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TO: Members of the 152nd General Assembly
FROM: Dr. Mark A. Holodick
THROUGH: HCR 54 Working Group
RE: HCR 54 Recommendation Report

House Concurrent Resolution 54 charged the Department of Education's Office of Higher Education, state institutions of higher learning, and vo-tech schools to work together to create recommendations focusing on the promotion of behavioral health career pathways and share that information with the General Assembly. The Department of Education (Department) initiated the creation of a working group inclusive of the parties identified (see a list of members at the end of the report) to work on this report, which reflects the contributions of the HCR 54 working group.

From the beginning, the working group understood the critical short-term need to increase behavioral health specialists across K-12, as well as the long-term need to create programs that build a robust pool to fulfill our student to staff ratios as set by HB 100 and HB 300, and better meet the needs of K-12 students statewide. The group first identified the issues and barriers impacting the expansion of the pipeline, as well as staff retention. The working group then consulted with higher education institutions and national partners to understand different perspectives of the issues and potential recommendations for solutions. Based on these conversations, the group identified several options that have viability in Delaware's context, contained in this report.

The working group found we need to reach middle and high school students as soon as possible to get them interested in working in the field of behavioral health. The working group also found we need local colleges and universities to expand or create master's level programs that are well-funded and encourage graduates to stay in Delaware, part of which can be done through robust internships and increased scholarships. To become a behavioral health specialist, you must attain a master's degree. Without creating a pipeline, Delaware will fall behind in providing the best behavioral health services to our K-12 students.

Overall, the group's discussions and research confirmed that Delaware faces the following barriers to quickly ramping up a robust pool of candidates to hire as qualified behavioral health specialists, explained later in the report

1. limited master's degree programs in school counseling, school psychology, and social work
2. lack of available seats in master's degree program
3. competitive pay for interns and new hires
4. timeline to earn qualifying credential
5. meeting immediate needs in K-12 schools with not enough master's level graduates in these fields

Based on our findings, the HCR 54 working group recommends the following considerations to create a more robust pipeline:

Short Term: These strategies could increase regional competitiveness and drive retention immediately upon implementation (2-5 years)

1. Fund program expansion of higher education programs and reserve seats for Delaware residents to encourage more interest and participation
2. Strengthen supports for interns and field supervisors for Behavioral Health Specialists
3. Create a Pupil Personnel Worker position
4. Expand the number of Family Crisis Therapists
5. Create a pay scale for these specialist positions
6. Evaluate existing duties as assigned to ensure behavioral health specialists can maximize their time to serve students in K-12 settings

Long Term: These strategies will strengthen the size and diversity of the pipeline over the next 5-8 years

1. Integrate work-based learning options in the current high school public and Community Health CTE Pathway that relates to school counseling, school social work and school psychology
2. Increase internship opportunities in education settings for undergraduate and graduate students

The HCR 54 working group appreciates the opportunity to develop the report and share these recommendations with the General Assembly.

Delaware Department of Education HCR 54 Working Group Recommendations

Short Term Strategies: The strategies in this section will have the most immediate impact on recruitment and retention. It is important to note that while the impact is immediate, some of the strategies may take significant time and resources to implement.

Strategy 1: Fund program expansion of higher education programs and reserve seats for Delaware residents

School counseling, school psychology and social work each only have one master's level program in the state. Based on our research, the working group identified that school counseling and social work are producing adequate candidates to meet staffing needs in the state. The school counseling program at Wilmington University offers the greatest number of seats and they are the closest to meeting the school counselor ratios across the state. Delaware State University (DSU) is expanding their graduate program offerings to add a focus on school counseling and school psychology. This should increase the overall hiring pool once the program is fully implemented and students begin to graduate in three years. The working group recommends a focus on separating the unit count for behavior health specialists; this will address a significant hiring challenge for school counselors and school social workers to meet the ratios included in HB 100 and HB 300. Currently, the unit count requires schools to choose between a teaching position or a behavioral health specialist. This is further addressed later in the report.

There is a shortage of school psychologists in Delaware. The National Association of School Psychologists (NASP) recommends a ratio of one school psychologist per 500 students in order to provide comprehensive school psychological services. Delaware’s ratio was 1 school psychologist for every 902 students in 2019-2020 (NASP).

In order to become a certified school psychologist, an Education Specialist degree is required. The path at University of Delaware (UD) to earn the Education Specialist degree includes earning a Master’s Degree in School Psychology. A master’s degree in school psychology alone will not qualify a person to become a school psychologist.

