

# College & Career Readiness School Counseling Program

---

Duchesne County School District  
School Counseling Program Update  
August 1, 2024  
Amber Thacker





**DUCHESNE COUNTY  
SCHOOL DISTRICT**

# **K-12 Counseling Team**

Altamont Elementary-Access to Social Worker

Altamont Jr./Sr High-Full-Time Counselor

Basin Online-Part-Time Counselor

Centennial Elementary-Full-Time Social Worker/Counselor

Con Amore-Part-Time Social Worker/Counselor

Duchesne Elementary-Full-Time Social Worker/Counselor

Duchesne High School-Full-Time and Part-Time Counselor

East Elementary-Full-Time Social Worker/Counselor

Kings Peak Elementary-Part-Time Social Worker/Counselor

Myton Elementary-Part-Time Social Worker/Counselor

Neola Elementary-Part-Time Social Worker/Counselor

RJHS-Two Full-Time Counselors and one Part-Time Social Worker/Counselor

Tabiona-Two Part-Time Counselors

Union High School-Three Full-Time Counselors and One Part-Time Counselor



# Utah's College and Career Readiness Counseling Program

- Standards and framework for a K-12 comprehensive program. Provides funding for 7-12 programs
- Requires an annual self-evaluation, interim on-site review and a formal review every six years. Our district's review will be at the end of September
- Focuses on seven standards



# Utah's College and Career Readiness Counseling Program Standards

- **Standard 1:** Each student
- **Standard 2:** Data Effectiveness and Program Involvement
- **Standard 3:** Plan for college and Career Ready Process
- **Standard 4:** Career Literacy
- **Standard 5:** Collaborative Classroom Instruction
- **Standard 6:** Systemic Approach to Dropout Prevention with Social/Emotional Supports
- **Standard 7:** Alignment



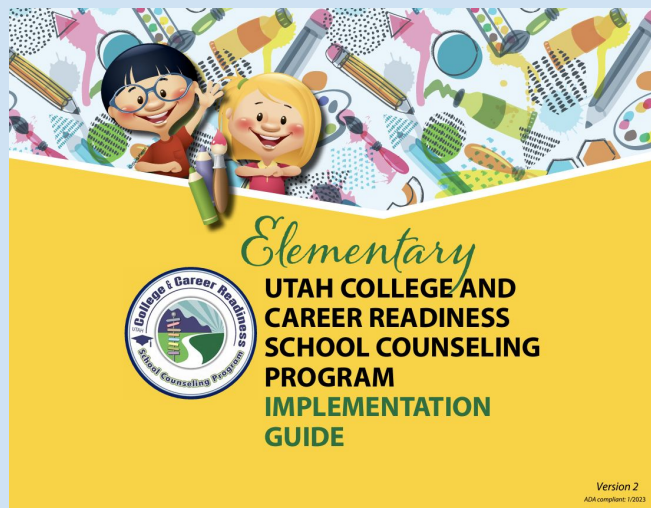
# **Elementary College and Career Readiness School Counseling Program**

- **Counseling program not specifically funded by the state**
- **Program relies on funding from School-Based Mental Health grant (allows us to hire a variety of school-based mental health personnel)**
- **DCSD elementary school-based mental health team follows the guidelines set forth in the USBE Elementary College and Career Readiness School Counseling Program in order to provide a cohesive and vertically aligned K-12 Program**



# Elementary College and Career Readiness School Counseling Program

Follows the same standards as secondary program, however more time is spent on Tier I collaborative classroom instruction and Tier II targeted interventions such as skills groups





# ELEMENTARY COUNSELING

## TIER I

School-wide lessons aligned with school goals and integrated with PBIS system. All students (along with teachers and staff) receive these lessons at least twice a month



## TIER II

Targeted skills groups focused on self-regulation or social skills. Other needs as determined. Students are referred to groups by admin, teachers or parents (based on observable data). Groups run for six weeks. Parent permission must be obtained



## TIER III

Skills-based individual meetings based on student need after having received Tier I and Tier II intervention. Sessions run for six weeks and student progress is evaluated. Parent permission must be obtained

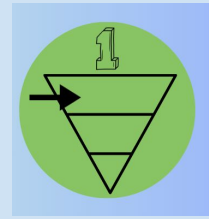


## REFERRAL

Referral to outside resources if no progress is being made after interventions, or if mental health need is significant and beyond the scope of services the school can provide. If possible obtain a release of information (ROI)

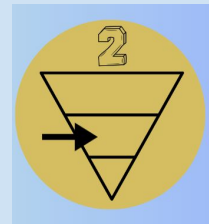


## Tier I



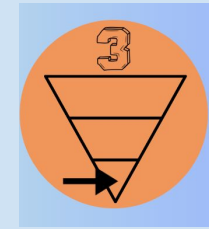
School-wide lessons aligned with school goals and integrated with PBIS system. All students (along with teachers and staff) receive these lessons at least twice a month

