

SAP CONNECTION

December 2021



Prepared by: PA Network for Student Assistance Services (PNSAS)

www.pnsas.org

PNSAS INTERAGENCY UPDATE

Prevent Suicide PSA Contest for Youth Suicide Prevention

Prevent Suicide PA is once again hosting the annual PSA contest for high school students. This is a great opportunity to engage students in a dialogue around suicide prevention, the importance of positive messaging, and communicating effectively. Staff who have participated in the past have seen this as a way to teach students on many levels (academically, socially, and emotionally), and students have been empowered to use their voice to reach out to their peers. Contest submissions are due by **Wednesday, December 15, 2021**. Full contest information, including rules and submission guidelines can be found [here](#). All the winning and honorable mention PSAs from previous years are available for free public use and can be accessed by visiting the website [here](#). These are great resources to use throughout the year.

SAP BACK TO BASICS

Assisting Students Returning from Out of School Placements

Returning to school from an out of school placement can be a very difficult transition for a student and their family. Once the school is aware that a student is returning from a placement, many SAP teams want to help but aren't sure how.

Question seventeen of [Pennsylvania's Student Assistance Program Frequently Asked Questions and Best Practice Responses, February 2021](#) briefly addresses this.

17. Can your SAP team offer support to that student?

Yes. It may be appropriate for the SAP team to assist in the student's transition back to school. Reentry should be addressed on an individualized basis to identify potential barriers to learning and appropriate supports.

If a student is returning to the district from a mental health or substance abuse placement scheduling a re-entry meeting prior to return is the best-case scenario. This enables appropriate school staff, student, parent/guardian, and placement contact to discuss a plan of action to assist the student as he/she transitions back to school. Many schools do not get advance notice of re-entry; therefore, it is important to begin planning for re-entry and soon as they enter a treatment facility. Getting signed releases of information is paramount to understanding the individual needs of the student upon return to school.

If a re-entry meeting did not occur, SAP teams are situated to help and here are some suggestions. Start by following the four phase SAP process when working with a student returning from out of school placement.

Phase 1 - A referral should be made to the team and the student should be offered SAP. This can be offered as soon as the school becomes aware of the placement, to expedite the supports upon their return. Obtain written parent/guardian permission. Talk with the parent/caregiver to see if the student received a discharge plan, anticipated timeline for discharge, and does it address the student's current educational needs.

Phase 2 - Team planning should include review of the discharge plan or the student's grades, attendance and behavior prior to the out of school placement. The team meets with the student and parent(s)/caregiver(s) to discuss the information collected. Assign a case manager to help guide the student and parent(s)/caregiver(s) through the process, provide information, answer questions and check- in to find out how things are going and if there are any concerns. Together, with the family, a plan is developed that includes strategies that promote academic and personal success of the student. Supports for that student returning from placement should include those within your building.

Phase 3 - Recommendations and interventions need to happen so put that plan into place! The team assists in linking the student with appropriate school-based and/or community-based services and activities. Collaboration with the out of school placement and communication with the family and student is key.

Supports for students returning from placement should include those within your building such as:

- Check-ins with SAP team case manager or team member
- Tutoring
- Working with teachers to develop a realistic plan for student to complete any missed work
- Mentoring
- One-on-one supports/strategies with the school counselor/social worker
- Participation in an educational support group
- School activities that build positive social connections

Phase 4 - Support and follow-up should be the primary focus of your SAP team's work with that student returning from an out-school placement. Follow-up includes monitoring, mentoring, and motivating for academic success. The team monitors by continuing to periodically send out behavior checklists and regularly touching base with the student and their parent(s)/caregiver(s). By monitoring the student, your team can assess if the plan developed in Phase 2 of the SAP process needs to be revised. Mentoring happens either formally by the student participating in a mentoring program or informally with check-ins from their SAP team case manager. Motivating for academic success happens by building those positive school connections and providing supports.

Any questions about assisting students returning from out of school placements? Contact your Regional Coordinator. Contact information can be found at <https://pnsas.org/PNSAS>.

