

2025 - 2026 COMPREHENSIVE MENTAL HEALTH PROGRAM



A Altus
SCHOOLS

VISION



To create an inclusive and positive environment where every student has equitable access to comprehensive, evidence-based mental health support. We empower students to achieve emotional well-being, resilience, and academic success. Our goal is to foster a supportive learning environment where students feel prioritized and are empowered to advocate for mental health within their community.

MISSION



We provide accessible mental health services tailored to each student and family. By integrating multi-tiered supports and engaging the community, we remove barriers and increase equitable access to mental health services. We respond urgently to student needs, fostering a stigma-free school culture that promotes well-being. Through collaboration with families, educators, and community partners, we connect students to resources and support networks, continuously enhancing our services to meet the evolving needs of our diverse student population.

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Section I: Introduction

In recent years, there has been a growing recognition of the critical role that mental health plays in the overall well-being and academic success of students. Schools, as primary settings where young minds develop and flourish, have a unique opportunity to address the mental health needs of their students. A comprehensive school-based mental health program is an essential component of a comprehensive approach to education that values the mental and emotional well-being of every student.

This comprehensive school-based mental health program plan aims to outline a systematic and evidence-based approach to promoting mental health and providing support to students within the school environment. It is grounded on best practices identified by the National Center on Safe Supportive Learning Environments from the U.S. Department of Education, the Mental Health Technology Transfer Network, and the School Health Assessment and Performance Evaluation (SHAPE) System developed by the National Center for School Mental Health at the University of Maryland School of Medicine.

This program plan recognizes the importance of a multidisciplinary approach, involving collaboration between educators, mental health professionals, families, and the broader community. It emphasizes the need for training and capacity building among school staff to identify and respond to mental health concerns effectively. Moreover, it acknowledges that mental health extends beyond individual students and should be addressed at the systemic level through strategic planning, implementation, and evaluation.

Within this program plan, specific initiatives and interventions will be outlined, such as the utilization of a multi-tiered system of support to address mental health and wellness needs, implementation of safe and supportive school environments, provision of

mental health services, and access to curricular and instructional supports. Additionally, it will address crisis response protocols, coordination with external mental health services, and evaluation mechanisms to ensure the effectiveness and continuous improvement of the program.



Section II: Theoretical Frameworks

Altus Schools' Comprehensive Mental Health program implements research-based practices that seek to build an effective and sustainable approach to prevention, identification, and treatment of mental health in schools. In alignment with the National Center on Safe and Supportive Learning Environment's Best Practices in Action, Altus Schools:

1. Provide a continuum of services through Multi-Tiered Systems of Support (MTSS)
2. Obtain and incorporate educational partner input
3. Engage leadership in implementation planning and support
4. Build staff mental health capacity
5. Use data to inform program improvement
6. Establish community partnerships

By aligning school systems, integrating strategic planning, and obtaining quality data to inform programs, we are able to provide a variety of supports and services to promote a positive school climate, social emotional learning, and address students' mental health and wellness needs through prevention, identification and intervention. Our comprehensive program builds on a strong foundation of professionals with specialized training including school psychologists, licensed marriage and family therapists, credentialed counselors, and school nurses to provide universal and targeted supports and harnesses key community partnerships with health and mental health providers to deliver services.

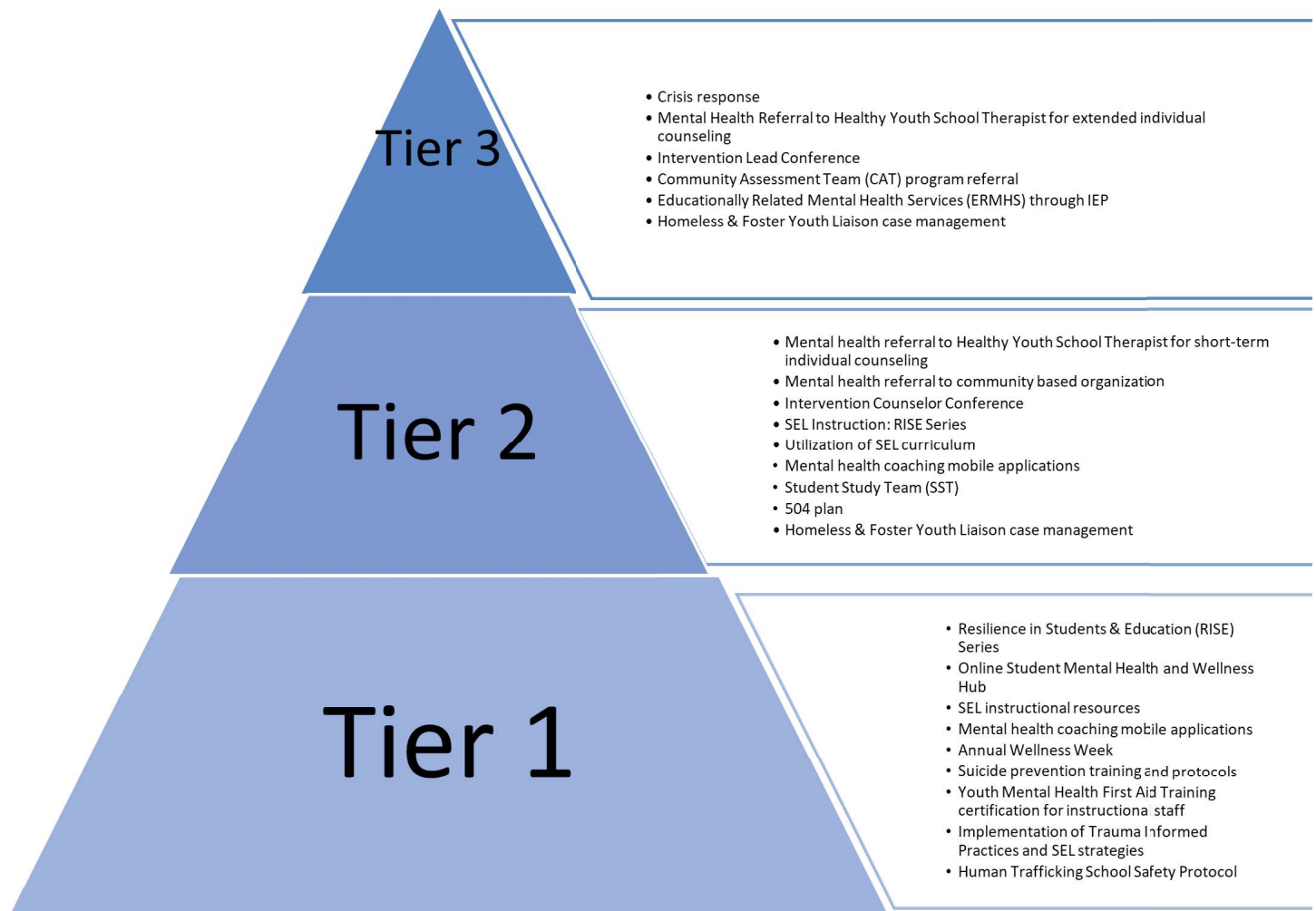
Multitiered System of Supports

Altus Schools use a Multi-Tiered System of Support (MTSS) to address the academic, socio-emotional and behavioral needs of students. The system is composed of layered interventions from universal approaches



that benefit all students with common needs, to targeted, individualized programming that addresses individual student needs (Appendix A). Mental health supports are embedded within the three tiers of intervention to provide a continuum of services that are aligned and designed to improve student outcomes.