## Tier II



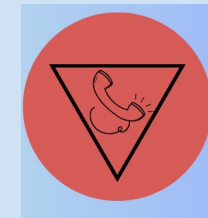
Targeted skills groups focused on self-regulation or social skills. Other needs as determined. Students are referred to groups by admin, teachers or parents (based on observable data). Groups run for six weeks. Parent permission must be obtained

## Tier III



Skills-based individual meetings based on student need after having received Tier I and Tier II intervention. Sessions run for six weeks and student progress is evaluated. Parent permission must be obtained

## Referral



Referral to outside resources if no progress is being made after interventions, or if mental health need is significant and beyond the scope of services the school can provide. If possible obtain a release of information (ROI)



# Elementary College and Career Readiness School Counseling Program

Tier I Focus: Emotional Regulation

Recognizing and naming emotions. Identifying Zones and developing coping skills to regulate big emotions





# 2024-2025 Counseling Focus: Aligning K-12 Responsive Services

- BRISC Individual Counseling (5-12 grade students)
- Referral Processes (Ensuring students have had Tier I and Tier II Interventions)
- Crisis Response Protocol (Training for counselors to help lead in their schools during a crisis)
- Response to students expressing thoughts of self-harm (Using same risk assessments and a systematic protocol to ensure student safety)



# Protocol for K-12 Students Expressing Suicidal Ideation



## Duchesne School District Suicide Prevention Toolkit

Protocol for assisting students who are struggling with suicidal thoughts. In accordance with 53G-9-604 schools are required to:

- Notify a guardian if student threatens suicide
- Provide guardian with suicide prevention materials and information
- Provide information on ways to limit the student's access to fatal means, including firearm or medication
- Maintain a record and track an action plan to address incident
- Provide a copy of the record if requested
- Remove the record after four years, once a student has graduated, or upon guardian request

### Steps in Addressing Student Suicidal Thoughts

1. Students who express suicidal thoughts should be referred to the school counselor or school-based mental health provider (call emergency personnel for an imminent threat)
2. Counselors or school-based mental health provider will use the Columbia Suicide Severity Rating Scale (CSSRS) brief version to assess risk of suicide
3. Once risk is assessed, counselors and school-based mental health providers should follow appropriate protocol depending on risk
4. Parents/guardians should always be notified
5. Safety plans should be created. Copies of safety plan, suicide prevention resources, as well as limiting student's access to fatal means should be given to both the teacher and student
6. Entire record should be uploaded in PowerSchool
7. Follow-up is required and should be documented. Record should be uploaded as necessary

## COLUMBIA-SUICIDE SEVERITY RATING SCALE (C-SSRS)

For inquiries and training information contact: Kelly Posner, Ph.D.  
New York State Psychiatric Institute, 1051 Riverside Drive, New York, New York, 10032; posnerk@nyspi.columbia.edu  
© 2008 The Research Foundation for Mental Hygiene, Inc.

	PAST MONTH	
Ask questions that are in bold and underlined.	YES	NO
<b>Ask Questions 1 and 2</b>		
<b><u>1) Have you wished you were dead or wished you could go to sleep and not wake up?</u></b>		
<b><u>2) Have you had any actual thoughts of killing yourself?</u></b>		
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6.		
<b><u>3) Have you been thinking about how you might do this?</u></b> e.g. "I thought about taking an overdose but I never made a specific plan as to when where or how I would actually do it....and I would never go through with it."		
<b><u>4) Have you had these thoughts and had some intention of acting on them?</u></b> as opposed to "I have the thoughts but I definitely will not do anything about them."		
<b><u>5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?</u></b>		
<b><u>6) Have you ever done anything, started to do anything, or prepared to do anything to end your life?</u></b> Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc.	LIFETIME	
<b><u>If YES, ask: Was this within the past 3 months?</u></b>	PAST 3 MONTHS	



# Assurances Needed for DCSD Counseling Programs

- Board Adoption and Approval
  - Written evidence that our local School Board has adopted the College and Career Readiness School Counseling Program.
- Structural Components
  - Student/Licensed Counselor Ratio (1:350)
  - Budgets
  - Appropriate facilities
  - Clerical staff
  - Computer facilities





# Assurances cont.,

- Communication with stakeholders
- Keeping current with laws and regulations
- Crisis response plans in place
- Extended days and hours
- **Administrative**
  - Leaders meet with counselors regularly
  - Annual program evaluation and **report to School Board**
- **Use of Data**
  - Access to relevant data





# Assurances cont.,

- **Program Leadership and Management**
  - Participate in advisory groups
  - Provide training to staff
  - Participate in development of TSSA plan
- **Time Allocation**
  - Time/task analysis charted by each counselor
  - Post calendars on websites
- **College and Career Readiness Training**
  - Participate in state trainings and other professional development opportunities
- **School Counselor Checklist**
  - Annual performance reviews
  - Electronic Evidence Boxes (Counseling team's accessible working files)





# Board Adoption and Approval

- Will the Duchesne County School Board approve the College and Career Readiness School Counseling Program as a K-12 model for our district?