RESOURCES and NEWS

PRESCRIPTION STIMULANT MISUSE AND PREVENTION AMONG YOUTH AND YOUNG ADULTS

The misuse of prescription pain relievers, tranquilizers, sedatives, and stimulants among youth and young adults aged 12 to 25 is a major public health issue in the United States. The prevalence of prescription drug misuse is highest among young adults between the ages of 18 and 25; over 11 percent report the misuse of prescription drugs in the past year. Similarly, over 4 percent of youth between 12 -17 report prescription drug misuse in the past year. Although the overall prevalence of prescription drug misuse among youth and young adults has declined in recent years, its relatively high rate among young adults is concerning.

Prescription stimulant misuse includes:

- Using medication without a prescription of one's own, even if with therapeutic intent.
- Using medication in greater amounts, more often, or longer than prescribed.
- Using medication in any way other than directed by a prescriber (e.g., non-medical use).
- Using medication for recreational purposes or without therapeutic intent.

Youth and young adults often obtain prescription stimulants through diversion, with more than 60 percent reporting they obtain them from a friend or relative. Youth and young adults with legitimate prescriptions for stimulant medication will sometimes sell, trade, or give away their medications, often at the request of others wanting to use them illegally. Most prescription stimulants are taken orally and are available as tablets, capsules, or liquids. Youth and young adults may

misuse prescription stimulants orally, as well as by snorting/inhaling, smoking, or injecting a powder from crushed tablets or opened capsules, with snorting/inhaling being the most common mode of nonoral use. Oral misuse of prescription stimulants can be a precursor to the non-oral misuse of prescription stimulants, which itself can be a precursor to the use of other substances. One study, based on data collected from youth in 10 U.S. cities, found that as many as 17 percent who used prescription stimulants, regardless of how they were obtained, misused them via a nonoral route in the past 30 days. Some studies have found that participants who reported the non-oral use of prescription stimulants were more likely to report adverse mental health outcomes and negative health outcomes in general when compared to participants who used prescription stimulants orally and for medical purposes.

Prevalence of Prescription Stimulant Use/Misuse - Rates of prescription stimulant use and misuse vary by demographic characteristics. Increases in prescription stimulant use may be attributable to increases in the prevalence of ADHD diagnoses in the United States.

Prescription Stimulant Misuse Prevention Programs - Currently, there are no known prescription stimulant misuse prevention programs exclusively for youth, although one program has been designed for people of all ages, including youth and young adults.

Generation Rx - This program educates individuals about the importance of using medications safely and preventing misuse. It can be delivered to youth in a classroom setting, after school programming, youth organization meetings, or any venue where youth congregate. As of 2021, this program has not been evaluated.

Tips and Action Steps for Educators

Most youth and young adults who misuse prescription stimulants do so to improve academic performance and increase alertness and concentration when studying. Educators are well-positioned to provide prevention messages cautioning the misuse of prescription stimulants. Educators in middle and high schools, and even those working with students in elementary grades, may consider the following to help reduce prescription stimulant misuse:

- Incorporate substance use prevention programming into the curriculum and emphasize the prevention of prescription stimulant misuse.
- Educate students on the dangers of prescription stimulant misuse, the personal, legal, and financial consequences of diversion and misuse, and dispel myths about prescription stimulant use (e.g., that it improves academic performance, is safe).
- Encourage social-emotional learning strategies.
- Offer methods to improve academic performance and healthy study habits, such as study tips and peer tutoring or academic studying programs.
- Share evidence-based strategies that support healthy sleep.

Click [here](#) to access the full article.

Persistent, Distressing Psychotic-like Experiences Associated with Impairment in Youth

National Institute of Mental Health

In a new study, researchers examined the association between distressing and persistent psychotic-like experiences (PLEs) in youth and important risk factors for psychopathology. The researchers found that youth who indicate they have persistent, distressing PLEs show impairment in a variety of areas, such as cognition and reported psychopathology, highlighting the long-term challenges these children may face and the need for early intervention and support. The study, funded by the National Institutes of Health, appears in *Molecular Psychiatry*.

More than 17% of children between the ages of 9 and 12 experience PLEs, such as mild perceptual abnormalities or delusional thoughts. However, only a small subset of these children will develop psychotic disorders. One factor that could help distinguish clinically relevant PLEs from benign ones is whether the psychotic experiences are persistent and/or distressing. In this study, examined the extent to which persistent and/or distressing PLEs were associated with risk factors for psychosis.

