

## Appendix G - PSDORT Award Application Summaries

# Overview of the 51 Award Grants

The following is a comprehensive summary of the 51 applications selected to receive awards in the first phase of the Public School Districts Opioid Recovery Trust grant making process. There are 3 categories of grants:

## District Improvement Grants

These 24 grants will help districts respond to systemwide challenges in their district triggered by the opioid epidemic. In applying for these grants, districts considered how they could coordinate and align their own resources with complementary resources in their wider communities in support of services for students affected by the opioid crisis.

## Model Program and Best Practices Grants

These 16 grants will help districts build or adopt model programs, based on evidence, in support of students harmed by the opioid crisis, including programs and best practices in areas such as teaching approaches, curricular modifications, extended learning opportunities, mental health supports and restorative practices, forms of acceleration and enrichment, and using technology to foster student engagement and increasing learning.

## Innovation Grants

These 11 grants will enhance the ability of districts to introduce new, innovative approaches to support students harmed by the opioid crisis. These approaches can be at the level of the student, the class, the school and/or the district in relation to the family and community and include all areas that affect the wellbeing of these students, such as teaching approaches, curricular modifications, extended learning opportunities, mental health supports and restorative practices, forms of acceleration and enrichment, and using technology to foster student engagement and increasing learning.

# Summary of the 51 Award Grants

## A. District Improvement Grants

### 1. Bangor School Department (ME)

Citing state data on the disruptive impact of the opioid crisis in the community, district data on the increased numbers of students needing special education services, as well as increased absenteeism, disruptive behaviors, and student suspensions, the Bangor School Department proposes a comprehensive plan, including community partners and the City of Bangor, to improve the identification of students affected by the opioid crisis, the implementation of program modifications to set them up for academic success, and the capacity of adults in the district to support students, assess student progress, and adjust interventions. Reviewers noted the proposal's comprehensive design along with the deep connections to community partnerships and aligned resources. They saw clear evidence of need and of the potential impact of the district's plan for providing direct student support and developing capacity on behalf of the target population.

### 2. Barren County School District (KY)

Barren County School District proposes the expansion of a successful small pilot, the Resiliency Factor Program, originally targeting seven 7-12 students and their families, to reach a larger number of families affected by the opioid crisis, in partnership with state programs, community partners, and many other local actors. Core components of the plan include comprehensive support of families through mental health services, life skills education, and community engagement. At the heart of the program is relationship building – between families and the school district, families and mental health providers, families and local agencies, and most importantly, between parents and their children. Reviewers found the positioning of district systems and processes as crucial to centering the family in the relationship between the student and the school innovative and a potential model for others.

### 3. Berkeley County Schools (WV)

Consistent with Berkeley County Schools' two other proposals, this proposal coordinates the resources found in Berkeley County Schools with The Martinsburg Initiative to support services for students affected by opioids. The plan focuses on two interconnected components: 1) training educators to become trauma-sensitive and 2) embedding mental health professionals within schools to provide support for student well-being. The district aims to provide annual training on

introductory Adverse Childhood Experiences to 200 educators and to train 60 educators over three years in trauma-sensitive practices. Additionally, two licensed social workers will be placed in Berkeley County elementary schools to deliver mental health support to students with trauma histories and to implement evidence-based interventions for students referred for behavioral health services.

#### **4. Bledsoe County Schools (TN)**

Bledsoe County Schools' application conveys the district's need to build district-wide tiered interventions in support of students and families affected by the opioid crisis where many vital resources are missing. The plan focuses on a key building block – the hiring of two social workers to begin the work of developing the necessary systems and processes. It outlines potential timelines and steps to begin enhancing student mental health and wellbeing through interventions; providing family support and engagement; and increasing the collaboration between school staff and the community to better support students and families when dealing with substance abuse. The reviewers appreciated the amount of thought spent on understanding the challenges and figuring out where and how to start.

#### **5. Bullitt County Public Schools (KY)**

Having already forged partnerships with seven district community partners to address the severe impact of the opioid crisis in its community and schools, and with building blocks such as having licensed clinically trained social workers in place offering mental health support to many students, Bullitt County Public Schools plans a more coordinated and systemic response to what the data shows remains critical needs in its schools. The district plans to establish collaborative partnerships to create a robust support network for its affected families; develop a comprehensive framework for ongoing prevention, early identification, intervention and ongoing support; build capacity among its staff; engage with families; and improve its data-driven systems and processes to achieve better decision making.

#### **6. Chester Upland School District (PA)**

As lead district, Chester Upland School District represents a consortium partnering with the University of Pennsylvania's Project for Mental Health and Optimal Development, ConnectEd Workforce, and The Children's Hospital of Pennsylvania will utilize a community of practice (CoP) model to strengthen opioid education, assessment, and response methods for students, educators and families of Chester Upland School District and its 8 partner districts. The proposal commits to expand district needs assessments to include indicators and related factors from opioids; to review and improve district strategic plans and stakeholder outreach; to expand the Consortium for Mental Health and Optimal Development to support cross-district collaborative

learning, mental health literacy, and to increase the capacity for mental health and development projects. The partners will develop an Opioid Response Toolkit for students, educators, and communities, and publish success stories from the collaborative to act as models for the development of similar programs across additional districts. The Mental Health Consortium will support district initiatives while equipping educators in all positions and levels with a comprehensive guide to evidence-based strategies. Through the consortium, the districts will engage in collaborative sessions informed by improvement science to continue adapting the district's improved strategic plans. The reviewers praised the potential for wide reach and application in the collaboration.

### **7. Delsea Regional School District (NJ)**

The Delsea Regional School District (DRSD), serving 1,632 students in grades 7–12 in a community hard hit by the opioid crisis and serving high numbers of students requiring special education services, proposes a plan to implement a district-wide comprehensive mental health and wellness initiatives designed to mitigate the opioid crisis's adverse effects on students. Key objectives include establishing partnerships with local mental health providers to deliver on-site counseling and trauma-informed care training for staff; launching food stability programs, such as weekend backpack initiatives and nutrition education workshops, to combat food insecurity; and increasing access to medical services through bi-annual vaccine clinics and annual wellness checks facilitated by the district. A robust evaluation plan will track mental health service utilization, food program participation, and academic and behavioral improvements. The proposal calls for long term impact through strategic partnerships, diversified funding, capacity building, and the integration of program components into district policies. Reviewers commented on the strong integration of trauma-informed care, mental health, and food/medical access services, as well as the clear-phased implementation, community collaboration, and evidence-based practices, including peer support and training, with a well-articulated timeline.

### **8. Dillingham City School District (AK)**

Dillingham City School District, a small rural district in a region of Alaska designated as a Medically Underserved Area, proposes a two-prong plan relying on after-school programming and trauma-informed practices training for staff to create a supportive environment for students and families affected by the opioid crisis, who suffer extensive interruptions when finding treatment and support far from the district. The proposal identifies a curriculum as well as partners and frameworks, and focuses its evaluation on high school academic outcomes. One of the reviewers noted that there was a stronger case and throughline here than in any of the other proposals the reviewer had read.

### **9. East Haven Public Schools (CT)**

This proposal improves East Haven Public Schools' capacity to offer a structured system of identification, intervention and prevention to foster resilience and academic success, as well as to provide sustainable support systems that address behavioral, academic, and familial needs. The targeted students include those born with neonatal abstinence syndrome and/or students experiencing trauma, developmental delays, or educational disruptions because of opioid related environments or exposure. The key objectives include early identification of at risk students through screening tools during preschool, and interventions to address developmental delays and learning challenges. Dedicated staff will create personalized intervention plans for identified students, as well as ensure continuity of care as students transition between early intervention programs and school-age services. The district also proposed trauma-informed professional development for teachers and administrators. Reviewers praised the specific attention to the targeted population, the attention to building capacity as well as systems, and the district partnerships to support the plan.

#### **10. Elk Township School District (NJ)**

Elk Township School District, a small district serving Pre-K through 6th grade with very high numbers of students receiving special education services, and high incidence of families experiencing family addiction, trauma and instability, proposes to implement a comprehensive mental health initiative to mitigate its reliance on special education classification. The project includes the provision of direct mental health services to students, offering trauma-informed training to all educators, and engaging families through targeted workshops. The initiative aims to reduce behavioral incidents by 20%, decrease special education referrals by 15%, and improve overall student well-being and academic engagement over the span of the grant. The plan focuses on evidence-based practices and community collaboration, and aims for a system that prioritizes prevention, early intervention, and family engagement. Reviewers commented on the clarity of the proposed outcomes and the evidence of capacity to accomplish the goals of the proposal.

#### **11. Greenfield Public Schools (MA)**

The lead district applicant, Greenfield Public Schools, and its five partnering districts, Athol-Royalston Regional School District, Frontier Regional School District, Gill-Montague Regional School District, Mohawk Trail Regional School District, and Pioneer Valley Regional School District, serve a region with disproportionate levels of substance use, limited access to mental health resources, economic hardship, and transportation barriers. These districts are addressing regional challenges with a strong roster of civic and community partners, resulting in an Opioid Task Force focused on providing addiction prevention, recovery support, and educational programming for students and families. Other partners support conflict resolution and restorative practices, as well as professional development on supporting targeted students and families. Reviewers commented on the coherence of the proposal, the evidence of long term commitment and thought, and the potential for impact and replication.

## **12. Hamblen County Schools (TN)**

Citing the extraordinary increase in both violent incidents and the number of students served by the district's behavior specialists, and the incidence of students born with neonatal abstinence syndrome in its community, Hamblen County Schools identifies a need for district-wide structures and coherence in its processes to serve students affected by the opioid epidemic, including the introduction of therapeutic crisis interventions developed to address violent behaviors caused by the effects of the long term effects of neonatal abstinence syndrome. Reviewers commented favorably on the multi-tiered, phased approach of the plan and its targeted interventions, as well as on the focus on building capacity not just among teachers but also among all administrators. They also noted the clear goal of reducing referrals and alternative placements.

## **13. Lincoln King Adams Young Academy (MI)**

Citing Detroit opioid use data, school-level trauma statistics, and systemic inequities, Lincoln King Adams Young Academy proposes an ambitious student-centered proposal that creatively blends trauma-informed wellness hubs, peer mentorship and after-school enrichment. Reviewers found the approach novel, with clear evidence of need and alignment to serving a critically affected population. They noted the experienced leadership and extensive partnerships, the focus on building capacity among staff, and the clarity and specificity of the proposal's outcome goals.

## **14. Madison Carver Academy (MI)**

Madison Carver Academy, a district serving k-5 neighborhood students in Detroit, proposes implementing three interrelated programs to address the challenges presented by opioid addiction among its families and community: school embedded recovery centers, substance abuse education as part of the general curriculum, and community training hubs that rely on a committed cadre of parents and community supporters. Reviewers commented on the proposal's novel use of art therapy and animal-assisted support interventions to complement more traditional evidence-based practices, as well as its asset-based approach to community support.

## **15. North Adams Public Schools (MA)**

North Adams Public Schools seeks funding for a combination of targeted mental health supports and supplemental counseling services, alongside implementation of school-wide health and wellness curricula, and the creation of a data dashboard to help the district monitor and evaluate programmatic goals and progress. The proposal also calls for expanding its partnership with Northern Berkshire Community Coalition. The proposal, while invested in the overall enhancement of district-wide emotional learning and health and wellness strategies, commits to

improving special education services as a key outcome of the plan. It also commits to the sustainability of the plan through local and other future funding.

#### **16. Phoenix Talent Schools (OR)**

The district proposes enhancing access to interventions, targeted mental health support, and integrated school-based health services to support students and families affected by the opioid epidemic. The initiative will implement screening, intervention and referral tools; add capacity to support training in substance use abuse; and expand its school-based health center into a full-service clinic. The district will work with partners at Portland State University to deliver professional development, and with local organizations to strengthen referral pathways for its families and students. Reviewers found the proposal a strong district evidence-based application, with particularly clear objectives tracking its implementation, and strengths in its partnerships and thought to sustainability.

#### **17. RSU 68 (ME)**

RSU 68 proposed a plan focusing on enhancing support for students in need from an early age, drawing on strong evidence of the high incidence of county children born with exposure to substance abuse. The district is in the process of transitioning responsibilities from Child Development Services in Maine, which has required increased district and school capacity among educators, but it needs people in dedicated roles to support young, affected children transitioning into schooling and their parents. Reviewers saw a clear connection between the district's impact analysis, the existing district capacity and the proposed plan.

#### **18. Sarasota County Schools (FL)**

Sarasota County Schools proposed a plan to enhance district and student support to improve coordination between schools and agency partners charged with evaluating students and making recommendations for individualized student support plans. It also aims to increase knowledge and strategies among school district staff, to accelerate comprehensive evaluation and intervention of identified students, and to increase the coordination of support for students grappling with opioid abuse between schools and district partners. A cornerstone of the plan is the creation of a team to help with capacity building and needs assessments at the school level, but especially to help integrate trauma-informed partnerships and practices and to monitor the implementation of student support. Reviewers noted the clear program design and detailed actions and roles to implement the plan, as well as the concrete goals and outcomes for each year of implementation.

### **19. SAU 46 – Merrimack Valley (NH)**

The district, serving communities with nearly double the opioid overdose national rate and extremely high incarceration rates and percentages of students living in households with opioid-related problems, proposes enhancing the identification and response to students in need, including providing staff to help schools implement new tools and evidence-based interventions, as well as increasing skills training and expanding after school STEM and family engagement opportunities, access to services and family outreach and support. A cornerstone of its plan is data collection and evaluation to monitor progress and ensure program effectiveness. Reviewers found the multiple prongs well described, achievable and clearly tied to children born with neonatal abstinence syndrome.

### **20. Sodus Central School District (NY)**

The Sodus Central School District, on behalf of all eleven districts in county, proposes a collaboration to strengthen data systems and practices across the county, resulting in more seamless referral to mental health providers already co-located in its schools, more coordinated early intervention and prevention supports, broader access to basic needs, and more robust evaluation. The coalition embeds in its approach in continuous improvement cycles. A new Community Schools Essential toolkit will provide a common language across partners, and foster routines leading to improvement. The proposal specifies the roles and community partnerships that will support the district partnership. The reviewers endorsed the proposal's central premise that the "central problem is forming a cohesive response to mitigate the opiate epidemic when small schools are scattered, and county infrastructure is limited." They found the proposal innovative, clearly focused on its target population, and comprehensive in its reach and the specificity of its processes.

### **21. South Portland School Department (ME)**

The district proposes a plan to enhance capacity at the district level, and improve prevention and intervention efforts, through strong alignment of efforts and resources between the district and community organizations. The proposal includes a very strong analysis of the impact of the opioid crisis on its community, as well as evidence of many existing community collaborations to address that impact. The district will partner with SoPo Unite – All Ages All In, to integrate these collective efforts and build upon them to expand access and services, as well as increase district capacity and responsiveness. Reviewers applauded the strong collaboration, the potential for increased effectiveness, and the clarity of the goals and thought about outcomes.

### **22. Tempe Union High School District (AZ)**

Tempe Union High School District, a district consisting of six comprehensive high schools and responding to high incidence of recent drug overdose deaths among its population, as well as indices of substance abuse among students and community, proposes programs and activities to engage and educate parents, to strengthen students' social and drug resistance skills and strategies for personal self-management, as well as partnerships to connect students with mental health care and treatment providers. Reviewers felt that the district's multiprong approach leveraged existing ongoing work and introduced new pathways to work with students and families. It found strength in the coherence and alignment among the various partners, including the City of Tempe. The proposal contained a strong evaluation plan, tracking outcomes for each of its components.

### **23. Washington County Public Schools (MD)**

Washington County Public Schools (WCPS) proposes a plan to increase staff awareness and knowledge of mental health resources, trauma-support practices, and strategies to customize support for students affected by the opioid epidemic. It will launch a resilience training program to reduce burnout and compassion fatigue among support staff, with a focus on trauma-informed care. And it plans to host a Mental Health Expo with community partners to connect families with resources and services, fostering a culture of care and responsibility. Reviewers applauded the proposal attention to the ongoing mental health needs of students born with neonatal abstinence syndrome.

### **24. Washington Court House City (OH)**

Washington Court House City Schools proposes a comprehensive initiative to expand its Student Services Office by establishing the Blue Lion Family Support Center, with the aim of providing essential support to students and families impacted by the opioid crisis, homelessness, and involvement with the justice system. The Center will offer a variety of services, including a support helpline managed by a case manager, parenting classes, and behavioral support through a Board Certified Behavior Analyst (BCBA). Additionally, the Center will collaborate with external counseling services and community partners to ensure that students receive behavioral support. The district will use the Ohio Improvement Process to monitor and evaluate the effectiveness of these initiatives. Reviewers predicted high impact and increased coherence in district practices and collaborations, as well as improved support for students at risk.

## **B. Model Programs and Best Practices**

## **1. American Samoa Department of Education (AS)**

The American Samoa Department of Education, in collaboration with many partners (Back on Track (BOT), Helping Hands American Samoa, Nature Educational Laboratory of American Samoa (NELAS), Empowering Pacific Islander Communities (EPIC), and Department of Human and Social Service (DHSS) plus the Departments of Health Centers (DOH), of Youth and Women's Affairs (DWYA) and the Pacific Policy Research Center) proposes a model program, THRIVE3 Pathways to Recovery and Resilience. It will use the funding to scale its multi-tiered system of support (MTSS) – THRIVE3 program – to better identify students in need; and strengthen the processes and structures that refer these students into available services – especially special education services and programs that support student wellbeing for those students born with neonatal abstinence syndrome symptoms who require special education supports (e.g., students with cognitive-developmental differences); students who have experienced physical and/or verbal abuse, neglect, lack of food, abandonment; and/or students who have suffered traumatic family loss and educational interruptions and have been affected by the opioid epidemic in this context. This expanded program will seek to build the capacity of school-based staff to strengthen school-based behavioral and mental health supports, and position schools as community hubs for an array of social services designed to serve students harmed by the opioid epidemic. The reviewers saw a clear theory of action in the proposal, and a thoughtful logic about leveraging partner support and evaluating outcomes throughout the span of the grant.

## **2. Baltimore City Public Schools (MD)**

Baltimore City Public Schools proposes investing in and implementing a comprehensive, evidence-based intervention (EBI) program to support middle school students impacted by the opioid crisis, enhancing state-mandated health and drug education Tier 1 instruction by providing health teachers with an evidence-based curriculum proven to prevent opioid misuse and promote substance abuse prevention. The proposal, which leverages support in out of school time from the Mayor's Office and the City Department of Health, aims to improve teacher training, and will introduce innovative curricular modifications in a pilot program of 3-5 middle schools. The reviewers saw a strong focus on evidence and were impressed by the thinking about sustaining the program and integrating it into the larger system.

## **3. Berkeley County Schools (WV)**

This proposal introduces a model of early intervention behavioral and mental health support for Pre-K students affected by trauma and familial substance use. The project outlines three primary goals and objectives: creating trauma-informed Pre-K classrooms by equipping 60 educators with training; providing early intervention for 150 students identified as experiencing trauma or mental health concerns; and reducing and/or anticipating the need for special education

interventions by connecting 120 children with behavioral health services. These efforts aim to transform classrooms into trauma-sensitive spaces, enhance the emotional and academic readiness of students, and prevent the later need for potentially avoidable Special Education services by addressing trauma at its root and providing critical support to Berkeley County's youngest and most vulnerable children at the start of their school life. Evaluators remarked on how comprehensively the proposal integrated thinking and evidence about teacher knowledge, the early classroom setting as the place to begin addressing the needs of young children who have experienced trauma, and interventions that look ahead to later school settings and experiences.

#### **4. Brocton Central Schools (NY)**

Brocton Central Schools proposes a model program, in partnership with Southwestern Independent Living Center, to enhance mental health services for children throughout the school year and especially through a focused summer school component, while rebuilding family structures and the relationship between families and school through joint activities led by the partner and by the district office of special education. The program introduces family-centered course offerings but also includes innovative use of technology to strengthen the connections among school, family and the child throughout the school year. The reviewers found the inclusive focus on the whole family persuasive, and the program design strong, comprehensive, and detailed. They also remarked on how the proposal addressed problems unique to the isolated, rural aspects of the district and how that isolation affected the resources available to vulnerable children in a community devastated by the opioid epidemic.

#### **5. Bullitt County Public Schools (KY)**

The district proposes a comprehensive program that includes training of teachers and staff in best practices to support student victims of trauma, focusing on special education teachers and students. The program also introduces SEL supports, medical fee assistance to students, family engagement events, and ongoing universal screenings, while leveraging existing structures, community resources and other staff. Reviewers noted how the proposed program components were grounded in the data of opioid addiction among the students. They found the proposal strong, well-thought out, with a clear framework and measurable outcomes for the target population.

#### **6. Cadillac Area Public Schools (MI)**

The Cadillac Area Public Schools proposes the SUCCESS (Schools Using Coordinated Community Efforts to Strengthen Students) program to provide critical support to students directly or indirectly harmed by the opioid crisis. A Substance Abuse and Mental Health Services Agency (SAMHSA) endorsed model program, SUCCESS uses school-based substance

prevention and early intervention approaches such as trauma-informed pedagogy, mental health services, extended learning opportunities, restorative practices and coordinated community care. The proposal showed a history of strong community and agency partnerships and attention to student health data, especially for special education students. The reviewers found the assessment of needs and the identification of the targeted students exceptional, the program elements well-developed, and they liked the potential replicability of the design in other similarly situated districts.

## **7. Charleston County School District (SC)**

Charleston County School District proposes implementing a three-prong program that includes enhanced prevention education through implementing the “This is Not About Drugs” curriculum universally among its student population, while targeting students at risk through year round access to specialized support. It targets professional development to educators and clinical staff to address trauma in students impacted by the opioid epidemic. The district will train 10 staff members to facilitate the new curriculum, delivering targeted interventions to 95% of identified students, expanding the support capacity of its “Child Find” program by 5%-10%, and providing trauma-informed training to 80% of educators and clinical staff. Reviewers liked the clarity of the proposal, the existence of partnerships and indices of strong capacity in the details about management and staffing, and the thought to sustaining and expansion of the program.

## **8. Delsea Regional School District (NJ)**

The Delsea Regional School District (DRSD), serving grades 7-12, proposed an MTSS framework to address the opioid crisis affecting students arriving from several elementary grade rural districts. The plan has a pilot phase focusing on one or two schools, followed by an expansion to the rest of the district. The MTSS framework will integrate universal screening, tiered interventions, instructional coaching, and professional development to ensure early identification of challenges, improve teacher capacity, and enhance student outcomes. The district commits to embedding MTSS into district policies, leveraging Medicaid reimbursements and local funding, and fostering partnerships with families and community organizations. Reviewers praised the strong integration of trauma-informed care, mental health components, and food/medical access services across the district’s multiple proposals. They found clear thinking about phased implementation and a well-articulated timeline.

## **9. Elk Township School District (NJ)**

Elk Township School District, a small district serving Pre-K through 6th grade, with 40% of its students receiving special education or Section 504 accommodations, proposes a model program aimed at reducing special education referrals by enhancing the district’s capacity for early

identification and remediation of academic and behavioral challenges. The initiative includes hiring a full-time instructional coach and procuring high-quality screening, instruction, and assessment materials. The instructional coach will support teachers in implementing evidence-based interventions, while the materials will enable systematic identification of student needs and targeted remediation. This program will equip educators with the tools and expertise needed to address learning gaps before they escalate into special education referrals, fostering better outcomes for all students. The reviewers noted that the district submitted multiple proposals, all presenting clear, structured designs targeted at student well-being and systemic improvement. Each included specific roles, evidence-based strategies, and detailed timelines. The mental health framework, integrated data systems, and instructional coaching reflect strong design coherence across initiatives.

### **10. Fayette County Public Schools (KY)**

Fayette County Public Schools proposed the implementation of evidenced-based Tier II and III social-emotional, mental health, and educational interventions, as well as strategies to build staff capacity, and to construct wraparound family supports for students affected by the opioid epidemic. The district identified three target alternative schools and a fourth school, all with very high percentages of special needs students and clear evidence of challenges with student drug use, and identified a process to include extensive multi-sector partners to target the students most in-need. Identified students will receive mentoring, alternatives to suspension, and small group counseling. The proposal emphasized multiple approaches to engaging partners in support of the program and the students.

### **11. Greenfield Public Schools (MA)**

A coalition of Massachusetts rural districts, with Greenfield Public Schools, a small city district, applying as the lead district in partnership with Athol-Royalston Regional School District, Frontier Regional School District, Gill-Montague Regional School District, Mohawk Regional School District, and Pioneer Valley Regional School District (as School Partners) and Franklin Regional Council of Governments, the Opioid Task Force, Collaborative Resolution Group and Collaborative for Educational Services (as Community Partners), seeks to leverage a legacy of cross-regional partnerships to build multi-district capacity to support students affected by the intersection of substance use disorder (SUD), mental health challenges, and rural isolation. The proposal focuses on mental health supports and community wraparound services. The reviewers were impressed by the clear description of the proposed programs and the design that embedded sustainability and learning among the partners. The proposal was detailed in its thinking about school and district responsibilities and looked to sustainable funding past the life of the grant.

### **12. Middle Township Schools (NJ)**

Coastal Prep Recovery High School, operated by Middle Township Schools in partnership with Cape Assist, seeks to expand its model program supporting high school students in recovery from substance use disorders. As New Jersey's third recovery high school, now in its 5th year, Coastal Prep has successfully helped students maintain sobriety while achieving their academic goals. The application focuses on the critical need for sustainable transportation funding, allowing the district to continue serving current students and expand outreach across a larger region including other area school districts. It also aims to enhance the existing comprehensive support services by implementing an enhanced curriculum with personalized learning plans as part of its extensive mental health and counseling focus and providing enriching experiences including field trips and career development programs. The reviewers felt that while the proposal on the surface focused on operational challenges, it communicated an exceptionally well-structured plan reflecting a trauma-informed and recovery-focused approach that included holistic student and staff support.

### **13. MSAD 61 (ME)**

MSAD 61, a small rural district in Maine, proposes support for partnering with Responsive Classroom to provide comprehensive training to all PK-5 staff focusing on evidence-based, trauma sensitive practices. The proposal describes increased challenges in classrooms and in the wider community setting tied to children born with opioid addiction and to family struggles with addiction, and a lack of resources and teacher capacity to respond to those challenges. The proposal aims to enhance staff capacity to address social, emotional and behavioral needs related to emotional drama, equip teachers with tools to create safe learning environments, implement socioemotional learning strategies to enhance students' emotional regulation in class, and decrease classroom disruption to increase student engagement and attendance. For the reviewers, the Tier 1 approach across educators seemed a cost-effective, useful solution that could serve as a model for other similarly situated districts

### **14. SAU 46 – Merrimack Valley (NH)**

SAU 46, a district serving communities with nearly double the opioid overdose national rate and extremely high incarceration rates and percentages of students living in households with opioid related problems, proposes a model program drawing on evidence to include mental health supports, including the expansion of counseling, suicide prevention and crisis intervention strategies. A second prong focuses on Responsive Classroom training in SEL strategies. A third expands resources to support students impacted by trauma, and implements timely identification tools and earlier interventions. The program will include home visit programs and new partnerships with local organizations for family engagement and access to mental health and social services. The reviewers found the multiple interventions achievable, the goals and timelines clear, and the tie between them and children affected by the opioid crisis and born with

neonatal abstinence syndrome very specific. They also thought the effort sustainable, given how the proposal builds on previous efforts in the district.

### **15. Washington County Public Schools (MD)**

Washington County Public Schools, a district experiencing high rates of opioid overdose deaths and children born addicted, proposes a model program focused on early interventions. Its first prong targets delivering prenatal and postnatal family support for 25 families in year one, expanding to 75 families by 2028. The second enhances, by 2028, a program (STEP) to provide training, consultation, and follow-up technical assistance for educators in K-5 settings, aiming to increase the successful integration of students with behavioral challenges in general education classrooms by 25%. The third prong of the program targets early literacy training for early elementary staff, particularly those within STEP, with the goal of having 80% of participating educators demonstrate improved instructional strategies. Reviewers praised the strong design of the program, its focus on a particular subset of families and students, and its attention to measurement and sustainability.

### **16. Wolfe County Public Schools (KY)**

Wolfe County Public Schools, a small, severely underfunded rural district, proposes a program targeting students in families with opioid abuse, students in special education settings, foster students, and students being raised by grandparents due to the absence of parents. The program specifies three goals: in the first year of the grant, the district will establish wellness teams in every school to identify students and families linked to addiction and in need of support. In the second year, it will introduce a drug awareness curriculum and student support systems such as counseling and family engagement services. In year three it will introduce well-being and coping strategies, as well as enriching opportunities to help individual students and families. The reviewers praised the district's reliance on cross functional teams and its collaboration with a community partner to stretch its collective impact and resources, as well as the detail and specificity of the plan.

## **C. Innovation Grants**

### **1. Augusta Public Schools (ME)**

Augusta Public Schools proposes the development of an alternative high school program for students in grades 10-11, through stakeholder collaboration and in partnership with the Augusta Teen Center. The program will support students at risk of dropping out, particularly those facing

mental health challenges, absenteeism, socio-economic difficulties and the impact of the opioid epidemic in the wider community and in their families. The proposal combines project-based learning, academic remediation, and emotional and health support to address the students' unique needs. The reviewers found a strong link between the district's evidence of incidence of childhood trauma in its student population, and the need for a new, experimental setting. They saw the plan's emphasis on small class size, trauma-informed care, community partnerships and phased implementation as arguments in its favor.

## **2. Berkeley County Schools (WV)**

Berkeley County Schools proposes implementing Move This World (MTW), an innovative and evidence-based social-emotional learning (SEL) program. Specifically designed to support students impacted by trauma and the opioid epidemic, MTW equips students with the tools to manage emotions, develop coping strategies, and build resilience. The program integrates seamlessly with existing trauma-informed strategies led by district partner The Martinburg Initiative (TMI), creating a unified approach to fostering emotional well-being and academic success. Key features of MTW include targeted support for trauma-impacted students, flexible implementation in classrooms through group and individual advisory periods, counseling, and responsive teaching. The reviewers praised the tie between the district's evidence of trauma among its students and the components of the program.

## **3. Clark County School District (NV)**

The "Be Smart, Be Strong, Be Safe with Rocket Rules" project introduces innovative drug education in third grade in the Clark County School District, where basic drug education is delivered by police officers in older grades. The district will introduce the age appropriate Rocket Rules curriculum in 225 third grade classrooms and conduct 450 ROCKETLive! virtual interactive presentations in the participating third grade classrooms, as well as host at least 25 booths at community and school events per year and disseminating up to four customized online drug education videos to families during the span of the grant. Reviewers thought the program innovative in reaching younger students, potentially very high reach and replicable, and approved its focus on prevention and extensive outreach to families.

## **4. Delsea Regional School District (NJ)**

The Delsea Regional School District (DRSD), a regional 7–12 district serving students from surrounding elementary districts, proposes a robust, secure data-sharing framework to improve early identification and support for at-risk students. A Community Wellness Manager will coordinate cross-district services, oversee and help develop universal screening tools, and ensure a seamless transition of support for students moving from two sending districts to Delsea Regional School District. The project will also support professional development for staff,

focusing on trauma-informed practices, data driven intervention strategies and stakeholder engagement. The funding will support personnel, data system development and learning about impact. The reviewers noted with approval the connections among the multiple Delsea proposals and the attention to the regional, cross district effects of the opioid crisis and the potential responses.

#### **5. Elk Township School District (NJ)**

Elk Township School District, a small district with a large percentage of students in special education settings and significant contextual impact of opioid harm, proposes an initiative to bridge gaps between school and community. The project features two cornerstone roles: a Community Wellness Coordinator to connect families with food, medical, and mental health resources, and a District Data Manager to integrate and analyze data from academic and social-emotional assessments, with the goal of rapidly identifying students in need and ensuring timely access to resources. The program will link data-driven insights with community-focused outreach. Reviewers praised the coherence of the proposal, its focus on data, and the connections among the multiple Elk Township proposals.

#### **6. Greenfield Public Schools (MA)**

A coalition of Massachusetts rural districts, with Greenfield Public Schools, a small city district, applying as the lead district in partnership with Athol-Royalston Regional School District, Frontier Regional School District, Gill-Montague Regional School District, Mohawk Regional School District, and Pioneer Valley Regional School District (as School Partners) and Franklin Regional Council of Governments, the Opioid Task Force, Collaborative Resolution Group and Collaborative for Educational Services (as Community Partners), seeks to leverage a legacy of cross-regional partnerships to build multi-district capacity to support students affected by the intersection of substance use disorder (SUD), mental health challenges, and rural isolation. The innovative practices component of this plan focuses on three core goals: 1) Restorative Practices Implementation (outcomes: six districts will build the infrastructure to support fostering inclusive community and reducing exclusionary discipline); 2) Increasing Mental Health and Support Services (outcomes: six districts will increase access to mental health services and evidence-based prevention programs); and 3) Strengthening Community Partnerships (outcomes: six districts will maximize existing and new partnerships to improve current programs and services, implement new wraparound programs and services, and increase youth services providers in the building). The reviewers remarked on the comprehensive nature of the collaboration and its components, and the innovative thinking about stakeholder and student engagement.

#### **7. Morgan County Schools (WV)**

Morgan County Schools proposes an innovative project to address the challenges posed by the opioid crisis in its rural Appalachian community. Serving approximately 2,300 students across five schools, MCS faces rising rates of behavioral disruptions, emotional dysregulation, and academic underperformance linked to trauma and family and community instability. The RISE project focuses on two feeding pattern schools, one PK-2 and the other 3-5, where therapeutic practices are needed. The project integrates trauma-informed practices, restorative approaches, and social-emotional learning (SEL) into the fabric of both schools to create a seamless continuum of care as students transition from early childhood to intermediate education. The district will establish a mental health hub linked to the schools through a collaboration with the Morgan County Partnership and other stakeholders. Reviewers praised the coherence and comprehensiveness of the project, and the focus on the potential impact of student transitions on vulnerable students with unstable family lives.

#### **8. Quincy Public Schools (MA)**

Quincy Public Schools proposed a project to embed two full-time clinicians from community partners (Aspire Health Alliance and Bay State Community Services), in three district social-emotional and special education programs supporting students from grades 6 through 12 who have experienced trauma, loss, mental health challenges, and/or are engaging in or at risk of substance abuse as a result of adverse childhood experience, community trauma, and parental addiction. The clinicians will provide intensive, school-based and home-based interventions to the identified students, including individualized and group therapies, substance use prevention and intervention, and family counseling. They will also work closely with school counselors, health educators, school and student support staff and partners to create a comprehensive support network. Reviewers praised the proposal's clarity about the target population, and the needed resources. They also praised the clear and focused design and potential for discovering new methods of support and coordination.

#### **9. Red Clay Consolidated School District (DE)**

The district, a past innovator in bringing together partners and using data, proposes an expansion of that data across all grade levels and the implementation of wider support systems for students across the county through Project: The Opioid Effects Mental Health and Optimal Development Consortium. Through this project, the University of Pennsylvania's Project for Mental Health and Optimal Development (PMHOD), ConnectEd Workforce, and The Children's Hospital of Pennsylvania will work with the district and two district partners to utilize a community of practice (CoP) model to strengthen opioid education, assessment, and response methods for students, educators and families of Red Clay Consolidated School District and its partners. The consortium aims to expand district needs assessments to include indicators and related factors from opioids, review and improve district strategic plans and stakeholder outreach, expand the Consortium for Mental Health and Optimal Development to support cross-district collaborative

learning and mental health literacy, and increase the capacity for mental health and development projects. It will also develop an Opioid Response Toolkit for students, educators, and communities, and publish success stories from the collaborative to act as models for the development of similar programs across additional districts. The Mental Health Consortium, charged with the development of an Opioid Response Toolkit, will support district initiatives while equipping educators in all positions and levels with a comprehensive guide to evidence-based strategies. Reviewers praised the potential in the collaboration, and the possible use of tools and lessons learned in other districts.

#### **10. RSU 22 (ME)**

Regional School Unit 22 (RSU 22), a small sized district in terms of enrollment serving various communities across an enormous area in rural Maine, challenged by its families' rural isolation, the socioeconomic disparities among its communities, and the absence of resources to support disaffected students and families, proposes a grant-funded new role, a mobile Education Outreach Coordinator (EOC). The EOC will serve as link between home and school primarily in two schools serving students across a vast geographic area, increasing access to services and engagement for affected parents and students by fostering community partnerships, while providing specialized training on opioid impact to all special education staff and 75% of general education staff. The reviewers praised the thorough needs assessment and how the proposal tied the intervention to unique district challenges.

#### **11. Washington County Public Schools (MD)**

Washington County Public Schools (WCPS) proposes a therapeutic lab school to address the urgent developmental, behavioral, and academic needs of students impacted by the opioid crisis. This program will integrate educational, therapeutic, and medical services in a single facility. This would include providing targeted interventions for substance-exposed newborns (SENs), preschool-aged children, and elementary students who need a combined educational and medical approach to access their education. Among the project's key features is the hiring of a School Coordinator to lead program development and operations, implementing early intervention and family support services, and establishing a seamless transition system for students returning to general education classrooms. The school will provide developmental screenings, individualized therapy plans, and case management for at least 50 students while equipping families with trauma-informed strategies through training and support resources. Reviewers noted the potential integration between this proposal and the district's model program proposal, and the clear design, focus and potential for impact.

# Conclusion

These award applications represent the best efforts of many districts striving to serve students, families and communities facing grave challenges. They all offered data-driven evidence, compelling narratives, resourcefulness and a commitment to impact, making an impression on our reviewers.

We are grateful for the determination and collaborative spirit of the many districts and individuals who responded to our request for proposals. We hope that in helping bring these proposals to life we not only contribute to the wellbeing of these specific communities but also glean lessons and potential solutions from their efforts that will help many others.