



Competitive Grants for Mental Health Supports for Public PK-12 Schools

Governor’s Emergency Education Relief Fund

Program	Amount
Competitive Grants for Mental Health Supports for Public PK-12 Schools (75%)	\$8,674,711

Summary

The Governor’s Emergency Education Relief (GEER II) Fund will be used to provide competitive grants to PK-12 public school districts that the governor has deemed most significantly impacted by COVID-19. The competitive grants will be awarded to local education agencies (LEAs) for public PK-12 schools to provide mental health supports to students, including coordination and delivery of mental health services and wraparound support to students, youth mental health first aid training and implementation, and suicide prevention services and programming.

Application Resources

- [Governor’s Emergency Education Relief Fund II Application Requirements](#)
- [GEER II - Competitive Grants for Mental Health Supports for Public PK-12 Schools Grant Application Template](#) (enter actual application in CASA).

Mental Health Services and Supports

Competitive applications should prioritize mental health services and supports that most directly impact students and families. Categories of services and supports include:

- Direct Services to Students
- Youth Mental Health First Aid (YMHFA)/Child Mental Health First Aid (Child MHFA)
- Suicide Prevention – All Children and Youth

Direct Services to Students

Direct provision of mental health supports and services in school: Supporting school-based mental health services not covered by existing insurance—uninsured or underinsured (federal dollars can’t be used to cover co-pays); consultation not billable to insurance. Direct services include:

1. **Mental Health Service Coordination.** This is one or more personnel that help manage information and resources to help ensure mental health services are provided and effective. Examples include: the sharing of information with students and their families about service options, helping with scheduling of appointments that take into account students’ school schedules, and monitoring and evaluating the care delivered to make sure it is effective.
2. **Mental Health Service Delivery.** This is the provision of mental health services. Examples include: behavioral health screening, disability/disorder diagnosis, and therapy.
3. **Wraparound Services.** This is an evidence-based care coordination model that involves a set of comprehensive, holistic, individualized services for students and their families/caregivers with a

complex array of needs so students can be successful throughout their school day and beyond. When packaged as wraparound, many service providers coordinate and collaborate with each other to ensure that the complex needs of the student and their family/caregivers are met. Examples of services that can be coordinated as a part of wraparound include, but not limited to:

- **Case Management:** One or more personnel work with the student and their family/caregivers get what they need related to mental health services, as well as the broader array of services they need such as the examples listed below.
- **Mental Health Therapy:** Diagnostic, therapeutic, and consultative services for students and if needed, their family/caregivers, to address mental health needs.
- **Educational Services:** Interventions, special education services, and/or before- and after-school programming that focus primarily on what academic and social-emotional-behavioral health needs the student has. Also considered here is making sure that students are able to get mental health and other services without significant disruptions that could cause difficulties meeting school expectations.
- **Crisis Care:** In situations where a student has experienced a crisis (e.g., mental health emergency, victim of a crime, domestic violence, natural disaster), services such as food, shelter, medical, mental health, and/or legal are immediately available and in place for at least 72 hours after the crisis.
- **Medical Care:** Administration and monitoring of required medications, use of medical devices (e.g., hearing aids, mobility devices such as wheelchairs), and quick access to health clinics that are sometimes placed within or near school buildings.
- **Family Resource Centers:** Physical and/or virtual locations where families/caregivers can learn more about challenges faced by their child, how to be an effective partner within the wraparound structure (e.g., role in supporting learning in school), how to navigate social services, and how to access resources to help themselves with their own challenges (e.g., mental health, employment opportunities).

Youth Mental Health First Aid (YMHFA)/Child Mental Health First Aid (Child MHFA)

YMHFA is focused on youth 12-18 and Child MHFA is focused on children ages 5-12. Both programs are designed to help adults recognize signs and symptoms of mental health problems in children and youth and support children/youth who may be experiencing addiction, mental health challenge or crisis. The program helps everyone understand common mental health challenges for children/youth, reviews typical development, and teaches a 5-step action plan for how to help children/young people in both crisis and non-crisis situations.