Overall, in the study, the greatest functional impairments and mental health service utilization were seen in those with both distressing and persistent PLEs. Also, youth who experienced persistent, distressing PLEs had greater bipolar, externalizing, and internalizing symptoms than youth without persistent, distressing PLEs. The most significant impacts on cognitive functioning, such as greater deficits in fluid cognition, including working memory and receptive language, were also seen in youth with persistent, distressing PLEs. Youth with persistent, distressing PLEs also experienced more significant environmental adversity than their counterparts, such as higher overall deprivation levels and more adverse childhood experiences. The researchers also found that youth who experienced distressing PLEs, had delayed developmental milestone achievement, lower cortical and subcortical brain volumes, and differences in brain network connectivity compared with youth who had non-distressing PLEs.

The findings of this study indicate that children with persistent, distressing PLEs show elevated risk factors in domains such as psychopathology, functioning, and cognitive performance. These results suggest that persistent, distressing PLEs represent an important screening indicator of youth who go on to develop long-term challenges, regardless of whether they go on to develop psychotic disorders and may indicate which children are prime candidates for early intervention. Click [here](#) for a copy of the full article.

Return to School Roadmap – Emergency Operation Plans

Schools, school districts, and institutions of higher education (IHEs) across the country are all unique. However, one thing they have in common is the need to develop and continually maintain emergency operations plans (EOPs) that outline goals, objectives, and courses of action for before, during, and after a potential emergency. Landmark #1 in the U.S. Department of Education’s [Return to School Roadmap](#) for this academic year focuses on “prioritizing the health and safety of our nation’s students, school personnel, and families.” High-quality EOPs support education agencies and their communities in meeting that landmark by providing a solid, but flexible, structure they can use to plan ahead and be prepared for potential emergencies they may face.

The Federal government offers a recommended format that education agencies can use to enhance existing EOPs or to create new ones. The *Guide for Developing High-Quality School Emergency Operations Plans*, *The Role of Districts in Developing High-Quality School Emergency Operations Plans*, and the *Guide for Developing High-Quality Emergency Operations Plans for Institutions of Higher Education* - [collectively known as the Guides](#) - all offer a recommended EOP format that education agencies can use as they create plans that consider all settings and times and a variety of threats and hazards.

Understanding the Roles of School Resource Officers

A school resource officer (SRO) is a career law enforcement officer, with sworn authority, deployed in community-oriented policing and assigned by the law enforcement agency to a local education agency to work in collaboration with schools. SROs possess unique expertise that can enhance a school’s or school district’s emergency planning efforts. The U.S. Department of Education, Office of Safe and Supportive Schools and its REMS TA Center are pleased to provide a **NEW**, downloadable training module for K-12 school safety teams, leaders, and trainers at public and nonpublic schools, school districts, regional/state education agencies, and partner agencies to use on the topic of [Understanding the Roles of School Resource Officers \(SROs\)](#).

This module and its materials are intended for you to use to deliver in-person or online trainings to your colleagues and/or site and to support your training programs. The goal of this 60-minute training module is to help K-12 schools and school districts develop a greater understanding of how SROs can support teaching and learning by creating safe and supportive learning environments, assisting during emergencies, and helping in preparedness efforts. Learn about SROs and SRO programs, an SRO’s roles in school safety, and the importance of collaboration through the creation of SRO memoranda of understanding (MOUs). This module consists of the following materials:

- Training presentation materials, including speaker notes, for school safety teams and practitioners to use to deliver trainings to the whole school community or learn on their own.
- Training instructions to help you deliver this module to your colleagues.
- Resource list for additional information and resources related to the topic.

TRAINING OPPORTUNITIES

SAP Trainings: available both in person and virtually in certain locations throughout the state. These trainings are delivered by PA Approved SAP Training Providers. For a complete listing click [here](#) to access the training calendar.

The Pennsylvania Care Partnership: offers trainings and webinars throughout the year. Click [here](#) for this year's events.

PA Parent and Family Alliance: upcoming and archived webinars, tip sheets, and resources are located on their [website](#).

Keeping Our Children Safe: Strategies for Schools and Communities (Virtual)

December 7-8, 2021

Hear state and national experts present the latest research and trends in school safety, youth violence prevention, evidence-based program models, and more. Click [here](#) for more information.

