

Opportunity Funding for Mental Health Services

For more information and to submit applications:

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Funding Period: Fiscal Year 2022

Delaware Department of Education Opportunity Funding Form 2021-2022 School Year

Application deadline: Friday, July 30, 2021

Purpose: The Opportunity Funding directed to mental health services provides \$5.0 million in FY20, \$2.5 million in HB 225 (Annual Appropriations Act) and \$2.5 million authorized in HB 226 (One-Time Supplemental). With a total supplemental amount of \$7.5 million over three years, the total amount will be \$15 million contingent on future appropriations. The Opportunity Fund is to provide additional funding for English Learner (EL) and low-income students.

For FY21, \$2.5 million is appropriated through HB 240 (Annual Appropriations Act). The guiding language regarding these funds and eligibility was amended through HB260 (Grants- In-Aid Act). The \$2.5 million allocated is supplemented with the \$2.5 million from HB 226 as referenced above. A total of \$5 million is appropriated for FY21.

For FY22, \$5.5 million is appropriated through HB 250 (Annual Appropriations Act). The \$5.5 million allocated is supplemented with the \$2.5 million as referenced above. A total of \$8 million is appropriated for FY22.

For FY22, these funds are apportioned and allocated to schools meeting criteria based on the prior year unit count: 1) a grade configuration containing K through 4th grade and (2) greater than or equal to 30% percent low-income and/or greater than or equal to 10% English Learner enrollment. There are schools that have been grandfathered because of meeting the threshold in FY21 and not meeting in FY22. This is noted.

This funding shall be used by school districts and charter schools for *mental health services* in the form of school counselors, school social workers or licensed clinical social workers, school psychologists, and/or for additional reading supports for grades K-5. Services may include the employment of staff, where such funding may be used to cover 100 percent of personnel costs on a 10 to 12-month basis and/or contracted services.

Allocation Method: Amounts vary per school and that amount is indicated below. Each LEA has already received the first half of the funding; the second amount will be released upon receipt and approval of this application.

DISTRICT/CHARTER NAME: Woodbridge School District / Phillis Wheatley Elementary School	
ADDRESS: 16359 Sussex Highway Bridgeville, DE 19933	
CONTACT NAME:	
Elyse Baerga	
(302)337-7990	
CONTACT EMAIL: elyse.baerga@wsd.k12.de.us	
ALLOCATION AMOUNT: \$112,702	

Questions:

What mental health needs of your identified low-income and English learner students
will you be addressing through these mental health services funds? (Please indicate
N/A if these funds are solely being used for reading supports for the two subgroups – EL
and low-income.)

The funds provided through this grant will greatly support our intensive student needs, especially during a challenging time. The Woodbridge School District is comprised of high percentages of low-income families, migrant families, a large EL population, and an ever-growing special education population. These vast needs cause our families to struggle accessing resources, understanding content and information that is being shared, and in the current environment providing instructional support during a time that requires a great deal of independent services feels insurmountable.

As a result, mental health supports and access to those resources are of the utmost importance. Families will not only need the ability to access counseling resources, food pantries, clothing support, monetary support, but they will need a consistent voice and person to check-in on their family's wellbeing.

The support of two Family Support Social Workers to check-in on families and connect them with local and internal resources will be vital to supporting families' mental health struggles.

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tow-inco	me and EL ting to local a	families to co and school re	nduct home sources. Th	al Workers to visits and ass e Social Worl ice and partic	
					eds, and more.

Are you using these funds for reading supports for your identified low-income and English learner students in addition to mental health services or in lieu of mental health services? If so, what types of supports/services will be provided?						
N/A						

4. How will you know if these services or supports are effective?

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Assurances and signatures:

Signature:

As the chief school officer of the district or school, including the indicated school, I am authorized to submit for the funds identified in this form. I am also authorized to obligate the district or charter school to conduct any activity approved under this form in accordance with all applicable state requirements, including statutory and regulatory requirements, and program specific requirements. The information contained in it is true and correct to the best of by knowledge and belief. By submitting this form, I acknowledge that I understand and agree to abide by all applicable requirements. I further agree that

- 1. I understand that this funding may not be used to supplant otherwise available funding.
- 2. I understand that our district shall be authorized to assess a local match to provide for the local contribution of personnel costs associated with this appropriation (districts only).

Signature:	Date:
submit for the funds identified in this for contained in this form. The information of knowledge and belief. I have reviewed a	or school, including the indicated school, I am authorized to rm. I have read this form and reviewed the financial information contained in this form is true and correct to the best of my and approve the submission of the budgetary information for nowledge that I understand and agree to abide by all applicable
I understand that our district sha	ay not be used to supplant otherwise available funding. all be authorized to assess a local match to provide for the local associated with this appropriation (districts only).
Business manager (printed name):	
Signature:	
By signing this form, I am approving the p	plan submitted by the district or charter.
Secretary of Education/Designee (printe	d name):

Live signature on file at DOE.

