



VCHIP CHAMP VDH COVID-19

March 15, 2021 | 12:15-12:45pm Call Questions and Answers*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM Breena Holmes, MD, FAAP, Physician Advisor, Maternal & Child Health, Vermont Department of Health (VDH), VCHIP Senior Faculty

Required Recovery Planning, Heather Bouchey, PhD, Deputy Secretary, Vermont Agency of Education

Heather Bouchey, PhD, VT AOE: I want to provide a conceptualization of how we at the agency are focused on recovery. Here's what we are requiring from our pre-K through 12 system as we move out of the pandemic into a more stable situation where folks are vaccinated and we can return to normal. We need to ensure three areas of student outcomes are well-attended to. None of them are more important than the others. They are overlapping and interconnected in terms of how each district would address need in these areas. One of the primary areas is social-emotional learning, mental health, and well-being. We need to make sure students are doing okay and, if not, figure out how to help them in those areas. Another element is engagement and truancy. Some students disengaged or are truant. We are trying to find and re-engage with them. A third area is academic achievement and success through the lens of potential learning loss.

We have been seeing an increase in depression and anxiety among our students. When we think about student engagement, we're conceptualizing this from lack of motivation, reduced attention to homework, increased absenteeism, and to full-on truancy and ghosting. Ghosting is complete fall-off of communication with both the student and the parents. This is a tough time all around for families. We are seeing some of these deleterious impacts across different learning dispositions. The bulk of our students are in hybrid situations, where they're doing part-time remote and part-time in-person. We are seeing more of these issues in students who are full-time remote learning.

For academic achievement and success, we are looking at examining student performance and their growth or decline in both math and English language arts. We also want to break down needs by historically marginalized groups, such as students who qualify for special education, are in different racial or ethnic groups, are homeless, or marginalized in other ways.

Each district needs to create a Recovery Team (due March 15) with a single point of contact for state agencies. There is still room for many folks in today's audience to participate in that work at the local level. We want them to assist with that local lift and address capacity issues in terms of meeting student and family needs during the recovery. We view the recovery effort as a three to five year process. Districts will perform a needs assessment in each of the three areas by April 15 along with an implementation plan for meeting those needs due June 1.

There is a large amount of federal funding to Vermont as a result of the various COVID-19 legislation passed into law. One of the strategies we want districts to do is to incorporate into their core curriculum components of social-emotional learning, which we believe will help all students do better. We will have a virtual platform we offer to all districts. If pediatricians want access to that, we can work on that. It will have a variety of different materials framed around curriculum for training students on social-emotional learning, but some vendors are offering modules for parents. More to come on that. We are working on a data literacy program for LEAs. We want assessments to be based on data as much as possible. We provide ongoing technical assistance and support at the local level.

^{*}Note: This is a paraphrased synopsis of the call and is not a word-for-word transcription.





Breena Holmes, MD, VCHIP, VDH: It's great for us to see the structure of what's ahead. The biggest question on the table is how to get pediatricians engaged in the process. As a spokesperson for my field, everyone is engaged and interested in recovery and partnering with our education partners.

Questions/Discussion

Q: Interested in what the teacher testing results are for Southwestern VT. I haven't been able to find it on the dashboard.

A: Breena Holmes, MD, VCHIP, VDH: I have asked for district testing results. I can't find them either.

Q: Do you know if the COVID funds are available to use for increase counseling/nursing hours at the schools? A: Heather Bouchey, PhD, VT AOE: There are 3 buckets of COVID-19 funds. What we call ESSER (ESSER: Elementary & Secondary School Emergency Relief Fund), funds used for education support are COVID-19 funds to support reopening of schools. Our schools have reopened in some fashion. Some of the national conversations are a little out of step with where we are in terms of our education systems. We have already seen some strong use of ESSER funds to supplement nursing. Yes, 90% of these three buckets of federal funds go directly to the school districts. Most of the dollars are seen for direct personnel supplementation. With this new recovery framework put into place, we anticipate direct local use of funds to focus on all three of these buckets but certainly mental health and wellbeing, in addition to continuing to supplement nursing and more traditional work. We will be thinking about how to introduce more remote telehealth work around mental health given our rural nature. Some places are hard to get in-person services. We will be focusing on partnering with mental health. The short answer is, yes. Regarding the first part of the question, yes, we are very committed to helping get the word out and assist pediatricians who are interested in doing the work to help them coordinate with districts closest to them. It will be a combination of us supporting and urging districts to reach out to local pediatricians. Also providing supports with partnerships with Dr. Holmes to help pediatricians reach out to their districts to ask how they can be a part of the recovery effort, what can I do?

A: Wendy Davis, MD, VCHIP: Love the idea of virtual platform. I wonder if we could incorporate some health info from provider perspective on that? E.g., reminders about well-visits and catch-up immunizations, resources to address mental health issues, just as examples.

A: Heather Bouchey, PhD, VT AOE: I think it's a really great idea. I think the three of us could talk offline to see what that looks like. I think most of the vendors that were well into the process that we have state procurement laws to follow but I do think most of the vendors we're looking at do have some flexibility with what they will actually put on this platform.

Q: Thanks for this update and all the hard work at AOE! Wondering if AOE might be hiring additional staff to help the recovery teams as school staff in larger schools were already struggling to maintain optimal supports/timely evaluations even before the pandemic? Or will AOE work specifically with community agencies to do some of that specific work instead of the school having to do it all?

A: Breena Holmes, MD, VCHIP, VDH: A lot of this will be decided at the district level, 90% of the funds will be allocated by local decisions.

A: Heather Bouchey, PhD, VT AOE: We do have a shortage of staff currently in this sphere. It's tough, even before the pandemic, for designated agencies who provide mental health services to hire qualified staff and keep them. It will be an all models, all hands-on-deck approach in areas where it's really impossible to hire someone. This is a multi-year prospect, so we've been talking about doing a recruitment campaign to bill our state as being in need of these services and working with other entities to incent moving here to do this work. We are aware of the burden and how hard everyone is working in this area, how tough it is. We're here and trying to put in concrete ways to use our federal funding to entice in-person and scale up, then use telehealth where, despite our best efforts, that may not happen.

A: Erica Gibson, MD, she/her, UVMCH Pediatric Primary Care & VCHIP: Yes, on board with more telehealth from schools to MHP and PCPs that want to collaborate!

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A: Sharonlee Trefry, RN: Always love to advocate for more administrative assistance and data entry personnel to support and maximize school nursing and school counselor time for higher level use of professional skills, e.g., health and counselor "extenders." Love getting the word out.

A: Heather Bouchey, PhD, VT AOE: I think that's a great idea as well. The bulk of these funds will be at the local level. We're happy to get the word out and if there are some suggestions about what kinds of positions these recovery teams might consider to see if you're meeting some benchmarks that are set as part of the needs assessment and the initial recovery planning.