Suicide Prevention – All Children and Youth

Suicide prevention is a multi-dimensional approach to ensure Iowa's children and youth have access to supports needed to prevent suicide. There are several evidence-based practices that would be beneficial for schools such as Applied Suicide Intervention Skills Training (ASIST) and Question. Persuade. Refer (QPR). This also includes the required annual suicide prevention training, Adverse Childhood Experiences (ACEs), and Toxic Stress Response mitigation. It could also include programs designed for youth that focus on mental health awareness, stigma reduction, and increased health seeking behaviors.

Allocations by District Size

The \$8,674,711 in awards will be proportionally distributed across small to large competitive applicant districts. The proportion of the award distributed to districts small to large will be based on district certified enrollment for 2020-2021. The following table provides the proportion of the awards slotted to be distributed to competitive district applicants of each size.

District Size	Size 1	Size 2	Size 3	Size 4	Size 5	Size 6	Size 7
Certified Enrollment 2020-2021	100-400	401-600	601-1000	1001 - 2000	2001-3500	3,501-10,000	10,001-32,000
Proportion of Iowa Students Served	3.48%	8.64%	11.31%	18.94%	10.95%	18.48%	28.19%
Approximate Proportion of Award*	\$301,568	\$749,647	\$981,324	\$1,643,169	\$950,050	\$1,603,154	\$2,445,979
Approximate Number of Awards Available	10	19	14	16	5	5	3

*If there is an insufficient number of district applicants within the district size category to completely distribute the awards, remaining awards will be allocated across remaining district size categories.

Budget Recommendations

The below table is intended to assist district applicants in developing a reasonable budget. The table provides estimates of reasonable allowances based on such things as the number of teachers a district might need to train, state Medicaid reimbursement rate for mental health, and results of the Iowa Project AWARE grant. The below are recommendations. Districts should work to stay within the budget allowances based on their district size and scope of their proposal but may submit a proposal that goes over the allowance if they include an explanation of need.

District Size	Size 1	Size 2	Size 3	Size 4	Size 5	Size 6	Size 7
Suggested Budget	\$30,000	\$38,000	\$70,000	\$100,000	\$184,000	\$325,000	\$650,000

Suggested Category Specific Budget Expenditures

District Size	Size 1	Size 2	Size 3	Size 4	Size 5	Size 6	Size 7
Mental Health Service Coordination	.25 FTE	.25 FTE	.5 FTE	1 FTE	1 FTE	1 FTE	1-2 FTE
Direct Services:* • Service Delivery • Wraparound	\$600/student	\$600/student	\$600/student	\$600/student	\$600/student	\$600/student	\$600/student
Youth/Child Mental Health First Aid (\$3,000/trainer; \$20/trainee)	\$3,000	\$5,000	\$5,000	\$6,000	\$8,000	\$8,000-\$15,000	\$15,000-\$50,000

*It is recommended that districts that have more than 5% of students needing more intensive direct mental health services should also consider school-wide approaches to mental health including such things as: mental health awareness, suicide prevention, Youth/Child Mental Health First Aid, or a focus on culture and climate.

Other Budget Recommendations

Area	Budget Recommendation
Youth Suicide Prevention	Costs are highly dependent on planned efforts. It is recommended that applications stay within the suggested budget.
Capital Expenditures (e.g., technology for telehealth, software, software subscription)	May not exceed 5% of budget.

Selection

Competitive Criteria

The Department will evaluate and score each application against the competitive criteria in Table 3. To be considered, all district applicants must demonstrate COVID-19 related unique mental health needs (Gate 1). District applicants who demonstrate need will then be evaluated on the competitive criteria (Gate 2). Districts may earn up to two bonus points for collaborations with agencies (e.g., area education agencies, community mental health agencies, institutions of higher education, community service agencies) that strengthen the mental health services and supports outlined within the district's action plan.

GATE 1: MANDATORY COMPETITIVE CRITERIA

Area	Description	Points
District COVID-19 Related Mental Health Needs	Extent to which the district applicant provides evidence of unique student and family mental health need(s) as a function of COVID-19.	10

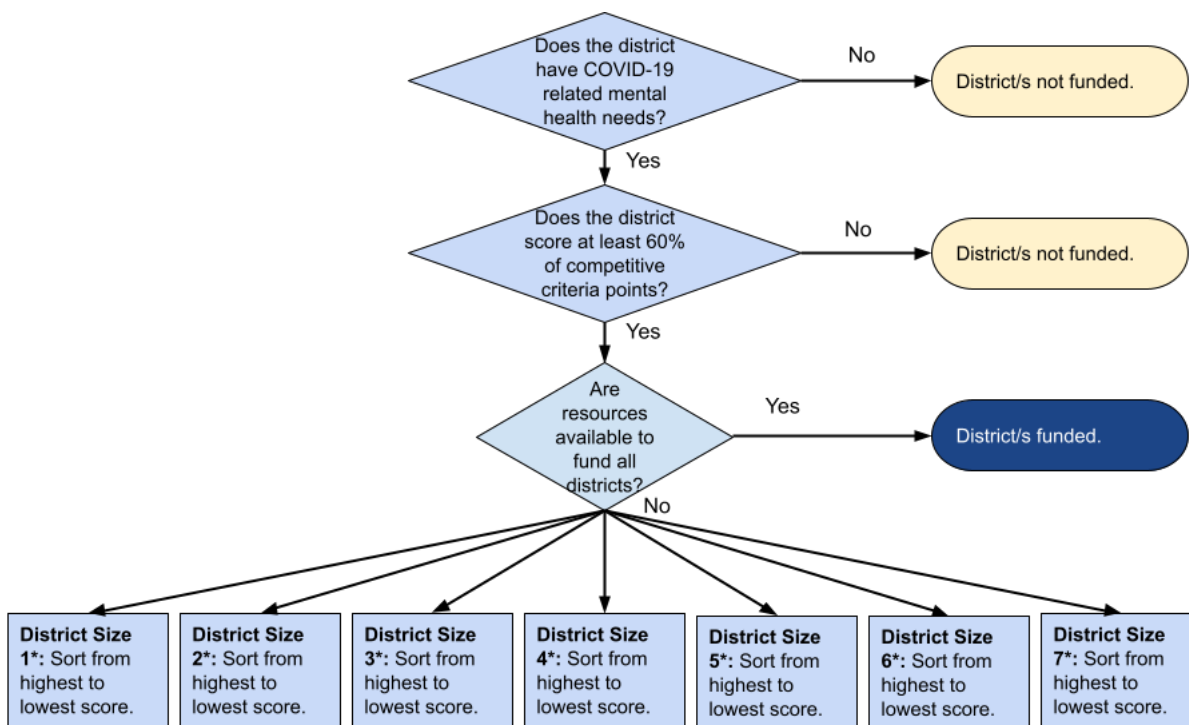
GATE 2: COMPETITIVE CRITERIA

Area	Description	Points
Goals & Impact	Extent to which the district applicant goals align to the COVID-19 related need(s) and have measurable impact.	10
Action Plan	<p>The extent to which the actions:</p> <ul style="list-style-type: none"> • Address one or more of the Mental Health Services required by the grant (e.g., service coordination, direct services) • Address the district's identified mental health needs • Are likely to lead toward successful implementation (i.e., actionable, reasonable goal, timeline) • Prioritize direct mental health services for youth/families. • Address barriers to access or participation in the mental health services/supports (i.e., including barriers based on gender, race, color, national origin, disability, age). <p>Extent to which the district is engaging community partners (e.g., area education agencies, community mental health agencies, institutions of higher education, community service agencies) to strengthen the mental</p>	27

Area	Description	Points
	health services/activities outlined in the action plan. (Optional - up to 2 points)	
Budget Proposal	The extent to which the budget: <ul style="list-style-type: none"> • Prioritizes resources toward direct mental health services/supports to students/families • Is aligned and necessary to support proposed services/activities • Reasonable and aligned to recommended district budget allowances 	15

Selection Criteria

The below process will be used to select grantees after district proposals are evaluated by the Iowa Department of Education on the competitive criteria.



Awards selected from the highest scoring districts and based on available funding. If tie scores occur, a district will be selected if the district has scored higher in COVID-19 Related Need category. If additional tie exists, the district will be selected which is in a Mental Health and Disability Service Region that has fewer applicants.

Questions and Contact Information

For questions regarding the application, contact Barb Anderson at (515) 664-6732 or barb.anderson@iowa.gov