The school psychology program at University of Delaware currently only has thirty-six seats and UD is the only institution of higher education that produces school psychologists in our state. By providing state funding to expand the UD program and support the development of the new program at DSU, while promoting retention of graduates to stay in Delaware, our state will see an impact in the overall pool of candidates qualified to become a school psychologist.

The NASP guidelines for program accreditation require “A ratio of no greater than 1:12 school psychology faculty full time employee (FTE) to school psychology candidate FTE in the overall program...”. The UD program currently has 3 full-time faculty, while neighboring institutions have more and thus can graduate more students. Please refer to the last column in Table 1 below (source: www.nasponline.org).

Table 1: Comparisons for Regional Education Specialist Degree Programs for School Psychology (Ed.S)

Program	Ed.S Student Enrollment Data/Faculty
Temple University, PA	51 Ed.S & 22 Ph.D/6 FTE
Lehigh University, PA	17 Ed.S & 35 Ph.D / 6 FTE
Rowan University, NJ	48 Ed.S/4 FTE
University of Delaware	36 Ed.S/3 FTE

Additionally, Delaware faces challenges with attracting and retaining school psychology students from within our state. This stems from both low numbers of Delaware residents filling the limited number of seats in the program and, until recently, lack of competitive financial aid packages (HB 480 provides a state funded scholarship for candidates in the program). Table 2 displays the number of in-state and out-of-state students in the UD School Psychology program over the past few years.

Table 2: Delaware Resident Enrollment 2019-2022 in UD's School Psychology Program

Cohort Year	In-State	Out-of-State
2019	3 (2 now work in DE)	4
2020	5	7
2021	3	9
2022	3	10

Table 3: Financial Aid Comparisons for Regional School Psychology Programs

Program	Tuition Per Credit (in-state/out-of-state)	Financial Aid
Towson University, MD	\$642/\$1148	1. Available 2. Interns receive stipend
Bowie State, MD	\$439/\$723	1. Special Grant Funded Interdisciplinary Training Program covers in-state tuition and fees. Out-of-state students must pay difference. 2. Interns receive stipend
Temple University, PA	\$1004/\$1381	1. Available 2. Interns receive stipend
Rowan University, NJ	\$761/ \$761	1. Interns receive stipend 2. Robert and Mildred Bole Memorial Scholarship
University of Delaware	\$773/\$773	1. Purnell Award (Sussex Co/tuition) 2. Grad Scholar Award (underserved pop/stipend and tuition) 3. HB480 Scholarship (1 st offered in 22-23 SY) 4. Interns receive stipend

As displayed in Tables 2 and 3, UD's program is not filling the majority of its seats with Delaware residents. This has a significant impact on retention and hiring for Delaware schools. While a new scholarship was created for UD students in the 22-23 school year, UD has historically lost students to other institutions because of the lower size of the financial aid packages and, anecdotally, the timing of when packages were provided to students to inform their decisions. As a matter of practice, students entering into a master's and/or Ph.D program will seek out guaranteed funding options to ensure a manageable cost.

Based on these challenges, the HCR 54 working group recommends state funding for the expansion of the UD Education Specialist Degree for School Psychology program. This would require additional professors and place a requirement to reserve additional seats for Delaware residents. Of note, UD

recently applied for a federal training grant to develop a path for part-time students and individuals who have related graduate degrees who want to specialize in school psychology. If funded, this would help individuals fast track through the Ed.S program. Additionally, DSU will have a Master's of Clinical Psychology concentrating in neuropsychology and school psychology starting in fall of 2023. This will help increase the number of seats available to prepare candidates for school counseling and school psychology positions. These resources may significantly impact the number of candidates that graduate ready to enter these fields. It will be important to support both institutions through state funding to target Delaware residents for these expanded programs. The working group recommends monitoring the impact of the scholarship and loan repayment supports provided through HB480 to determine if the financial needs of potential program candidates are being sufficiently met.

The working group recommends the following practices for the institutes of higher education to further support their students:

1. Guarantee financial aid to a student before matriculation into the graduate level programs.
2. Create and provide autism certification and Board-Certified Behavior Analyst certification to attract students. These are highly attractive certifications in the hiring process and graduate students seek programs that offer this type of specialization. (Note: several regional programs offer these certifications and practica already).
3. Acquire technology resources necessary for program requirements when students are unable to purchase their own
4. As part of their internship, graduate students must administer assessments and score them and for students. Institutions could provide financial support for students who are unable to finance these costs on their own.
5. Graduate students must use social emotional curriculum to support their students during their internship and practica. Providing copies of the curricular materials for students can reduce the out of pocket costs they incur.