A pyramid of interventions is commonly used to outline the services and supports offered at each tier of intervention. Tier 1 notes the universal supports available to all students, Tier 2 supports are more targeted and are usually implemented for a short term, and Tier 3 are more intensive, individualized interventions that address significant needs. Below is a pyramid of interventions that specifically outline the mental health supports within the Altus Schools MTSS framework:



Evidence- Based Services and Supports

Evidence-Based Practices (EBPs) include any therapeutic technique proven to be effective by peer-reviewed scientific experiments. According to the American Psychiatric Association EBPs are: “best practice and one of the ‘preferred’ approaches for the treatment of psychological symptoms.” Within our Altus Schools comprehensive mental health program, Healthy Youth School Therapists (HYSTs) utilize several EBPs to meet students’ individual needs, including:

- Cognitive Behavioral Therapy (CBT)
- Dialectical Behavioral Therapy (DBT)
- Motivational Interviewing (MI)
- Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC)

Examples of Cognitive Behavioral Therapy techniques

include teaching about cognitive triangles, cognitive distortions, cognitive restructuring and fact checking, as well as deep breathing, progressive muscle relaxation, and journaling to cope with stressors. Dialectical Behavioral Therapy techniques include mindfulness (mindful breathing, grounding techniques), distress tolerance skills (self-soothing skills, pros/ cons skills, problem solving skills, and radical acceptance), emotional regulation skills (STOP skill, positive self-talk, opposite action skill), and interpersonal effectiveness (boundary building, GIVE skill). Examples of Motivational Interviewing include asking open-ended questions, active listening, highlighting discrepancies, building motivation to change, strengthening commitment to change, affirming, providing reflective listening, and summarizing conversations. MATCH-ADTC is a program that combines 33 procedures—drawn from the most successful evidence-based treatments—into a single, flexible sys-

tem. Comprehensive flowcharts guide the process of care, streamlining treatment to fit the child's needs while fostering individualization to address comorbidity or therapeutic roadblocks.

Community-Defined Evidence Practices (CDEPs)

Altus Schools provide culturally competent services to address disparities in behavioral health. We focus on providing culturally competent services by implementing annual training to staff to understand and respect the cultural backgrounds, beliefs, and values of diverse communities. By integrating cultural sensitivity into mental health services, Altus Schools aim to provide more equitable care. Our schools engage the community, particularly marginalized and underserved populations by supporting students' individual needs to help them graduate high school, and by collaborating with community organizations to ensure that the needs of all educational partners are addressed. Altus Schools have also implemented policies that promote health equity by addressing systemic barriers to behavioral health services, such as issues related to access. We have purposefully located each resource center to be accessible in the heart of the communities we serve, near public transportation to help reduce barriers to accessing their education and mental health resources and continually utilize several communication platforms to provide information and access to the educational program and student services. We further collaborate with community providers to provide education and awareness to students and families through several methods, including presentations at the resource center, school events, community events, and online webinars including the Altus Family Learning and RISE series.

Cultural Responsiveness and Equity

Altus Schools value the diversity of our student population and are purposeful in being responsive to the values, beliefs and behaviors of students and families. With an equity-driven approach, we strive to ensure

that each student has equitable access to mental health supports and services and seek to collaborate with all educational partners to meet the mental health and wellness needs of every student.

Through our unique Pathways Personalized Educational Plan (PPEP) process, each student and family have access to a trusted adult in school and instructional team who actively monitor student engagement and performance, partner with family to identify barriers to academic engagement including mental health and wellness challenges, and connect family to school-based supports and community resources. Through the PPEP, each student receives an individualized educational program through highly trained adults that demonstrate care about their learning as well as about them as individuals, a key component of building school connectedness. Research demonstrates that school connectedness is an important factor in adolescent health and link directly to better mental health, and decreased sexual health risks, substance use and violence (School connectedness helps students thrive 2022). This is particularly important for students who have been historically marginalized, racial and ethnic minority groups and youth who identify as LGBTQIA+.

In alignment with principles from the Equity in Mental Health Framework, Altus Schools:

- **Train staff on trauma-informed practices and cultural competence:** Altus University provides several opportunities to staff for professional learning on culturally-responsive teaching, trauma-informed practices, student and family engagement strategies.
- **Provide accessible and safe communication:** Students and families have access to several avenues to inquire about mental health supports and express needs, including direct communication to the student's teacher, case manager if the student has an IEP, school

counselor, and learning lead/school coordinator. Each school's web site outlines key contact information for special programs. The Altus Schools Mental Health and Wellness Hub, an online resource with a collection of resources, embeds a feedback form that website visitors can submit to request support. Additionally, school personnel can connect students and families to mental health support staff via the school's mental health referral process.

- **Provide culturally and linguistically appropriate services and supports:** Through the diversity of our school personnel, careful selection of vendors, and intentional partnerships with community organizations, Altus Schools provide culturally relevant and linguistically accessible information and services to our school community through consultation for effectiveness and by making information and school events accessible in languages needed.
- **Disaggregate data:** With an equity-lens in practice, student performance measures are monitored for all students, as well as disaggregated for targeted student groups that school personnel can act on to match students to appropriate services and supports, as well as analyze to inform program improvement.

