevented you from doing it. I know some people have increased their use of mental health services during Covid because tele-health has become something that allows people to increase their access and allows them to see a provider from the comfort of their own home.

Marcia McGinley stated it is so important for the child's providers to have communication and work together as a team. When the schools can work with the mental health providers and the parents you will have stronger results.

Marcia McGinley shared examples of reasons why staff would access services for students. One of the top reasons being a student in crisis, students having an emotional outburst or is emotionally dysregulated, perhaps with suicide ideation a referral would be made immediately to one of our counselors. Some other reasons would be a change in student behavior, a student is acting withdrawn, or appears sad or upset, and definitely that teacher would be reaching out to one of our counselors. We also provide counseling for lack of educational engagement for students who have lack of work completion or poor attendance or a negative outlook on school achievement. We also provided services to students who have relationship conflicts with peers or adults. Counseling is provided to any bullying situation to the victim and the bully. We provide counseling for students with low self-esteem and low self-confidence as well as skill development. We also provide counseling for issues around things that are out of school which are impacting their school performance.

Superintendent Stevens stated when you have a student that's in crisis, there is only a certain level that our staff can do. One of the things we do when a student is in crisis is call 211, or the mobile psych unit. One of the things about having that additional service or person in the building is that they may have the capacity for us to not need to call as the student could receive immediate attention. He stated when we call 211 they don't arrive immediately so it's not realistic to rely solely on this service.

Donna Cook asked how many times in a school year do you have to call 211.

Marcia McGinley replied I do not have numbers with me but I will say 211 professionals were accessed last year.

Donna Cook asked if we were talking ten or less.

Marcia McGinley replied ten or less. There is a good amount of support and assessment that goes in before 211 is called, that is usually the highest level of service which usually results in hospitalization.

Donna Cook asked for the meaning of dysregulation.

Dr. Stein stated it is when the student is unsafe with themselves or others, aggression is escalating, and sometimes the student is making concerning statements.

Marcia McGinley stated the use of 211 keeps the student from having to go directly to the emergency room.

Superintendent Stevens asked Dr. Stein to talk about typical mental health support. What is that professional going to provide and what are they not going to provide?

Dr. Stein stated I am a school psychologist by training and school psychologists are not always licensed psychologists, they are most often masters' level psychologists who have had three years of training. Their role is to be a generalist, they have to know a little bit about almost everything that could happen to someone between the ages of three and twenty one. School psychologists participating in support in a school are typically involved with students who have what we call IEP mandated counseling. That counseling has to have what we call educational benefit which means that the scope of the role I can play if I'm a school psychologist has to be within the bounds of what would be connected to their IEP and would connect to educational benefit. So if I'm working on some social skills with that student that allows me to work with them regularly but because when their social skills get better they can more often spend time with their peers and be in general education for more hours of the day, which is the goal, I cannot continue support if it is not within the framework of educational benefit. It's really important to recognize that while your school has a school psychologist that is district wide to cover on average 1,000 students, they function as a generalist. They may be able to do a little support but on the educational side when a student has a reading disability and their reading is in the 1<sup>st</sup> or 2<sup>nd</sup> percentile your district offers reading support for an hour a day every single day to get them back up to where they need to be or try to close the gap. On the school psych side if we have a student who is in the 1<sup>st</sup> or 2<sup>nd</sup> percentile from a social skills perspective, we do not have the framework in schools for that school psychologist to see that student an hour a day. We are addressing a student's educational needs from an academic perspective when they are in the 1<sup>st</sup> percentile, but we have a mental health need that is in the top of the triangle and the ability of your school psychologist to offer the level of service that your reading specialist offers is not equal in comparison. When a counselor has a wider ability to work with students more regularly it supports that student being able to make gains more quickly and be more likely to access their education more often. We are talking about the in between of the outplacement where all children in those out placements have a clinician that does what would be done in your school. Those services include a check-in with that child daily if needed, be available to connect more regularly with the classroom teacher about the supports that can keep that child in class, and also figure out what

other needs in the community could be available to bring that child's mental health status to a place where they can be most connected to their peers.

Superintendent Stevens asked Marcia to speak to the cost of the school based health center.

Marcia McGinley replied in regard to the school based health center, there is no cost to the district, the only requirement they would have is that they have a place, phone, and internet. If we are talking about mental health and being able to provide the necessary mental health services for our students, if we needed to hire another mental health person there would be an additional cost.

Laura Rodriguez stated one question I have in terms of cost, is when you call 211 is there a cost associated with the school in that service. If the student ends up being placed in an in-patient facility is there a cost associated with it or is that covered by parents and insurance.

Marcia McGinley replied that would be covered by parents or insurance. The cost to the district is more when Dr. Stein was talking about if we are not able to provide that services in the district, then we have to look towards other places that can provide those services (outplacement) and there is a cost there.

Laura Rodriguez asked what if the parents do not have insurance.

Marcia McGinley replied then that would be the program at the hospital working with the parents.

Superintendent Stevens asked for the average outplacement cost.

Marcia McGinley replied \$100,000 and that is not including transportation and with that we are looking at around \$150,000. Some places are certainly higher than that; it would depend on the exact services that a student needs.

Superintendent Stevens asked for both Dr. Stein and Marcia to talk about parental permission and what's included, is it ongoing, what is the communication, and what is not included.

Marcia McGinley stated I will talk about our parent permission in regards to our current providers. If a student is in crisis, certainly we are going to provide mental health services immediately to them. We would then be contacting the parent while that is happening. If we are going to be providing on-going counseling, then we are required to have parent permission. Parent permission could come in different ways, if a student has an IEP through special education and it's recommended in their IEP then the family agrees to their counseling that way. Same if they are receiving 504 services. If it is a student who receives regular education services there would be communication with the counselors to the parent to obtain parent permission. I think it is important to know also that parents can refer students for counseling in the district which is currently happening. I will say that one of the counselors already has had five referrals made by parents. Parent permission is required. If we were looking at parent permission through a school based health center, it would be no different than if you walked into a medical provider or a mental health provider, you would be providing them with the same intake information that you would for any community based provider. They have to obtain parent permission in writing, there has to be communication with the parent before they can provide any type of service, they cannot communicate with school staff unless they have parent permission. There is quite a process for anyone who is accessing school based health services and it is very outlined in the services that they



can provide. If they are providing mental health services, they are requesting permission for just mental health services, they cannot then look at providing other services without further parent permission.

Dr. Stein added the consent is very clear and comprehensive in terms of what we can and cannot talk about with the child. At any point parents can always revoke consent and the consent is only good for one year. As Marcia said there is a duty to no harm so we only can provide any kind of support in a crisis situation if the child is a danger to themselves or others, otherwise parents must be immediately notified.

Marcia McGinley stated I think it's also important to note as a counselor, you have a code of ethics that you follow, and when you are working with children it is your ethical obligation to be including parents in that process. Of course when a counselor sees a student they want to provide confidentiality for that student so they can talk openly, but there has to be communication between the provider and the parent in order to provide successful counseling services. It is so important to make sure the counselor is working as one of the team members that surround that child.

Elena Testa stated I have a question about students' confidentiality, as I understand, parents would sign a yearly parental consent and after that those counselors are not obligated to notify parents as to what is going on or what is wrong with their child. If an eight or nine year old child stated they didn't want their parents to know what they are saying during counseling, then would their parents never know? Also are they obligated to update parents with every question or problem that comes up with that child? How much are parents involved officially?

Dr. Stein stated before working at EASTCONN, I served in a private practice where I saw children and adolescents. It is the ethical obligation of every clinician to include the family in the conversation on an ongoing basis. I can only speak to my practice but I can tell you I was trained in a very similar way to clinicians we are talking about. After every session or maybe two sessions the last ten or fifteen minutes of the session was with the parent if not the entire session. If the child is at school and the parent is not there, it is still my ethical obligation to connect with the parent regularly regarding the child's progress. We would work with the parent from the beginning around what are the goals of the support I am providing. We need the parent to be the co-leader in the process and I wouldn't begin to work with the child before sitting down with the parent and finding out from them what they wish their child could do that they currently cannot.

Elena Testa asked do we have a representative from the company that would like to work at our school present here tonight. Also how much of students desired confidentiality is honored during these sessions?

Dr. Stein replied I don't believe there are any representatives here tonight. If a nine or ten year old says something that is not of a concern to the safety of them or others such as "I'm nervous about taking tests and I don't want my mom to know I'm nervous" I think we would work through with that child why they are fearful of that and spend time trying to work with that child around how to bring their family into the conversation so that their parents can help them. The exception to that is if they said to me "my stepfather is hurting me" in which case I'm still going to break confidentiality because I'm going to call DCF. I'm mandated by law to call DCF and tell them that the child told me that their stepfather is hurting them and DCF would take it from there.

Superintendent Stevens stated we didn't have any agency here tonight so that we could have someone like Dr. Stein come in and answer general questions about mental health. If you want to hear more from that program, that could be in the future.

Tracey Anderson stated earlier you mentioned that you as a counselor can only provide educationally based benefits when it is related to an IEP. How is this different for parents who refer their students to Marcia and ask for services. What kind of services can they provide?

Dr. Stein replied school psychologists are not just on the special education side they are across the board and do serve students who are what's called not mandated counseling. It just means they provide counseling with consent from parents to students who are not identified as students with a disability. Different districts have different amounts of time they have allocated to their school psychologist or counselors for students who are not mandated for counseling.

Marcia McGinley stated our school psychologist's caseload of students is primarily students with IEP or 504 counseling, our school social worker and counselor also see students who receive IEP and 504 counseling but they are additionally available to provide counseling services to students who don't have IEP or 504 plans. They are providing counseling services to support the students so they can have access to their education, so their mental health doesn't impede their access to their education but they do have limits on what they can provide and they are not family based therapists.

Donna Cook asked how many hours per week total do they have available to deal with non IEP or 504 counseling.

Marcia McGinley replied I don't have an exact number for you but I will say their caseloads are extremely high. If they have students in crisis of course those students' needs have to be met first and they aren't seeing students on their regular case load because they need to be available for students in crisis. I know our school counselor at Hall has a very full caseload and she doesn't have many opportunities in her day to see other students. Mr. Rose is heavily involved in assessments so his caseload is a little bit smaller to see students for counseling. Our school social worker at Center is the same, she has quite a full caseload of students plus she also tries to support some families with their needs and access to services in the community. Their caseloads being so high is why the administration initially started looking into how we could increase our services for our students, because we want to be able to provide and make sure we have accessible mental health supports available for all of our students which is becoming more and more challenging. The needs are increasing and we are struggling to try to meet those needs.

Donna Cook asked if Marcia could get a rough idea of hours and pass that information on to Phil.

Ann Grosjean asked for the cost if we decided to take on one more counselor or one more mental health provider into our school to meet all of the needs.

Superintendent Stevens replied close to \$100,000.

Ann Grosjean stated you talked about all the different ways a child could be referred. Am I correct that children can self-refer?

Marcia McGinley replied yes students can self-refer and we are seeing that. One piece that our counselors are very active in doing is making sure the students know who they are as we want them to be able to advocate for themselves. You will even see some additions on the website in the near future about ways to access counseling.

Superintendent Stevens asked Marcia if a student self-refers where do the parents sign off at that point.

Marcia McGinley replied if a student self-refers, our counselors of course want to be available to them and our counselors will reach out and get parent permission. As a counselor myself I've had those experiences and I've had students come down and say "I really don't want my mom or dad knowing I'm coming down to see you" and that is where we as counselors work very hard to help that student feel comfortable in reaching out to that parent because as I said earlier it is so important to have the parent involved in this process and is a requirement.

Superintendent Stevens stated when CHC talked to us they stated they wouldn't even talk to a student until they got the parental permission, so a student couldn't self-refer to that agency but a student could self-refer to someone on our staff.

Marcia McGinley stated that is correct. If we had a school based health center in our district we would have a very clear referral process and those referrals would primarily come from our counselors.

Superintendent Stevens stated the board asked could we talk to Stafford. We have not done that yet because that was a specific question about the Community Based Health Center which wasn't the focus of tonight. We can do that in the future if the board desires. There was a question asking if the opposition was to this particular service or mental health services in general. I think this is a board discussion for the next part of the agenda. There was a question about hearing from a teacher which also might make more sense at another meeting.

There was a question about policy, are we opening ourselves up to other non-profit agencies. In our policy 1330 first line says, "In accordance with Connecticut general statutes, the Board of Education may permit the use of school for non-profit educational or community purposes whether or not school is in session". The point that Donna brought up in the regulations item 17 is that the use of school premises for non-school activities is not permitted during school hours. I think the intent of that is if the recreation department was supposed to use it from 3-5PM and they used it from 7-11PM they would not be allowed to come back in. I think we would need to write more policy if you were to bring in an agency.

There were questions about what is the CT State Department of Education and CT Association of Boards of Education stance on this. The Dept. of Public Health has a whole section on their page which connects to Community Based Health Centers and we could bring you more details about that. CABE also has a statement around partnerships that connect children and families to comprehensive services.

Donna Cook asked are you aware of any mental health service providers that are not connected with any medical group/provider?

Dr. Stein replied I'm not that familiar.

Marcia McGinley stated the Department of Public Health offers school based health centers and some of their sites are full sites with health, dental and mental health. They also have an extension of their program which is called an expanded school based health center which only provides mental health services with no access to health services.

### **Old Buisness**

#### **a. Discussion about Willington Public Schools Behavioral Mental Health Services**

Chairman Arico asked if we had a list of topics that would be involved in counseling or could it be anything the student has a problem with. Is this a problem as far as a topic the parents might not want discussed?

Dr. Stein replied this would be the same framework discussed earlier about working with that student to figure out how to bridge the gap with their parents.

Marcia McGinley stated if we are talking about CHC, at the beginning they are going to be looking towards what kinds of goals they will be working on with that student. Those goals will be developed with their family. If the goals change, there will be discussion with the family.

Chairman Arico asked when you counsel a student during the day, you don't automatically call that parent to tell them what you were counseling the student about.

Dr. Stein replied usually not every day but there is a preset framework such as a biweekly phone call to check in with how things are going. If something comes up in the session that is concerning they won't wait until the biweekly phone call.

Chairman Arico asked as far as policy and liability, what kind of legal provisions do we have with a non-profit coming into our buildings.

Superintendent Stevens replied I think the important thing to remember is we are not the first district to do this. There are a lot of places that already have this and have established the legal expectations and a lot come right from the Department of Public Health.

Tracey Anderson asked what are the other school based health services you looked into.

Marcia McGinley replied one of the other major providers we looked at was Generations Health Care. When I reached out to them I found it challenging to get a hold of them and when I did, they really couldn't answer my questions and I felt they didn't have enough experience in school based health services.

Chairman Arico stated this is on the agenda for our next meeting for discussion purposes. Is it possible to bring the company back in?

Superintendent Stevens replied yes but not for next Tuesday. Perhaps a special meeting that is just around them.

Michelle Doucette Cunningham stated I'd also like to hear from some teachers in the district about their experience so we can better understand the need.

Tracey Anderson stated it would be helpful if teachers could give scenarios of situations that happen in school that are prompting us to have a need for this now more than ever.

Ann Grosjean stated I would be interested in hearing from Ashford because they are our regional partner and are also k-8<sup>th</sup> grade.

Donna Cook stated Phil had mentioned there are other things such as curriculums and we have not touched on that. I would like to know what kinds of things are happening and what is available.

Marcia McGinley stated the committee has been and is continuing to really dive in and work on how we are moving forward with our social and emotional learning curriculum. Right now it is being done through the advisory and mini lessons but we are and will be coming back to the board with more information and recommendations on how we are going to enhance our social and emotional learning.

Donna Cook asked if it was possible to see a sample of what this looks like.

Marcia McGinley replied absolutely.

Dr. Stein added there is CASEL which is the National Organization for Social and Emotional Learning and they have so many resources on their website.

Marcia McGinley stated we are currently looking at the Second Step Program. Second Step is for all students but they also have extensions for higher up services.

Chairman Arico thanked Dr. Stein and Marcia for their presentation and information.

Chairman Arico adjourned the meeting at 8:13PM