Strategy 2: Strengthen supports for interns and field supervisors for Behavioral Health Specialists

Eligibility for licensure and certification as a school psychologist in Delaware requires education specialist students to complete a 1200 clock hour internship in K-12 schools. There are similar requirements for school counselors and school social workers. This necessitates interns to work in a K-12 school under the direction of a field supervisor at their assigned school. Currently, the stipends for interns vary widely across the state creating inconsistency in placements. Field supervisors are not always paid for the additional responsibilities required with supervision. Lastly, access to graduate students increases the capacity of field supervisors to serve students, which can also address the immediate needs of our schools with limited staff.

The working group recommends the following considerations:

1. Provide compensation for field supervisors
2. Increase and stabilize stipends for interns

Providing the structure to ensure students can complete the internship and receive the necessary supports from their K-12 field supervisor is essential to increasing the hiring pool. By providing compensation for field supervisors, there is an incentive to provide the meaningful coaching and mentoring necessary to develop highly successful behavioral health specialists. Additionally, by recognizing the wage requirements for graduate level students is vastly different than undergraduate student teachers, the

number of candidates able to complete their internship will increase and lead to a stronger hiring pool. The behavioral health specialist positions are highly skilled and require a minimum of six years from high school graduation to complete the qualifying credential to be hired. This is a long pipeline window and individuals must be deeply engaged and supported throughout that six years to increase likelihood of hiring.

Currently, field supervisors for student teachers receive a stipend of \$250 for a 12-week period. Given the additional time required to complete the clock hours, the working group recommends a stipend of \$312.50 for 15 the weeks for field supervisors of school psychology students.

NASP recommends paying interns a living wage stipend equal to 75% of their starting salary for the position. This would address the diverse economic needs of individuals completing a graduate level program. An anecdotal survey of the field in Delaware shows an average of \$22,000 in the responding districts (Brandywine, Caesar Rodney, Capital and Cape Henlopen). By increasing the stipend rate, Delaware shows a recognition of the level of education and prior experience these individuals bring to the school setting. The working group recommends building a tiered stipend that is based on level of prior working experience in a school setting. For example, if a teacher is in an Education Specialist degree program, they should not need to take a pay cut to complete their internship hours. Providing a higher stipend for working professionals, enables candidates to successfully complete their clock hours and transition into a Delaware school. The working group recommends a scale of \$25,000-45,000.

Strategy 3: Create a Pupil Personnel Worker position and expand the number of Family Crisis Therapists

While many of the strategies presented take time to implement, the working group recognizes that there is an immediate need to better serve students currently enrolled in K-12 schools now. Mental health needs increased significantly with COVID and resources statewide are stretched thin. The working group identified two ways to provide triage and referral services for current students until additional behavioral health specialists can be hired more readily in the future. The working group cautions that while this strategy is useful, identifying qualified individuals will be challenging given the current labor pool. The working group should consider recruiting from out-of-state and expanding partnership with DSCYF to help in filling these roles.

The working group recommends the following:

1. Increase the number of [Family Crisis Therapists](#) in K-12 schools (Note: The position is being renamed to Family and Student Interventionists, FSI)
2. Replicate Maryland's model by creating a new position, [Pupil Personnel Worker](#)

Personnel in these positions would work with students, educators, and families to provide direct support mental health support, and serve as a vehicle to connect students and families to other state and community-based services. They would take some of the work that school counselors and school social workers are now doing and allow each position to function as part of a larger team providing more services.

The newly-named FSI positions could be funded through an increase in funding to DSCYF. There are presently 51 Family Crisis Therapists, 4 Supervisors, and a program manager in the state. The target would be to ensure a minimum of one FSI per K-12 school, without disrupting current distributions across the state. In addition to increasing the FSI pool, funding would need to support increased supervisors and program support staff to ensure effectiveness.

Current Job Requirements for Family Crisis Therapists in Delaware

Applicants must have education, training and/or experience demonstrating competence in each of the identified areas. The working group does not think the requirements need to change. Of note, this position does not require a master's degree and individuals will be eligible to hire more quickly than a behavioral specialist position.