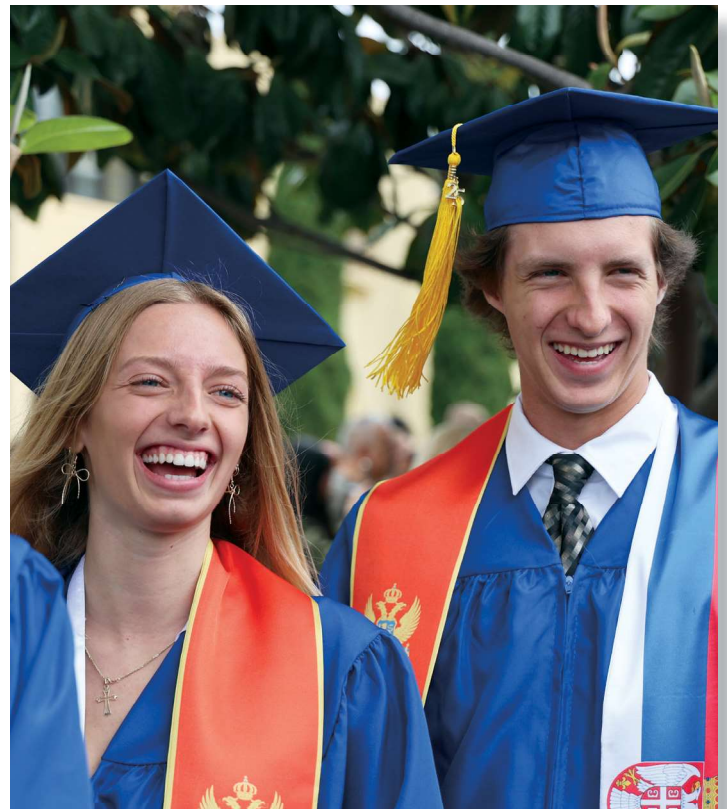
Data-Informed Decision Making

Altus Schools use multiple sources of actionable and meaningful data and input from educational partners to monitor student engagement, assess student mental health needs, develop mental health and wellness goals and action plans, activate the MTSS, and measure program effectiveness.

PPEP Storybook data: The PPEP Storybook contains detailed results related to student progress and engagement that are reviewed by various staff members across school systems. Some of the indicators includ-

ed are school participation, credit completion, chronic absenteeism, interventions reports, and PPEP survey completion. The Storybook serves as a real-time monitoring tool to activate interventions for students who are demonstrating disengagement or inadequate progress. With an equity-lens at the forefront, the data is disaggregated by the different school sites and by student groups including Hispanic/Latino, Black or African American, White, Two or more races, English Learners, Students with Disabilities, Socioeconomically Disadvantaged, Homeless, Foster Youth, and Pregnant and Parenting. This allows staff to quickly activate supports and services, facilitates trends analysis, and supports prioritization of resource allocation.

Leadership engagement: As part of the annual strategic planning process and through cycles of continuous improvement, leadership at various levels are involved in the design, planning, implementation and evaluation of mental health programming, supports,



and services. This ensures that school systems are aligned to support mental health and wellness initiatives, involves a diversity of inputs and perspectives, supports resource maximization and prevents duplicate efforts thus maximizing efficiency and effectiveness.

Needs Assessment: Annually, mental health team members and school leadership engage in conducting a collaborative needs assessment to identify system strengths, gaps between current and desired conditions, clarify priorities, inform quality improvement, and advance action planning. The needs assessment evaluates the coordination of mental health services, mental health promotion, student mental health referral processes, mental health services and supports for students, and suicide prevention, intervention, and postvention.

Resource Mapping: In conjunction with the needs assessment, mental health team members engage in the identification, visual representation, and resource sharing of the internal and external supports and services in the schools and the community that are available to meet the mental health needs of all students and build on program strengths.



Section III: Student and Family Engagement

Part of the Altus Schools' vision is to develop a personalized instructional program with intensive parental engagement to support positive outcomes for each student. In this effort, there are several ways in which the perspectives of our students and families are incorporated into the development and implementation of our mental health program.

The California Healthy Kids Survey (CHKS)

The CHKS is a research-based, anonymous survey that is sponsored by the California Department of Education to collect student data on measures of school climate, health risks and behaviors, and youth resiliency. Students in grades five, seven, nine and eleven are invited to take the survey confidentially, with active parental consent for 5th grade students and passive parental consent for students in middle and high school. The survey helps schools collect and analyze data on students' school connectedness, protective factors, risk behaviors, mental health wellness, and school safety, among other indicators. There are several modules available within the survey. Besides the required Core module, students at Altus Schools take mental health-related additional modules to effectively incorporate student input in our comprehensive mental health program.

Local Control Accountability Plan (LCAP) Surveys

All students and parents/guardians are invited to take their Altus School's LCAP survey throughout the year, which is used to obtain input on the school's plan for improving student outcomes. Aligned to California's State priorities for student success, the LCAP survey obtains input on the eight priority areas, which include school climate and engagement of students and parents.

Pathways Personalized Educational Plan (PPEP) Surveys

Upon enrollment, every student takes the PPEP survey which is designed to obtain a student's immediate input on several indicators, including feelings about school, access to mental health care, feelings of despair and hopelessness, and experience with bullying. Survey results are reviewed by teachers and used to personalize the instructional program and connect the student and family to relevant support services. The data is also evaluated at a systems level to inform mental health programming and supports.

Parent Committees and School Events

In addition to PPEP meetings, parents, guardians, and educational partners of each Altus school have many opportunities and are encouraged to be involved and participate in the decision-making process of the school, as well as identification and refinement of needs, goals, targets, activities, and resource allocation. Opportunities to provide input on school programs include:

- School Site Council meetings
- English Learner Advisory Committee (ELAC) meetings
- Open House
- Senior Nights
- Family Learning Series

Through these various methods, our schools are able to obtain and incorporate our youth and family input in the development of mental health initiatives.

Section IV: School-Based Mental Health

Altus Schools' mental health program adheres to the Family Educational Rights and Privacy Act (FERPA) and the Schools' Education Records and Student Information Board Policies, ensuring the confidentiality and protection of students' information and education records. In addition, the program follows the guidance and legal requirements established by the U.S. Department of Health and Human Services, the U.S. Department of Education, and the California School-Based Health Alliance. These guidelines provide a framework for creating effective systems to refer youth to mental health service providers while ensuring adherence to both FERPA and the Health Insurance Portability and Accountability Act (HIPAA) regulations. By upholding these standards, we ensure that all student information is managed securely and in compliance with state and federal laws as we connect students and families to essential behavioral health services.

Healthy Youth School Therapists

Under the direct supervision of the Equity and Inclusion Administrator, Healthy Youth School Therapists (HYSTs) are responsible for providing individual counseling to students and families with mental, social-emotional, and behavioral health needs. Services may be delivered in-person at the student's resource center, virtually through virtual meeting platforms, or via phone call. Additionally, the HYST is responsible for:

- Assisting in the development and implementation of programs and initiatives aimed at promoting mental health awareness, prevention, and early intervention. This might involve conducting psychoeducational workshops for students, staff, and parents, and implementing school-wide initiatives to create a positive and supportive mental health environment.

- Performing screenings, evaluation, assessments, and recommendations for services.
- Designing and conducting trainings on the Schools' suicide prevention, intervention and postvention protocols, trauma-informed practices, and socio-emotional instructional strategies.
- Supporting the Healthy Youth Department with student social-emotional learning education and activities.
- Supporting parent and family engagement and education initiatives.
- Acting as a crisis intervention therapist for students and staff by responding to and managing mental health crises or emergencies that arise within the school setting. This could involve assessing risk, providing immediate support, coordinating with external resources, and implementing safety measures.
- Collaborating with teachers, case managers, counselors, Special Education and Equity & Inclusion staff, and administrators on providing mental health services and referrals to community organizations.
- Documenting and maintaining accurate and confidential records of student assessments, interventions, progress notes, and communications, adhering to legal and ethical guidelines regarding the storage, access, and sharing of sensitive information.

Students with a 504 Plan

Students with a 504 plan demonstrating mental health needs will have the opportunity to speak with a school-based mental health professional. This is

modeled after the same tiered support structure that is available to all students. The HYST will meet with the student for up to five meetings, conduct analysis, and make their professional recommendations on best ways to support. Upon completion of the meetings with the student, the HYST will recommend to the 504 team whether further meetings are needed, a referral to outside mental health services is recommended, or in the case of demonstrated school-based need, the student is recommended for longer term school-based services. 504 plans provide the opportunity for the student to receive services on a schedule. In the case that a student will need access to mental health support services via the 504, it is recommended that the team convene more frequently than the yearly plan to determine efficacy of the service and determine if furthermore formalized evaluation needs to take place with the school psychologist.

Students with an IEP

Students with Individualized Educational Plans (IEP) demonstrating mental health need have a variety of pathways to access services. The primary reasons that students with IEPs may need access to mental health services are temporary events (grief, community-based trauma i.e., school shootings, social issues such as online bullying), new mental health diagnosis, a sudden change in behavior, or prolonged feelings of depression and/or anxiety that are affecting the students' educational progress.

Response to Temporary Events

In the event of a student with an IEP expressing a need for mental health support on the temporary scale, the mental health team will respond with a tiered intervention system of support. A teacher or student may submit a referral expressing that the concern is not one necessitating ongoing mental health support but rather a need to meet with a professional for a short amount of time. This is modeled after the same tiered

support structure that is available to all students. The HYST will meet with the student for up to five mental health sessions, conduct a needs assessments, screenings, and make their professional recommendations on best ways to support. Following the analysis, the HYST will communicate with the student's IEP team either detailing that no further meetings are needed, a referral to outside mental health services is recommended, or in the case of demonstrated school-based need the student is recommended for further social emotional assessment to determine ERMHS (Educationally Related Mental Health Services) qualification.

New Mental Health Diagnosis

If a student receives a diagnosis from a doctor or other qualified mental health professional, the school will follow the following protocol:

1. The case manager will provide the parent or guardian with a ROI (Release of Information) that allows the school to request copies of the medical records and use the information within for the purposes of educational planning.
2. The case manager will share with the IEP team the results of the diagnosis, and request that the school psychologist look at the recent diagnosis to determine if additional testing is warranted, or if the student would benefit from a full triennial re-evaluation to determine new baselines.
3. The IEP team will convene to determine changes or next steps to the IEP. This could include but is not limited to recommendations for additional and supplemental mental health assessments, recommendations for additional mental health services under the ERMHS umbrella of services (individual counseling, parent counseling, psychological services), recommendations for additional supports and services available on the IEP (i.e., health ser-



vices, occupational therapy, speech therapy.)

Sudden Changes in Behavior or Prolonged Feelings of Depression and Anxiety Affecting Educational Progress

If a student presents with sudden changes in behavior (i.e., attacking parents/guardian, attacking authority figures, expressing homicidal ideation), the IEP and mental health team will convene an emergency meeting to determine the best possible steps. As the IEP team is not an emergency response team, the school will most likely conduct a meeting to offer additional mental health or behavioral assessment. The school will also encourage the family to pursue whatever medical recommendations that might be given by the treating doctors. If the student or parent/guardian reports that there are prolonged feelings of depression or anxiety, the IEP team will convene to determine the best possible steps in the least restrictive environment

for a school setting. This may result in students being assessed for ERMHS services, an increase in available service minutes for ERMHS services, or an increase in behavioral support services.

All students with 504s and IEPs will be evaluated on a case-by-case basis to ensure that their safety and mental health are at the forefront of decision making. These procedures and protocols are intended to be a recommendation but can be adapted anytime to meet the student's needs.

Student Mental Health Sessions

The HYST will utilize a five-session model to provide school-based mental health services to students who have been referred.

Session 1 - Assessment and Psychoeducation: This session includes introductions and building rapport with the student, conducting a needs assess-

ment to understand the student's current mental health concerns, history, and goals for therapy, providing psychoeducation about common mental health conditions, symptoms, and available treatment options, and collaboratively identify the student's specific areas of focus and establishing therapeutic goals for the sessions.

Session 2 - Psychoeducation and Skill Building: In this session, the HYST will continue to build rapport with the student and deepen their understanding of the student's mental health concerns. The HYST will provide further psychoeducation to enhance the student's knowledge about common mental health conditions, symptoms, and treatment options. Building on this foundation, the HYST will introduce and teach coping strategies tailored to the student's needs and goals, such as stress reduction techniques, cognitive restructuring, and mindfulness exercises.

Session 3 - Skill Building and Coping Strategies: This session will focus on reviewing, learning, and practicing coping strategies based on the student's needs and goals (i.e., emotion regulation, time management, etc.) The HYST and student will collaboratively explore and identify unhelpful thinking patterns or behaviors that contribute to the student's difficulties, practice and reinforce new coping skills through role-plays, homework assignments, or experiential exercises, and address any questions or concerns the student may have regarding the strategies and techniques discussed.

Session 4 - Coping Strategies and Goal Review: In this session, the HYST and the student will continue to build on and practice previously discussed coping strategies, tailoring them to the student's needs and goals. Collaboratively, they will identify and address unhelpful thinking patterns or behaviors, practicing and reinforcing new coping

skills through role-plays, homework assignments, and experiential exercises. They will review progress, discuss challenges or successes, and reflect on the student's goals, adjusting as needed.

Session 5 - Goal Review and Relapse Prevention: This session includes reviewing the progress made since the previous session and discussing any challenges or successes the student has experienced. The HYST will reflect on the student's goals and assess their level of achievement or adjustment as needed. This session also includes collaboratively developing a relapse prevention plan to help the student maintain their progress after therapy concludes, as well as discussing potential resources or support systems the student can utilize in the future to continue their mental health journey.

The five-session model may be extended at the discretion of the HYST based on the student's individual circumstances (i.e., crisis level, hospitalization, trauma, access to resources), and service capacity.

Once the HYST or mental health program support staff receives a mental health referral, they will call the parents/ guardians within one week of receiving the referral. The staff member will make three attempts to contact the family and determine next steps. If contact attempts are unsuccessful after three attempts, the referral will be closed, and the referring party will be notified. After successful parent/guardian contact, the HYST or support staff member will email the referrer, parent/guardian, and student with relevant community resources, the Altus Schools Student Mental Health and Wellness Hub, and confirm next steps. During the initial contact with parents/ guardians, the HYST will inform that there will be up to five, forty-five minute sessions to provide mental health services to their student. If a student is unable to attend session, student or parent/guardian can let the HYST know to excuse the student or reschedule the session. Re-

scheduling will be accommodated as best as possible up to three times. For any referrals that were closed due to lack of response or attendance, the referring party may submit another referral when student and family have re-engaged.

Telehealth Services

Altus Schools maintain a focus on providing flexibility to students and families in accessing mental health support, including delivering services virtually or remotely. Also known as teletherapy, the HYST may provide services and support using electronic information and telecommunication technologies through video conferencing, audio, and text messaging while being in a separate physical location from the student. HYSTs are committed to utilizing best practices in delivering virtual school-based counseling that ensure a high-quality session and positive student engagement to achieve successful session outcomes. In accordance with the National Association of School Psychologists Considerations for Delivery of School Psychological Telehealth Services, HYSTs follow the recommendations to:

- Adhere to all professional ethics, standards, policies, and positions.
- Ensure access to high-quality technology.
- Obtain appropriate professional development to ensure their own competence in the delivery of telehealth services.
- Use validated assessment tools and methods.
- Maintain thorough documentation and professional record-keeping practices.
- Ensure high degrees of privacy, confidentiality, informed consent, and security.
- Consider whether telehealth services are safe, effective, and appropriate.



Section V: Community-Based Mental Health

Altus Schools establish purposeful community partnerships to increase access to mental health education and services and provide a broader spectrum of supports. By partnering with culturally responsive and verified organizations in our students' communities, we are able to maintain a student-centered and family-centered approach in overcoming barriers to our students' learning and wellness. School-community partnerships may be established to deliver services directly to students, provide professional learning to staff, or provide community-based learning opportunities to students.

The HYSTs and Equity and Inclusion support staff members are the primary members involved in making referrals to community based mental health organizations, although any instructional member working with the student has the capacity to do so. This includes the teacher, case manager, counselor, instructional lead, school nurse, and homeless foster youth liaison. Referrals will be documented in the Stu-

dent Information System's Contact Manager, internal program trackers, and communicated to the student and parent/guardian.

HYSTs and Equity and Inclusion support staff will maintain updated lists of mental health community providers and key contacts by reviewing at least annually and updating as needed. Considering that each community partner has its own referral requirements, all appropriate measures will be taken to protect student confidentiality, document referral details, and ensure the referral was received.



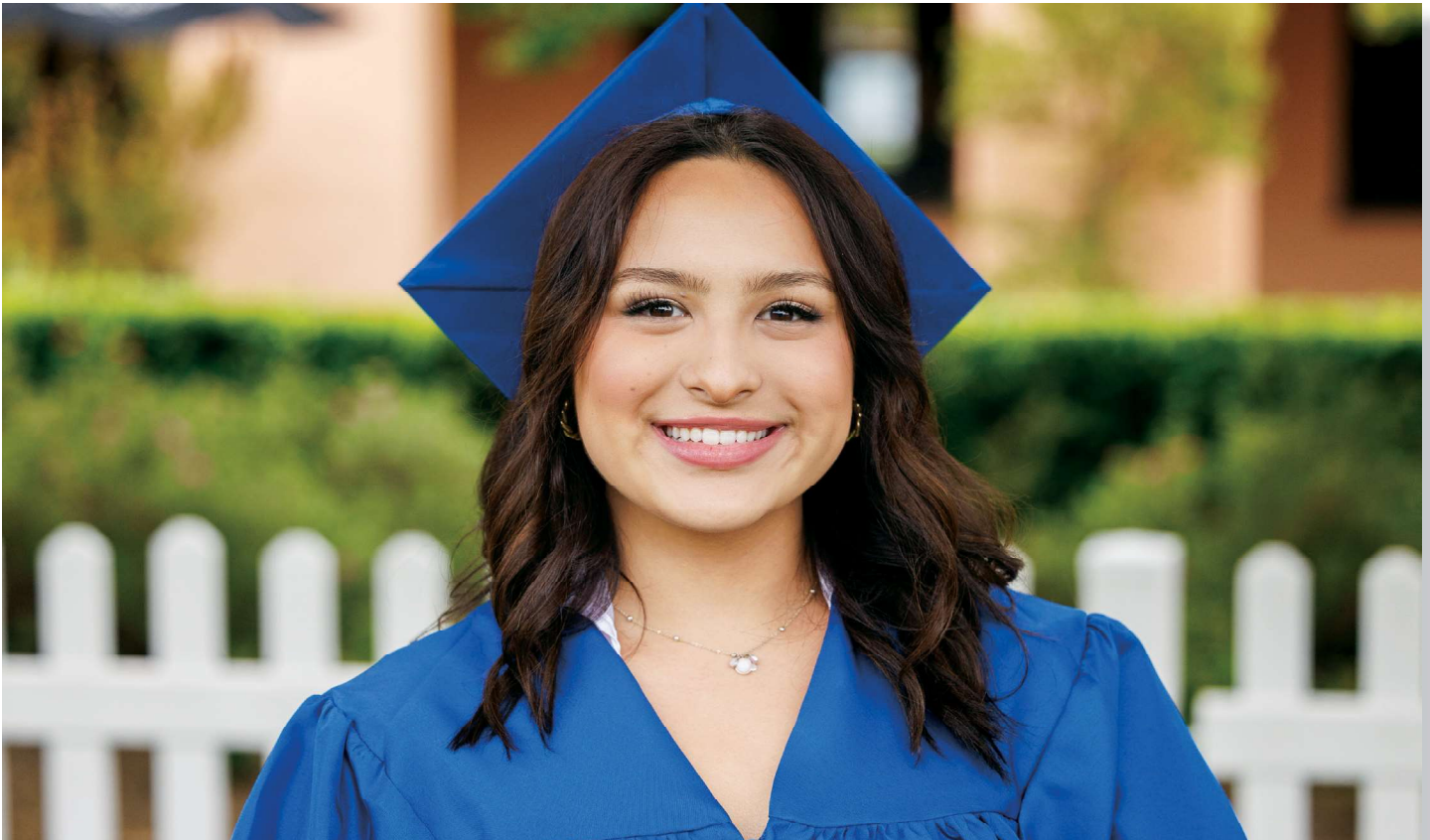
Section VI: Referrals

A consistent internal referral process will be utilized when a member of the student's PPEP team recognizes the need to refer a student for mental health services. Whether the referral is for non-emergency mental health services or crisis intervention, the priority rests in connecting the student to mental health services as promptly and effectively as possible.

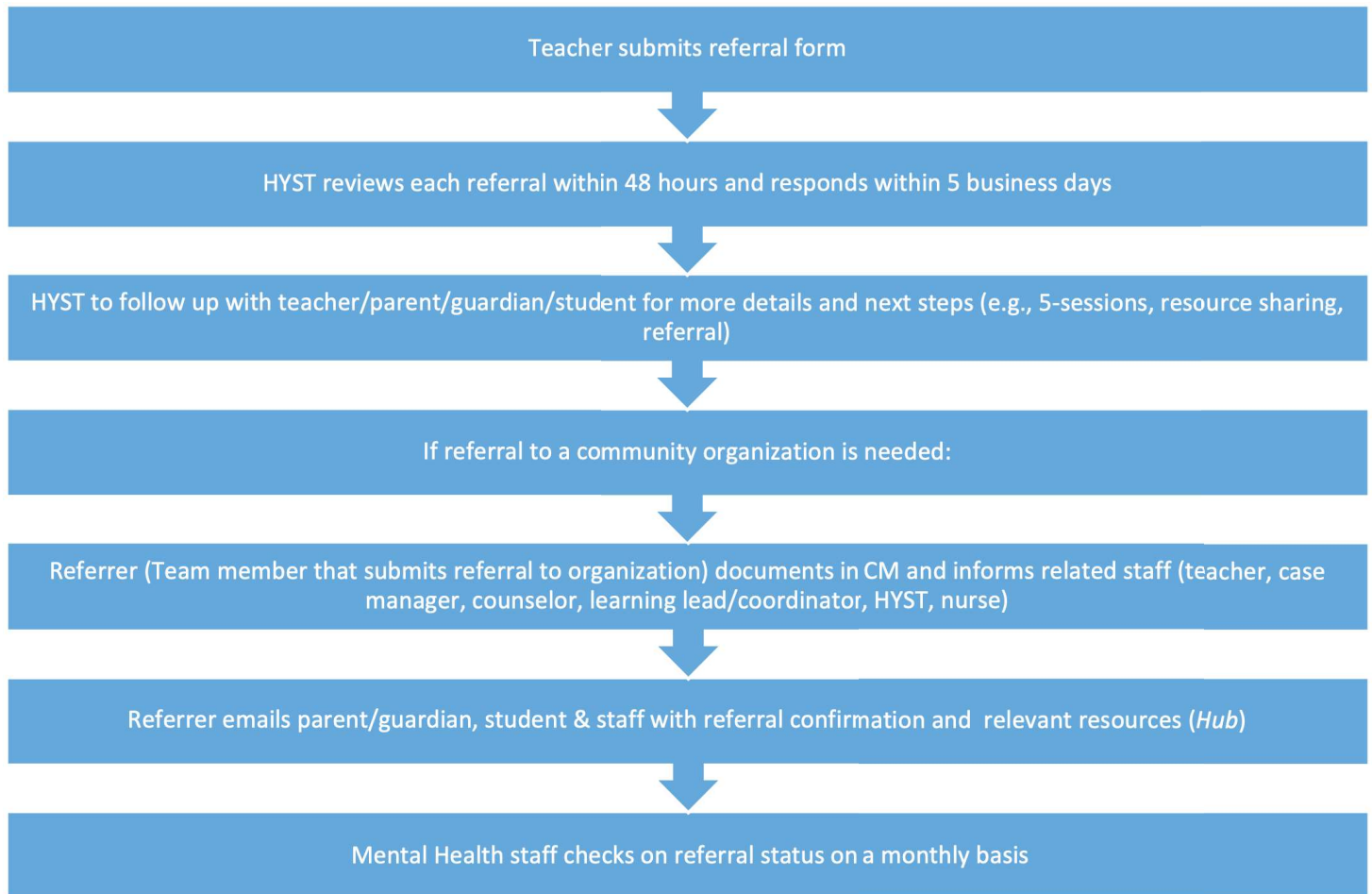
Referral Process for Non-Emergency Mental Health Services

Instructional staff are encouraged to refer any student for mental health services who demonstrates needs, especially in Tiers 2 and 3 of the MTSS, who are experiencing any of the following:

- Depression
- Risk of harm to self or others
- Suicidal Ideation
- Hospitalization after suicide attempt
- Homelessness
- Anxiety
- Family and/or community violence
- Family stress
- Oppositional behavior
- Significant change in behavior or functioning
- Bullying
- Poor peer relationships
- Bereavement and loss
- School refusal
- Withdrawal/isolation from others
- Abuse or neglect
- Low self-esteem
- Academic and/or attendance problems
- Exposure to substance misuse
- Eating disorder



To initiate a referral, the staff member will complete a Mental Health Referral Form (Appendix B) that is reviewed by the designated HYST or support staff member. The form will collect data to inform prioritization, the student's access to health care, student schedule and a description of the mental health need. The following process is utilized:



Data from the referral forms will be reviewed and broken down by student demographics to identify patterns, areas of greatest need, and ensure equitable access to services. This analysis will be used to enhance the mental health program and guide continuous improvement. and wellness in mind as a top priority.

Mental Health Reporting Protocols for Emergencies

Instructional staff are trained annually in mental health reporting protocols that account for emergencies taking place both at the resource center and away.

Any emergencies will be addressed and debriefed with a team approach, keeping the students' safety

Section VII: Suicide Prevention

Altus Schools recognize that it is critically important that schools have policies and procedures in place to prevent, assess the risk of, intervene in, and respond to suicidal behavior in youth. As part of the comprehensive mental health program, the Schools' ***Suicide Intervention and Prevention Policy Manual with Postvention Toolkit*** is updated annually to ensure that all staff who directly support students and families have research-based information, strategies and protocols in the prevention, intervention and postvention of youth suicide. In alignment with the school's Board approved policy, Altus Schools' suicide prevention program elements include:

- ***Prevention and Instruction:*** Suicide prevention strategies may include, but not be limited to, efforts to promote a positive school climate that enhances students' feelings of connectedness with their Altus School and is characterized by caring staff and harmonious interrelationships among students. The instructional and student support program shall promote the healthy mental, emotional, and social development of students including, but not limited to, the development of problem-solving skills, coping skills, and resilience. The School may offer parents/guardians education or information which describes the severity of the youth suicide problem, the School's suicide prevention efforts, risk factors and warning signs of suicide, basic steps for helping suicidal youth, reducing the stigma of mental illness, and/or school and community resources that can help youth in crisis.
- ***Staff Professional Learning:*** Suicide prevention training for staff is designed to help staff identify and find help for students at risk of suicide. Materials approved by the School for

training shall include how to identify appropriate mental health services, at school facilities and within the larger community, and when and how to refer youth and their families to those services. The training is conducted annually and may include information on research identifying risk factors, warning signs that may indicate suicidal intentions, research-based instructional strategies for teaching the suicide prevention curriculum and promoting mental and emotional health, school and community resources and services for students and families in crisis and ways to access them, and school procedures for intervening when a student attempts, threatens, or discloses the desire to die by suicide.

- ***Crisis Intervention:*** Staff will be trained to follow the mental health protocol for emergencies as noted above, in which the student's safety is prioritized, appropriate support staff, parents/guardians and law enforcement are contacted, referrals to appropriate services are initiated, and access to counselors and support staff is provided to all who were directly or indirectly involved in the incident.

A full description of the policies, procedures and best practices that Altus Schools adheres to protect the health and safety of all students can be found in the Schools' Suicide Prevention, Intervention, and Postvention Manual, available upon request.

Section VIII: Social-Emotional Learning

Altus Kids Homeschool TK-5 Program

In the TK-5 setting, social-emotional learning (SEL) is emphasized to support the holistic development of students with the understanding that fostering social and emotional skills is essential for overall well-being and academic success. Social-emotional learning is integrated into the daily homeschool curriculum, weekly family check-ins, and weekly enrichment sessions. Through explicit instruction and parent/guardian coaching grounded in the CASEL Framework, students learn essential skills such as self-awareness, self-management, responsible decision-making, social awareness, and relationship-building. We recognize that parents/guardians are crucial in supporting their children's SEL skills and creating a nurturing home environment that promotes emotional well-being.

Altus Kids supports homeschooling families to create a positive and supportive environment where students feel safe to express their emotions and thoughts. Following the Collaborative for Academic, Social and Emotional Learning (CASEL) Framework, teachers make research-based recommendations to incorporate activities and discussions promoting empathy, respect, and student collaboration. Teachers are purposeful in modeling positive social and emotional behaviors during enrichment sessions, providing students with real-life examples to learn from while supporting families to do the same at home. By implementing SEL in the TK-5 setting, we aim to equip students with the necessary tools to navigate their emotions, develop healthy relationships, and become responsible and compassionate individuals.

Resilience in Students and Education (RISE) Series

Led by the Healthy Youth Department and in collaboration with the school nurses and HYSTs, the RISE series are student-centered, monthly, one-hour webi-

nars designed to support the social-emotional needs of students, as well as specific needs for students with disabilities. RISE series promote social emotional learning by nurturing the five core SEL competencies: self-awareness, self-management, responsible decision making, social awareness, and relationship skills. Students are able to participate both virtually and in-person, complete age-appropriate assignments, have peer-to-peer interaction, and connect their learning to both school and personal lives. Staff are also able to assess students who need additional mental health support and refer students to the Healthy Youth School Therapists.

Curriculum Supports

Advancement Via Individual Determination (AVID)

AVID is an academic support program designed to prepare students for college and success. The elective courses are available to middle and high school students. The program incorporates the core SEL competencies from CASEL, which promote students' intra-personal, interpersonal, and cognitive competence. AVID curriculum incorporates core strategies and professional learning modules to advance students' self-awareness, self-management, social awareness, relationship skills, and responsible decision-making.

Comprehensive Health

This one semester course teaches students how to care for their bodies. Units covered in this course are: consumer and community health, injury prevention, alcohol, tobacco and other drugs, nutrition, environmental health, family living, and communicable and chronic diseases.

Career and Life Management

Students examine resiliency, locus of control, how to respond to difficult life events, social media, healthy relationships, bullying, wellness and nutrition, per-

sonal finance, and explore careers within the Family Services Career Pathway.

California Healthy Youth Act Instruction

In accordance with the California Healthy Youth Act (CHYA), Altus Schools provide students with integrated, comprehensive, accurate, and inclusive comprehensive sexual health education and HIV prevention education, at least once in high school and once in middle school. The purpose of the law is to provide students with the knowledge and skills necessary to: protect their sexual and reproductive health from HIV and other sexually transmitted infections and from unintended pregnancy; develop healthy attitudes concerning adolescent growth and development, body image, gender, sexual orientation, relationships, marriage, and family; have healthy, positive, and safe relationships and behaviors; promote understanding of sexuality as a natural part of human development; and to ensure pupils receive integrated, comprehensive, accurate, and unbiased sexual health and HIV prevention instruction and provide educators with clear tools and guidance to accomplish that end.

Students at Altus Schools receive CHYA instruction during “Wellness Week” each year, proctored by credentialed teachers and nursing staff during age-appropriate middle and high school workshops.

Human Trafficking Prevention

As part of Project Safe from Exploitation (SaFE), a human trafficking prevention education program, students in middle and high school are invited to participate in small group tutoring with age-appropriate curriculum that provides social and emotional learning opportunities and specific tools and strategies to prevent human trafficking. The curriculum for seventh and eighth grades equips students with knowledge that will enhance their personal boundaries and protective skills. The curriculum addresses key health-related concepts, encourages creative expression, and

allows students to practice positive decision-making strategies. Students will learn about the different forms of abuse and human trafficking, as well as how to look out for one another. The curriculum for ninth and tenth grades provides social and emotional learning opportunities to equip students with knowledge that will enhance their personal boundaries and protective skills. This curriculum focuses on teaching students about healthy relationships, unhealthy relationships, and the different forms of human trafficking. Students will be empowered with the tools they need to recognize potentially unsafe situations and implement healthy decision-making strategies.

Section IX: Professional Learning

Well trained school personnel are foundational in a comprehensive school mental health system as they are key to promoting student mental health, identifying and referring students who need mental health supports, and training on how to support students' mental health in the school setting. Altus Schools offer systematic and robust professional learning opportunities designed to support social-emotional learning, as well as the prevention of suicide and human and labor trafficking.

First Aid Youth Mental Health

Each year, teachers new to the Schools will complete a required training in youth mental health first aid, which teaches a five-step action plan to offer initial help to young people showing signs of a mental illness or in a crisis, and connect them with the appropriate professional, peer/ social, or self-help care. The eight-hour certification course teaches participants the risk factors and warning signs of a variety of mental health challenges common among adolescents, including anxiety, depression, psychosis, eating disorders, ADHD, disruptive behavior disorders, and substance use disorder. Participants do not learn to diagnose, nor how to provide any therapy or counseling. Rather, participants learn to support a youth developing signs and symptoms of a mental illness or in an emotional crisis by applying a core five-step action plan.

Trauma Informed Practices in Schools (TIPS)

TIPS training is offered through the Altus University professional learning system and the Equity and Inclusion department. The training teaches about the psychological impacts of trauma on the brain and the emotional, behavioral, and social impacts on students. Topics include definitions and types of traumas, and how they expand across the lifespan of the student. Teachers learn strategies for responding to

the impacts of trauma and how to support students to optimize learning.

Social-Emotional Learning (SEL)

SEL training is offered multiple times a year through the Altus University professional learning system and the Equity and Inclusion department. Teachers, case managers and instructional support staff learn about how to integrate key SEL concepts and instructional materials to build resiliency and build relational capacity with their students.

Human Trafficking Prevention and Curriculum: As part of Project Safe from Exploitation (SaFE), a human trafficking prevention education program, instructional and support staff receive training and curriculum about human trafficking and labor exploitation. Staff training provides critical information about human trafficking and trauma, including the vulnerabilities and risk factors, so that educators and office staff are equipped to use a trauma-informed approach when working with youth that may be experiencing exploitation. Additionally, teachers are trained on delivering human trafficking prevention curriculum to students in 7th -10th grade.

Signs of Suicide

Our Healthy Youth School Therapists provide an annual Signs of Suicide (SOS) training to educational staff, which outlines the importance of having suicide prevention, intervention, and postvention processes in place. The training helps staff members further understand the content of the Suicide Prevention, Intervention, and Postvention Manual resources and strategies. During the training, staff members have the opportunity to ask questions, engage in discussions, share experiences, practice risk screening, determine risk level, and create safety plans. Trainings include role play scenarios focused on risk factors, warning signs,

protective factors, common myths, “Dos and Don’ts,” suicide risk screening, safety planning, and utilizing the Suicide Prevention, Intervention, and Postvention resources and toolkit. The purpose of the training is to help staff members become more comfortable when discussing the topic of suicide, familiarize them with the screening process, better understand relevant research and best practices, and the importance of suicide prevention and intervention.



Section X: Program Evaluation

In order to evaluate the impact of the comprehensive mental health program, Altus Schools will utilize several data sources to gauge the outcomes of mental health program elements, including educational impact measures that may include student engagement and academic indicators, health impact that may include measures of wellness, impact on school climate with measures including students' school connectedness and safety, as well as fiduciary solvency associated with program implementation. By measuring the impact of mental health initiatives, we are able to describe program successes and challenges, inform quality improvement, and adjust for program maintenance, growth and change. Program evaluation elements include:

- Clear objectives
- Baseline data collection
- Program implementation monitoring
- Impact on educational and functional outcomes
- Educational partner feedback

Data Collection and Evaluation

The evaluation of a school's comprehensive mental health program is best understood as a process that occurs along a continuum of stages that grows in comprehensiveness and impact on student outcomes. In alignment with the National Center for Healthy Safe Children's continuum of implementing a comprehensive school mental health program, Altus Schools will implement data collection and evaluation practices that ultimately lead to the most advanced stage of program evaluation.

- **Stage 1: Novice** - Program evaluation at this stage focuses on describing the program and its services. This includes descriptions of the

tiered services of support, staff who provide the services, sources and reasons for referrals. Cost evaluation may describe staffing structure and staff costs.

- **Stage 2: Beginner** - Program evaluation grows to describe the characteristics of students served and preliminary progress or outcomes. Cost evaluation analyzes costs of program features and staffing.
- **Stage 3: Intermediate** - Program evaluation includes the tracking of student progress and outcomes over time. Cost evaluation involves tracking costs and revenues.
- **Stage 4: Advanced** - Program evaluation evolves to examine long-term outcomes for students and compare them to similar students who did not receive services. Fiscal evaluation may link costs to outcomes to demonstrate return on investment.

Considering the various mental health program elements, several data measures will be collected to evaluate process, impact and outcome, including:

- California Healthy Kids Survey
- Student participation and outcomes in RISE series
- Suicide prevention, intervention and postvention screenings and outcomes
- Quantity and typology of mental health referrals
- Quantity and typology of referrals to community based mental health organizations
- Functional and clinical outcomes measures
- Behavioral screening results
- Utilization and outcomes of Tier 2 and Tier 3

services and supports

- Qualitative feedback from students, families and school staff
- Staff professional learning participation and engagement
- Mental Health Services Satisfaction Surveys
- Impact of mental health services on academic indicators

Continuous Quality Improvement

In order to systemically evaluate and improve the quality and impact of the Altus Schools' comprehensive mental health program, the School Health Assessment and Performance Evaluation (SHAPE) system will be utilized to assess and reassess strengths and needs, establish priorities for improvement, and engage in "real time" change management to establish and meet quality improvement targets. SHAPE uses seven domains to assess system quality using national performance measures, and it is designed to assess the comprehensiveness of the school mental health system and identify priority areas for improvement. The seven domains evaluated are:

- Teaming
- Needs Assessment/Resource Mapping
- Screening
- Mental Health Promotion, Services & Supports
- Early Intervention and Treatment Services & Supports
- Funding & Sustainability
- Impact

Mental Health Team

A team of individuals in several roles within the school system will champion the evaluation and quality improvement processes of the mental health program. This team will be comprised of school mental health

staff, administrators, teachers, school psychologist, school nurse and academic counselors. Students and families will also be invited to participate, as well as community health and mental health partners as appropriate.

School Mental Health Quality Assessment

Every two years during the fall semester, the mental health team is responsible for completing the School Mental Health Quality Assessment which addresses the seven domains identified above and provides a score report that evaluates program areas as Emerging, Progressing, or Mastery. After the assessment is completed, the team will utilize the summary report provided by the SHAPE system to identify program strengths and areas for improvement.

Improvement Areas

The mental health team will identify areas for improvement by targeting the program areas that obtained Emerging or Progressing scores in the Quality Assessment. The team will then select one to two areas of focus for one to two school years by utilizing a strategic planning guide and relevant School Mental Health Quality Guides provided by the National Center for School Mental Health. From these guides, the team will design and implement an action plan that includes goals, measures of success, action steps, staff member roles and responsibilities, and implementation timeline.

Implementation and Reassessment

The mental health team will implement the action plan and reassess quality improvement in the targeted domains at the end of each school year. Using the SHAPE system, score reports will be used to measure impact and determine next steps in the continuous quality improvement cycle.

The development, implementation, and evaluation of the Altus Schools Comprehensive Mental Health Program is an essential component of our vision to create

instructional, service, organizational, and governance models that can serve as prototypes for educational reform. The well-being and mental health of our students have a profound impact on their academic success, personal growth, and overall quality of life. By integrating comprehensive mental health services and supports into the educational setting, we can create a nurturing environment that promotes resilience, emotional well-being, and success for all students, thus fulfilling our core competency to Transform Lives.

Section XI: References

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