PASAP Members Webinar

December 15, 2021, 2:30-3:00 PM

Levels of Mental Health Services featuring Terrie Taylor, Caron Treatment Centers. This Webinar will explain the various levels/types of mental health treatment, the medical criteria for a psychiatric hospitalization, and how to work with various treatment providers to ensure communication and best treatment practices. Click [here](#) for more information and to register.

Effectively Implementing an Evidence-Based Practice: Strategies for Non-Clinical Supervisors

December 16, 2021, 10:00 AM

Office of Juvenile Justice and Delinquency Prevention (OJJDP) is hosting a webinar that is targeted to supervisors and executive directors of CACs who are responsible for managing their agency's mental health services but who may not themselves be clinicians. Click [here](#) for more information on this webinar.

PA Association of Student Assistance Professionals Conference - The 2022 Virtual PASAP Conference is quickly coming together and there will be a lot to offer along with a few surprises! Conference sessions will remain open from **February 27th - April 10th**. Stay tuned, more information will be available at <http://pasap.org/>

Awkward Conversations Videos

The Drug Enforcement Administration is excited to announce that DEA and the Benevolent and Protective Order of the Elks have teamed up with Hollywood stars David Dastmalchian (from *The Suicide Squad* and *Dune*) and Jodie Sweetin (from the ABC comedy series *Full House* and its Netflix sequel series *Fuller House*) to release a PSA short-form web series called [Awkward Conversations](#).

The three-episode series covers the complications and awkwardness of family discussions around drug and alcohol use. In these three family-friendly episodes, the parents are forced to confront issues such as media portrayals of alcohol, questions about the influences kids face from peers, other family members, and even the question of their own past. Each episode runs approximately 8 to 10 minutes.

Each episode is accompanied by an unscripted post-show discussion hosted by Jodie Sweetin and Boston Children's Hospital Clinical Social Work Director, Amy McCarthy. The two chat with celebrity parents on how to approach these topics with their children and how to engage in conversation to give kids tools to make healthier choices.

FUNDING OPPORTUNITIES

2022 Farm to School Grant

The Office of Community Food Systems (OCFS) announces the official release of the Fiscal Year (FY) 2022 Farm to School Grant Program Request for Applications (RFA).

USDA expects to award approximately \$12 million in competitive grants to eligible entities through the Farm to School Grant Program in FY 2022. Each grant helps implement farm to school programs that increase access to local food in Child Nutrition Program (CNP) meals, connect children with agriculture for better health, and inspire youth to consider careers in agriculture. Since the program's inception in 2013, USDA has awarded nearly \$64 million through Farm to School Grants, funding 896 projects, reaching over 22 million students in more than 54,000 schools.

The RFA includes three tracks—Implementation, State Agency, and Turnkey. Each track provides funding for a specific range of activities:

- There are four Turnkey grant project types, with up to \$50,000 in funding available for all Turnkey projects: (1) farm to school action plan development; (2) agricultural education curriculum development and delivery; (3) edible gardening; and (4) the USDA farm to school producer training project. To streamline the application process, required activities are fully specified within the RFA and Turnkey applicants submit a simplified proposal narrative.
- Implementation grant awards range from \$50,000-\$500,000. An Implementation grant works well for eligible entities with prior farm to school experience, helping scale up or further develop existing farm to school initiatives. Some examples of activities in Implementation grants include (but are not limited to) training and technical assistance, supply-chain development, evaluation activities, conducting a regional farm to school institute, creation of promotional materials or campaigns, and formation of networks or coalitions.
- State Agency grant awards range from \$50,000-\$500,000 to help State agencies seeking to improve access to local food served in eligible CNPs by incorporating local procurement and agricultural education activities.

A wide variety of entities are eligible to compete for funding through this grant opportunity. Eligible schools, State and local agencies, Indian tribal organizations, small- to medium-sized agricultural producers or groups of small- to medium-sized agricultural producers, and non-profit organizations are eligible for Farm to School Grants. Institutions operating the Child and Adult Care Food Program (CACFP) and Summer Food Service Program (SFSP) at non-school based sites may also apply for funding.

Please note that eligibility varies by grant track. Please see the RFA for specific eligibility requirements. A Frequently Asked Questions document will be available soon on the [Farm to School Grant Applicant Resources Page](#).

The Grant RFA can be found online [here](#). Complete applications must be submitted on www.Grants.gov by 11:59 PM ET on Monday January 10, 2022.