1. Possession of a Bachelor's degree or higher in Behavioral or Social Science or related field
2. Three years' experience in the following areas: case management, crisis intervention, and making recommendations as part of a client's service plan, interpreting laws, rules, regulations, standards, policies and procedures.
3. Six months experience in health or human services work such as applying theories, principles, laws and practices of health or human services programs and services that assist with and improve life for individuals, families, or communities such as financial support, employment, unemployment, housing, health care, disease prevention, substance abuse, child protective services, physical/mental health treatment and prevention or rehabilitation
4. Six months experience in narrative report writing
5. Possession of a valid Driver's License (not suspended, revoked or canceled, or disqualified from driving)

Salary Estimate: \$45,202.00/Min - \$56,503.00/Mid

In Maryland, the Pupil Personnel Worker (PPW) is funded through local funds. The working group recommends a combination of federal, state and local funds be used to increase equitable access across the state. The position could be allocated in one of two ways:

1. One per school across the state, or
2. Create a distribution formula based on identified needs within the schools. As diagnostic needs are ascertained, the positions will be allocated according to the formula with a set minimum number of students per PPW. The formula model can serve to increase coherence within an LEA and community. It can also address transience among students and streamline services among impacted families and communities. Focusing on this streamlining of services will enhance, rather than detract, from the other related service providers in the LEA.

Job Requirements for Pupil Personnel Worker in Maryland (the working group would localize for Delaware):

A. A master's degree in pupil personnel or a related field, such as,

1. Counseling or guidance services, or both
2. Early childhood, elementary, or secondary education
3. Human growth and development
4. Sociology, social work, or psychology
5. Special education
6. Administration and supervision

B. 21 semester hours of graduate credit or Maryland-approved CPDs selected from at least seven of the following eight areas:

1. School law (required)
2. Counseling methods
3. Early childhood or adolescent psychology, or both
4. Multicultural issues

5. Family systems/dynamics
6. Delivery of pupil personnel services and programs
7. Abnormal psychology or juvenile delinquency, or both
8. Educational assessment interpretation

C. 3 years of satisfactory teaching experience, or, at the recommendation of a Maryland local superintendent of schools, related experience may be substituted for teaching experience.

D. 3 semester hours of credit or Maryland-approved CPDs in inclusion of special needs student populations.

**Salary Estimate:
\$46,000 to \$85,000 - to be determined**

Strategy 4: Remove the pay barriers and increase opportunities to hire through unit count

A key strategy to strengthening regional competitiveness and retention rates for the behavioral health positions is through salary and availability of the positions. Currently, the behavioral health positions are assigned to the teacher pay scale. Each position requires a minimum of a master's degree and significantly higher clock hours than a starting classroom teacher. Assigning the positions to a teacher pay scale creates barriers for LEAs that need a higher salary to compete with regional districts. Another barrier is within the unit count structure. While the ratios have been defined to align with national best practice, these positions are part of the unit count with teachers. This forces schools to decide between hiring specialists aligned to the ratios and hiring more classroom teachers. This does not create equitable access for hiring statewide.

The working group recommends the following considerations

1. Create an interim pay scale for the specialist positions to remove barriers related to salary
2. Create a separate unit count for the behavioral health specialists aligned to the required ratios to ensure LEAs can hire as staff are available

As stated earlier, the pool of qualified individuals graduating from our in-state universities is small and many are from out-of-state and/or choose to complete their internships out-of-state because of more attractive stipends and resources. In addition to making the higher education programs more attractive for in and out of state students, Delaware needs to have a competitive starting salary. By creating a separate pay scale, specifically for specialist positions, Delaware LEAs will be able to offer a salary that recognizes the additional credentials and training required for these positions. This will ensure Delaware stands out as candidates are considering the program they want to enroll in and that they are more likely to remain in Delaware.

Creating required ratios is a huge step towards eliminating the barriers for students to have access to a highly qualified behavioral health specialist. Currently, these positions are on the same unit count scale as teachers. This requires schools to choose between hiring a classroom teacher or a behavioral health specialist. This is a difficult choice to make. The need for specialists is great and so is the need for classroom teachers. LEAs will continue to struggle to meet the ratios if they do not have a separate unit count aligned to the ratios for these positions. As the open positions increase – combined with the higher salary and loan repayment programs to reduce educational debt – Delaware will become extremely competitive across the region.

Strategy 5: Evaluate existing duties as assigned to ensure behavioral health specialists can maximize their time to serve students

While many of the strategies offered focus on hiring qualified staff, it is important to consider ways to increase the capacity of existing staff in the interim. This can be done by examining their current responsibilities within the school setting and identifying other individuals who might be able to complete those tasks. Ultimately, this increases capacity to serve students more effectively and utilize their unique skillsets.

The working group recommends the following considerations:

1. Train educational diagnosticians to support the achievement testing process
2. Assign non-specialized duties (e.g. dismissal, lunch duty, standardized test administration) to other school building staff

By training educational diagnosticians to administer the achievement tests and the behavior rating scales, it would increase the capacity of the school psychologists to complete the data analysis and focus on the counseling and consultation services students require.

Behavioral health specialists are often assigned to cover duties that support the overall building. This can reduce their capacity to support students throughout the day. By assigning other staff to cover tasks such as lunch duty and test administration, behavioral health specialists can be more readily available to meet with students throughout the day. This would significantly increase their capacity overall.

Current behavioral health specialists are stretched beyond capacity until the schools are able to hire in alignment with the student to staff ratios. Adding extra duties to their role serves to further reduce their capacity. Re-examining their additional duties presents an opportunity to further increase their capacity and add layers of support in the schools.

Long Term Strategies: These strategies will create deep, meaningful connections for current K-12 students to the fields of school psychology, school social work and school counseling, strengthening both the pathway and the pipeline to higher education. This will support the recruitment and ultimately hiring and retention of candidates over time. As these strategies begin in high school, it will take a minimum of six years to demonstrate full impact.

Strategy 1: Integrate mental health coursework into Public and Community Health career pathway

Currently, there is a public and community health career program of study offered through CTE in Delaware high schools. Changing the program of study to focus specifically on mental health would require the following: 1) adjusting the certification requirements for teachers 2) ensuring there are adequate students to fill the program without eliminating other necessary programs and 3) updating articulation agreements with the colleges to already highly competitive programs. To do this successfully, resources would need to be invested to train a qualified pool of educators (without reducing the limited pool of practitioners), expansion of the higher education programs to ensure students have an aligned pathway to enter and an impact study to ensure the ability to add a new program while sustaining existing programs. Lastly, it can take 2-3 years to create a new program of study.

Instead, the working group recommends the following considerations

1. Create articulation agreements with colleges to increase dual enrollment options in the field
2. Create professional learning for current Public and Community Health (PCH) pathway teachers

Students in the Public and Community Health pathway have demonstrated an interest in careers that support community health needs. By partnering with the colleges, CTE can strengthen the focus in this existing program of study to be tailored to community mental health needs specifically. Students would be able to earn 3-6 college credits and be incentivized to enroll in pathways in college that lead to behavioral health specialist positions. It will be important to collaborate with the colleges to both increase the dual enrollment courses for high school students and, as mentioned earlier, increase the number of slots available in these post-secondary programs. Without both solutions in place, we will further incentivize local candidates to choose programs out-of-state.

The creation of specific professional learning for PCH teachers will help them to better understand the qualifications to enter into behavioral health positions. This targeted approach will show them ways to introduce the careers to students in the PCH pathway. This combined with NASP's recommendation to make the behavior health positions more visible to students will be a great way to help students see these roles as a viable path.

Strategy 2: Increase job shadow opportunities in education settings for undergraduate students

NASP recommends creating deep and meaningful engagement, starting in high school all the way through hiring, to ensure candidates see and understand the path to enter the behavioral health positions. While these highly skilled positions have limited options for internships prior to the master's degree level, students could participate in job shadowing and research opportunities. This would allow students to understand the key issues behavioral health specialists focus on and strengthen their desire to pursue that path.

The working group recommends the following considerations

1. Provide funding to develop a job shadow opportunity aligned to the behavior health pathways
2. Incentivize higher education institutions to encourage undergraduate students to participate in research opportunities around school-based mental health needs

By allowing undergraduate students in behavioral health pathways to participate in job shadow opportunities, students will feel a connection to the field and their communities. Job shadowing can be structured in a number of ways including one-day observations, several short observations of specific activities over a period of time, or visiting a school for a set period of time to meet with different behavioral health specialists. It will be important as this type of program is structured that it does not create undue burden for school staff and that HIPAA and FERPA laws are observed at all times.

As students gain a deeper understanding of the mental health issues facing Delaware students, they will strengthen their interest to support students in addressing those issues. By participating in research projects led by higher education faculty and/or national organizations, students can build their knowledge and expertise in the field and strengthen their desire to pursue one of the career paths. Participating in research programs can be highly competitive and students do not always have equitable access to the supports to apply to such opportunities. It will be important that our higher education have the programs available to educate our students and a direct focus to recruit large and diverse pools of candidates. They should also support students to increase their ability to compete with their peers in applying for these programs.

Final thoughts: Through a multi-prong approach targeting the higher education programs, support for interns, salary levels and unit counts, and recruitment of candidates, Delaware can significantly increase our competitiveness as a state. Each of these elements are inter-dependent on each other. Delaware must focus on both increasing salary and increasing the number of candidates in the hiring pool.

Additionally, we must both provide scholarships and remove barriers to completing the internships. The working group recommends a holistic approach that addresses each of the recommendations; however, prioritization could occur by targeting resources to salary, unit count and examination of current specialists' job duties. These initial steps would create a competitive environment and increase retention of existing staff.

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