Date: ______



State Subgrant:

State of Delaware Department of Education State Funds Budget Form

Opportunity Funding Mental Health Grant

State Subgrant:	Opportunity Fundi	ng Mental Health Grant		Project Start Date:	9/10/2021		
Project Title:	***************************************						
LEA/Agency:			Project End Date:		6/1/2022		
	******		es and Account Code			· · · · · · · · · · · · · · · · · · ·	
		Salaries (5100) and (Jther Employee Cos	<u> </u>	····		
Employee Name	Title	FTE Percentage		State Funds Requested	Matching Funds	Total Funds	
PROFESSIONAL:				\$	\$	\$	
SUBSTITUTES:			Professional Subtotal				
				\$	\$	\$	
SUPPORT STAFF:			Substitutes Subtotal	Š	\$		
anet Cabrera Rivera <u>fan</u> Brandon Michael Doole fan	<u>піву Зыр</u> вон Рэгарса піву <u>Зиррогі Рага</u> рса	fassional <u>Croc</u> tal Workes jessional Vocial Workes		\$49,678.49 \$34,989.83	3	\$ \$49,678.49 \$34,989.83	
T. (2.17)			Support Staff Subtotal	\$84,668.32		\$84,668.32	
TUDENTS:				\$	\$	\$	
			Students Subtotal		 <u>-</u> <u>-</u> -		
ALARY TOTAL:				\$84,668.32		\$84,668.32	
THER EMPLOYEE COSTS:			r				
ICA Iddicare ension Vorkman's Comp Inemployment Insurance		6.20% 1.45% 23.80% 1.55% 0.11% 33.11%		\$ \$5,249.44 \$1,227.69 \$20,151.06 \$1,312.36 \$93.14	\$	\$ \$5,249,44 \$1,227.69 \$20,151.06 \$1,312.36 \$93.14	
ealth Insurance/Other Non-	taxed Benefits	(\$15,391 is the average	HI cost for FY22)		<u>.</u>		
EC TOTAL:			Г	\$28,033.68		\$28,033.68	
ALARY AND OEC TOTAL;			Γ	\$112,702.00		\$112,702.00	
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State of Delaware Department of Education State Funds Budget Form

State Subgrant:	Opportunity Funding Mental Health Grant		_	Project Start Date:	9/10/2021	
Project Title:	PWES Mental Heal	th Services	300 M			
EA/Agency:	y: Woodbridge School District		Woodbridge School District		6/1/2022	
			s and Account Cod	les:		
Destination	Purpose		# of Travelers	State Funds	Matching	Total Funds
				Requested \$	Funds \$	\$
OTAL TRAVEL COSTS						
			and Account Cod	les:		
		Contractu	al Services (5500)	T. Cras F	Adabahtan	
Vendor Name	9	Service Provided		State Funds Requested	Matching Funds	Total Funds
				\$	\$	\$
:						
OTAL CONTRACTUAL S	ERVICES COSTS					
			and Account Cod			
		· · · · · · · · · · · · · · · · · · ·	d Materials (5600)	State Funds	Matching	
Item (Description	Quantity	Unit Price	Requested	Funds	Total Funds
				\$	\$	\$
					<u> </u>	
			[
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OTAL SUPPLIES AND M	ATERIALS COSTS					



State of Delaware Department of Education State Funds Budget Form

State Subgrant:	State Subgrant: Opportunity Funding Mental Health Grant Project Title: PWES Mental Health Services			Project Start Date:	9/	10/2021
Project Title:				S Mental Health Services		
LEA/Agency:	Woodbridge	School District	•	Project End Date:	- 6,	/1/2022
			and Account Cod	les:		<u> </u>
		Capital	Outlay (5700)			
Item Description Quantity			Unit Price	State Funds Requested	Matching Funds	Total Funds
Replacement Equipment				\$	\$	\$
New Equipment						
TOTAL SUPPLIES AND	MATERIALS COSTS		,,,			
					L	
GRAND TOTAL				State Funds Requested	Matching Funds	Total Funds
				\$112 702 00		£142 203 80



STATE OF DELAWARE DEPARTMENT OF EDUCATION

BUDGET SUMMARY OF STATE FUNDS

LEA/Agency Name:

Woodbridge School District

State Subgrant Title:

Opportunity Funding Mental Health Grant

Project Title: PWES Mental Health Services

\$112,702.00 Budgei Total Capital Outlay 5700 Supplies & Materials 2600 Contracted Services 5500 Travel 5400 \$28,033.68 OEC's 5120 \$84,668.32 Salaries 2100 Account Code Name Account Code Total Budget

Completed By:

Elyse Baerga

Date:

9/20/2021

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Date:

Chief Financial Officer or Business Manager: