

## Opportunity Funding for Mental Health Services

For more information and to submit applications:

Susan Haberstroh – susan.haberstroh@doe.k12.de.us

Tina Bates – <u>tina.bates@doe.k12.de.us</u>

Funding Period: Fiscal Year 2022

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

Application deadline: Friday, July 30, 2021

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

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

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

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

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

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

| DISTRICT/CHARTER NAME: Kuumba Academy Charter School |  |
|--|--|
| ADDRESS:<br>1200 N French St Wilmington DE 19801     |  |
| CONTACT NAME:<br>Sally Maldonado                     |  |
| CONTACT PHONE:<br>302-660-4750                       |  |
| CONTACT EMAIL:<br>smaldonado@kacsde.org              |  |
| ALLOCATION AMOUNT:<br>\$126,446                      |  |

### Questions:

| 1. | What mental health needs of your identified low-income and English learner students will you be addressing through these mental health services funds? (Please indicate N/A if these funds are solely being used for reading supports for the two subgroups – EL and low-income.)                                     |  |  |  |  |  |  |  |  |
|----|---|--|--|--|--|--|--|--|--|
|    | Kuumba Academy will use these funds to provide mental health support services for low income students. These services will be provided by our guidance counselor and behavior interventionist and will include: individual and group counseling; mindfulness and social emotional learning support in the classrooms. |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |
| 3  |   |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |
|    |   |  |  |  |  |  |  |  |  |

| School counse | lor and behavio | r interventionist | · · · · · · · · · · · · · · · · · · · |  |
|---------------|-----------------|-------------------|---------------------------------------|--|
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |
|               |                 |                   |                                       |  |

| 3. | Are you using these funds for reading supports for your identified low-income and English learner students in addition to mental health services or in lieu of mental health services? If so, what types of supports/services will be provided?  |  |  |  |  |
|----|--|--|--|--|--|
|    | These funds will also be used to provide reading assist intervention support in addition to mental health services. Full Time Reading assist tutors will work with identified low income students to address foundational skills gap in reading. |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |
|    |  |  |  |  |  |

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

| - | The effectiveness of these programs will be measured through the character goals on our work plan which include the following: - KACS will reduce suspensions by 20% -At least 75% of students will be proficient on Kuumba's Nguzo Saba {Kuumba, Umoja, Kujichagulia, Ujima, Ujamaa, Nia, Imani} as measured by report card competencies. |
|---|--|
| } | Reading growth will be measured through beginning and end of year assessment data.   |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | Is this money is being used to contract services?  |
|   |  |

### Assurances and signatures:

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

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

| Chief Scho   | ool Officer (printed name):   |  |
|--|---|--|
| Signature:   |   | Date:  |
| submit for<br>contained<br>knowledge<br>this form. | r the funds identified in this form. I have<br>in this form. The information contained<br>e and belief. I have reviewed and appro | I, including the indicated school, I am authorized to re read this form and reviewed the financial information of in this form is true and correct to the best of my rove the submission of the budgetary information for that I understand and agree to abide by all applicable |
| 2. Iu  | ınderstand that our district shall be aut   | e used to supplant otherwise available funding.<br>thorized to assess a local match to provide for the local<br>ed with this appropriation (districts only).   |
| Business n   | nanager (printed name):   |  |
| Signature:   |   | Date:  |
| By signing   | this form, I am approving the plan subr   | mitted by the district or charter.   |
| Secretary of                                       | of Education/Designee (printed name):   | :  |
| Signature:_  |   | Date:  |

Live signature on file at DOE.



Health Insurance/Other Non-taxed Benefits

OEC TOTAL:

SALARY AND OEC TOTAL:

### State of Delaware Department of Education State Funds Budget Form

| State Subgrant:     | Opportunity Funds- Mental Health |                  |   | Project Start Date:      | 9/                | 9/1/2021         |  |
|---------------------|----------------------------------|------------------|---|--------------------------|-------------------|------------------|--|
| Project Title:      | Opportunity Funds-               | Mental Health    | _   |                          |                   |                  |  |
| LEA/Agency:         | Kuumba Academy Charter Schol     |                  | _   | Project End Date:        |                   | 6/1/2022         |  |
|                     | Salar                            |                  | es and Account Code<br>Other Employee Cos |                          |                   |                  |  |
|                     | Jaiai                            | ies (5100) and ( | other Employee Cos                        |                          | 1                 | 1                |  |
| Employee Name       | Title                            | FTE Percentage   |   | State Funds<br>Requested | Matching<br>Funds | Total Funds      |  |
| PROFESSIONAL:       |                                  |                  |   | \$                       | \$                | \$               |  |
| Natalie Guichard    | Guidance Counselor               | 100%             |   | \$50,918.44              |                   | \$50,918.44      |  |
| Brandon Gray        | Behavior Interventionist         | 40%              |   | \$29,050.00              |                   | \$29,050.00      |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  | Professional Subtotal                     | \$79,968.44              | \$0.00            | \$79,968.44      |  |
| SUBSTITUTES:        |                                  |                  |   | \$                       | \$                | \$               |  |
| l                   |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  | C. b. via and C. bankal                   | ć0.00                    | £0.00             | \$0.00           |  |
| CURRORT STAFF.      |                                  |                  | Substitutes Subtotal                      | \$0.00<br>\$             | \$0.00<br>\$      | \$0.00<br>\$     |  |
| SUPPORT STAFF:      |                                  |                  |   | ş                        | ,                 |                  |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  | Support Staff Subtotal                    | \$0.00                   | \$0.00            | \$0.00<br>\$0.00 |  |
| STUDENTS:           |                                  |                  | Support Staff Subtotal                    | \$0.00                   | \$0.00            | \$0.00           |  |
| STODENTS:           |                                  |                  |   | ş                        | ,                 | \$0.00           |  |
|                     |                                  |                  |   |                          |                   | \$0.00           |  |
|                     |                                  |                  | Students Subtotal                         | \$0.00                   | \$0.00            | \$0.00           |  |
| 1                   |                                  |                  | otadents subtotal                         | φο.σσ                    | ψο.σσ             | φο.σσ            |  |
| SALARY TOTAL:       |                                  |                  |   | \$79,968.44              | \$0.00            | \$79,968.44      |  |
| OTHER PART OVER TO  | OCTC.                            |                  | ſ   |                          |                   |                  |  |
| OTHER EMPLOYEE CO   | 2515:                            | 6.300/           | Ч   | \$                       | \$                | \$               |  |
| FICA                |                                  | 6.20%            |   | \$4,958.04               | \$0.00            | \$4,958.04       |  |
| Medicare            |                                  | 1.45%            |   | \$1,159.54               | \$0.00            | \$1,159.54       |  |
| Pension             |                                  | 23.80%           |   | \$19,032.49              | \$0.00            | \$19,032.49      |  |
| Workman's Comp      |                                  | 1.55%            |   | \$1,239.51               | \$0.00            | \$1,239.51       |  |
| Unemployment Insura | ance                             | 0.11%            | _   | \$87.97                  | \$0.00            | \$87.97          |  |
| l                   |                                  | 33.11%           |   |                          |                   |                  |  |

\$26,477.55

\$106,445.99

\$0.00

\$0.00

\$26,477.55

\$106,445.99

(\$15,391 is the average HI cost for FY22)

|                    | Expense Types and Account Codes:<br>Travel (5400) |                |                          |                   |             |  |  |
|--------------------|---|----------------|--------------------------|-------------------|-------------|--|--|
| Destination        | Purpose   | # of Travelers | State Funds<br>Requested | Matching<br>Funds | Total Funds |  |  |
|                    |   |                | \$                       | \$                | \$          |  |  |
|                    |   |                |                          |                   | \$0.00      |  |  |
|                    |   |                | 1                        |                   | \$0.00      |  |  |
|                    |   |                |                          |                   | \$0.00      |  |  |
|                    |   |                |                          |                   | \$0.00      |  |  |
| TOTAL TRAVEL COSTS |   |                | \$0.00                   | \$0.00            | \$0.00      |  |  |

| Expense Types and Account Codes: Contractual Services (5500) |  |                          |                   |             |  |  |  |
|--|--|--------------------------|-------------------|-------------|--|--|--|
| Vendor Name  | Service Provided                               | State Funds<br>Requested | Matching<br>Funds | Total Funds |  |  |  |
|  |  | \$                       | \$                | \$          |  |  |  |
| REading Assist   | Reading Intervention Tutors- full time support | \$20,000.00              |                   | \$20,000.00 |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          | ļ.                | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
|  |  |                          |                   | \$0.00      |  |  |  |
| TOTAL CONTRACTUA   | L SERVICES COSTS                               | \$20,000.00              | \$0.00            | \$20,000.00 |  |  |  |

| Expense Types and Account Codes: Supplies and Materials (5600) |          |            |                          |                   |             |  |
|--|----------|------------|--------------------------|-------------------|-------------|--|
| Item Description   | Quantity | Unit Price | State Funds<br>Requested | Matching<br>Funds | Total Funds |  |
|  |          |            | \$                       | \$                | \$          |  |
|  |          | •          |                          | 1                 | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          | 1                 | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          | 1                 | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          | i          |                          | 1                 | \$0.00      |  |
|  |          |            |                          | 1                 | \$0.00      |  |
|  |          |            |                          | 1                 | \$0.00      |  |
|  |          |            |                          |                   | \$0.00      |  |
|  |          |            |                          | 1                 | \$0.00      |  |
| TOTAL SUPPLIES AND MATERIALS COSTS                             |          |            | \$0.00                   | \$0.00            | \$0.00      |  |

| Expense Types and Account Codes:<br>Capital Outlay (5700) |          |            |                          |                   |  |  |  |
|---|----------|------------|--------------------------|-------------------|--|--|--|
| Item Description  | Quantity | Unit Price | State Funds<br>Requested | Matching<br>Funds | Total Funds  |  |  |
| Replacement Equipment  New Equipment                      |          |            | \$                       | \$                | \$<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 |  |  |
| TOTAL SUPPLIES AND MATERIALS COSTS                        |          |            | \$0.00                   | \$0.00            | \$0.00<br><b>\$0.00</b>                              |  |  |

| GRAND TOTAL  | State Funds  | Matching | Total Funds  |
|--------------|--------------|----------|--------------|
| GIANTO TOTAL | Requested    | Funds    | iotai ruiius |
|              | \$126,445.99 | \$0.00   | \$126,445.99 |

7/1/20



### DEPARTMENT OF EDUCATION STATE OF DELAWARE

# **BUDGET SUMMARY OF STATE FUNDS**

LEA/Agency Name:

Kuumba Academy Charter Schol

State Subgrant Title:

Opportunity Funds- Mental Health

Project Title: Opportunity Funds- Mental Health

|   | Total        | Budget                  | \$126,445.99 |
|---|--------------|-------------------------|--------------|
|   | 5700         | Capital Outlay          | 80.00        |
| ; | 0095         | Supplies &<br>Materials | 80.00        |
|   | 2200         | Contracted<br>Services  | \$20,000.00  |
|   | 2400         | Travel                  | 80.00        |
|   | 5120         | OEC's                   | \$26,477.55  |
|   | 2100         | Salaries                | \$79,968.44  |
|   | Account Code | Account Code<br>Name    | Total Budget |

Completed By:

Sally Maldonado, Head of School

Sally Maldonado, Head of School

Chief Financial Officer or Business Manager:

8-17-21

Date:

8-17-21

Date: