

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

Mental Health Assistance Allocation Plan Checklist Best Practices Considerations: Responses indicated by numerals (1-6) throughout the narrative below.

- 1) Describe awareness/prevention efforts that address mental health issues.
- 2) Describe the mental health screening and assessment procedures for determining which students need mental health interventions and treatment.
- 3) Describe process for identifying and delivering evidence-based mental health interventions.
- 4) Describe procedures for referring students to school-based mental health interventions and community-based mental health providers for treatment.
- 5) Describe how services will be delivered within a multi-tiered system of supports (universal/prevention, targeted, and intensive).
- 6) Describe other outcome data that will be used to evaluate effectiveness of services (i.e. Early Warning System Indicators, Youth Risk Behavior Survey data, school climate/student engagement data).

Mental Health Assistance Allocation Plan Narrative

The Sarasota County Public Schools (SCPS) District supports families, schools, district staff, community projects and agencies through a framework of monitoring “high impact” Response to Intervention (RtI) Tier I and Tier II strategies through the Multi-Tiered System of Support (MTSS) process. Pupil Support Services (PSS) staff work collaboratively with all stakeholders to focus on behavioral and mental health support. The SCPS implementation framework provides seamless interconnected support through a collaborative approach to planning and problem solving leading to the development of collective efficacy. These efforts combined focus on *awareness/prevention efforts that address mental health issues (1)*.

The *mental health screening and assessment procedures for determining which students need mental health interventions and treatment (2)* encompass many facets of a process involving PSS Staff and School based teams. At any time, a referral is brought to the attention of any member of a school team, the process begins at the School-Wide Support Team (SWST) reviewing, analyzing, problem-solving and making appropriate informed decisions for the benefit of the students. PSS staff utilize several different evaluation tools to better understand the needs of individual students. Examples of these instruments include and may not be limited to: Comprehensive Health Assessment Tool (CHAT), Connor’s Rating Scales, the Behavioral Assessment Scale for Children (BASC), The Adaptive Behavior Assessment System (ABAS) and the Vineland. Results of these screenings are shared as part of the SWST planning and discussions. *The process for identifying and delivering evidence-based mental health interventions (3)* is interconnected with the mental health screening and assessment procedures. For the benefit of all students, evidence based best practices are put in place for Tier I and Tier II support. If a student presents with severe needs, licensed professionals are

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

part of the SWST and review information to proceed with a treatment care plan for both students and families. The schools continue to connect resources for wraparound care and school identified personnel is assigned to monitor ongoing supports and outcomes of interventions, at all levels (Tier II, Tier III). The school district has interagency agreements, with the appropriate permissions signed by both parties, to exchange information that impact educational services for students and families. These agreements are reciprocal that assure continuity of services and supports for students while accessing education.

The district has *very specific procedures (4)* for referring students to school-based mental health interventions and community-based mental health providers for treatment. Every school in the district has SWST meetings focused on review of student academic and social-emotional needs. After reviewing student needs, SWST participants discuss the connection of appropriate resources and supports relative to student performance in an educational setting. At times, school-based services, such as counseling from qualified educational professionals, is not enough to support the mental and behavioral health needs of the student. In these instances, an additional referral is made for outside clinical support. This coordination is tied to wraparound extensions of support and monitored to adjust, delete and add interventions as a way of ensuring that appropriate supports are continually being implemented. Decisions on action plans are made based on data and the input from the provider. Students referred for mental health services participate in a mental health comprehensive intake process, including parental/family involvement and participation, coordination with physicians, psychiatrists and other medical providers. The district's focus is always on determining the strategies and supports necessary to aide student success in the educational setting. Outcomes of wraparound services are determined and driven by family's response and adherence to these recommendations. Furthermore, recommendations are monitored by the district to provide continuity of services and ensure that families receive the support(s) needed.

Additionally, SWST meetings are a process used for monitoring "at risk" students, including, but not limited to, students placed in foster care and students involved with juvenile justice. Monitoring includes the following components:

- Foster Care "Keep Me Safe" emails are sent every day for every child entering foster care or children that have been removed by DCF. The email is sent to every school counselor, social worker and psychologist as well as key staff at the individual school site.
- Guardian ad Litem(s) are trained and given access to the Student/Parent Portal to review attendance and grades.
- The District PSS Judicial Liaison collaborates with probation officers and school based personnel.
- PSS staff complete a re-entry plan for every student returning from a "Baker Act" or "Threat Assessment."

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

- A Personal Safety Plan is implemented during the re-entry plan process or at any time a student is exhibiting behaviors of concern. This procedure takes place for all students, (in all schools), in danger of hurting themselves or others and staff is assigned to monitor plan implementation.
- “Call for Help” cards are updated and include the CRISIS TEXT LINE (741741).

Services will be delivered within a *Multi-Tiered System of Supports (MTSS) that include universal/prevention, targeted, and intensive supports (5)*. Through the SWST framework, MTSS is implemented through ongoing analysis of student data and a collaboratively planning and problem-solving process. Schools have specific published Positive Behavioral and Intervention Support (PBIS) plans, indicating how supports are being provided at Tier I (universal/prevention), Tier II (targeted) and Tier III (intensive) supports.

Tier I Mental Health Support is embedded in multiple layers of district initiatives beginning with PBIS plans developed at every district school and posted on the district website. A district PBIS support team provides ongoing training and guidance to school based teams through collaboration with the University of South Florida(USF)/PBIS project. These plans include specific behavioral interventions at Tier I, II, and III, in alignment with Response to Intervention (RtI). These interventions are tied with mental health support and the data from these interventions is routinely reviewed at SWST meetings. Every elementary and middle school will utilize and participate in training for *Conversation, Help, Activity, Movement, Participation, Success (CHAMPS)* (Sprick, 2009). High Schools will utilize and participate in training for *Discipline in the Secondary Classroom* (Sprick, 2013). All SCPS receive ongoing training and support for *Restorative Practices*. Tier II and Tier III supports are reviewed and implemented through SWST meetings, as more intensive needs may be indicated.

Family support is provided as well through many services targeted at connecting families with community agencies and other key resources that include the following:

- SCPS district website includes a “Parent Resource” link providing specific “bullying” resources, MTSS behavioral interventions, and mental health resources.
- PSS administrative district staff participate in a weekly “Multi-Disciplinary Team Staffing (MDTS)” meeting with the Department of Children & Families (DCF) Crisis Prevention Team (CPT) and other mental health agencies. Through this work, “Community Mental Health Exchange Release of Information” allows information access between agencies.
- An annual “SCPS Exceptional Student Education (ESE) Agency Fair” for parents of students with disabilities. At the SCPS ESE Agency Fair, there is mental health agency representation and a variety of breakout sessions provided, including: Cyberbullying, Anxiety in Children and Teens, and Self-Determination. In the future, the district plans to provide a “Social Media Parent Night” and “Public Service Announcement Competition” to further support mental and behavioral health.
- Discretionary project support is utilized to provide families an opportunity to participate

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

in “Parent University” workshops designed to focus on current topics related to and impacting the educational setting which may include the areas of mental and behavioral health.

- As part of Tier III mental health interventions, families are invited to participate in weekly *Child and Family in Need of Services* (CINS FINS) meetings at YMCA sites. At these meetings, families are provided with an opportunity to meet with school staff and YMCA staff to connect supports/resources.

Another key component of the Behavioral Health Framework is the professional learning and multi-layered support provided to SCPS Student Services Staff. This support is inclusive of all stakeholders working with students at risk and includes the following:

- Training for “Youth Mental Health First Aid” (Project Aware) and “Trauma Informed Care” provided for all social workers, psychologists, counselors, and nurses and will be provided to other instructional staff at school sites throughout the 2018-2019 school year.
- All Social Workers (SW) and Home School Liaisons (HSLs) and school counselors are required to complete “Suicide Prevention Certification.”
- All social workers, psychologists and school counselors received training and are given ongoing support for an updated “Gatekeeper Protocol” for self-harm and suicidal ideation.
- A restructured “School Wide Loss” manual is utilized at every school.
- PSS staff were trained on LGBTQIA sensitivity as related to SCPS student support policies and procedures.
- Sandy Hook Threat Assessment and “See Something, Say Something” training will be provided to PSS staff, School Resource Officers (SROs), and Administrative Staff
- Ongoing coordinated support and staffing models change based on data and need. The continued refinement of responsibility assignments will be reviewed for Behavior Specialists, Counselors, Social Workers, Psychologists, Program Specialists.

School staff is provided ongoing and continuous support through the update of the Multi-Tiered System of Support: Tier I, II, III Interventions on the SCPS Digital MTSS system and SharePoint, an internal web-based collaborative platform. Thirteen district staff members were trained as “Restorative Strategies Trainers.” These trainers provided training to (471) K-12 teachers and staff in Restorative Strategies with (121) in process of being trained. In addition to these staff, thirty administrators were trained in conducting “Restorative Meetings” as an alternative to suspension All SCPS district schools published Positive Behavior Intervention and Support (PBIS) plans on a District Dashboard and included Gulf Coast Community Foundation’s “Civility Squad: Because it Matters” initiative. Annually, the district supports “Speak Up for Kids Mental Health Conference.” There is also an annual “Community Mental Health Agency Providers Fair” for all Sarasota Staff sponsored by Circuit 12.

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

All behavioral and mental health support is connected through the support of community projects, agency partnerships and philanthropic foundations in Sarasota County. These foundations include:

- The Charles & Margery Barancik Foundation
- The Gulf Coast Community Foundation
- The Community Foundation of Sarasota

The district also supports Tier III Mental Health Agency Resources through Interagency Agreements with over twenty different agencies in the community. Discretionary Project collaboration has been a tremendous support through the work of the USF/PBIS Project, Project 10, Students with Severe Emotional and Behavioral Disabilities Network (SEDNET), the Center for Autism and Related Disabilities (CARD) and the Florida Diagnostic and Learning Resources System (FDLRS)/Florida Inclusion Network (FIN).

Other outcome data will be used to evaluate effectiveness of services (i.e. Early Warning System Indicators, Youth Risk Behavior Survey data, school climate/student engagement data) (6): Last year, SCPS implemented an Early Warning System on a district dashboard and with support from the Research Assessment and Evaluation (RAE) department trained all district staff on accessing this valuable data. PSS staff analyzes this data as well as “Youth Risk Behavior Survey” data both at the district level and within SWST meetings held at the school sites. All data is used to drive support and services for students throughout the school. Data is also collected relative to the number and location of “Threat Assessments,” “Counseling as a Related Service,” “Gatekeeper Protocols” for Self-Harm and Suicidal Ideation, Foster Care data, Out of School Suspensions (OSS), attendance, discipline referrals and academic assessment data.

Based on the ongoing work of the district, state funding will be used to further provide targeted support and build internal capacity to continue the supports and services indicated throughout this narrative.

Curriculum to Enhance Tier I and Tier II Support:

- Restorative Strategies Tier I Training for elementary teachers (2-3 hours)
- Social Emotional Curriculum for K-8: CHAMPS (focus on Middle School teachers)
- Social Emotional Curriculum for 9-12 by the authors of CHAMPS: Discipline in the Secondary Classroom (one for every high school teacher)
- Culturally Responsive and Trauma Informed Teaching with Jon Saphier’s training using *High Expectations Teaching* and *The Skillful Teacher* (7-day training for 160 K-12 staff)

Expand Behavioral and Mental Health Training Opportunities to Build Capacity in Our Staff:

- Substitutes to expand access to Youth Mental Health First Aid community/ staff training

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

opportunities for teachers

- Suicide Prevention Certification opportunity for teachers (free online 2-hour course)
- Trauma Informed Care Training for Program Specialists at all levels, Behavior Specialists, and Support Staff
- Substitutes for training using Restorative Strategies (train the trainer model)
- Substitutes for training teachers with both CHAMPS curriculums (begin with 6th and 9th grade teachers)

Contract Mental Health Services for Our Schools to do the following:

- Support high needs PK-12 students and families at our most at-risk schools
- Provide individual therapy and small group therapy (e.g., coping skills, building agency, life skills, substance abuse, etc.)
- Provide 2Gen support: connect agencies to families
- Support a mindset change from thinking “What’s wrong with you?” to “What happened to you?”
- Build capacity with our staff to continue these services in the future

Program Implementation & Outcomes (s.1001.62 (16) (d), F.S.)

School Wide Support Team will utilize the following processes to facilitate the collection of data regarding the number of students screened/assessed, number of students referred for mental health services, and number of students referred to an outside mental health provider, as appropriate:

- The data input form will be utilized and inputted into the Student Information System (SIS) database as a way of collecting the number of students receiving services.
- Once a student is dismissed from receiving services, a note may be added reflecting the outcome.

Expenditures (s.1011.62 (16), F.S.)

SCPS will use 90% of the Mental Health Assistance Allocation to supplement support for direct mental health services for students. These funds do not supplant other funding sources, increase salaries, or provide staff bonuses.

SCPS will contract with The Florida Center and First Steps to contract (12) mental health services providers to provide direct mental health, substance abuse, and co-occurring therapy to students at Tier II and Tier III, when appropriate. These therapies will include individual and group therapy for students, as well as family counseling services and substance abuse counseling, as needed. Home visits with families will be conducted for gathering information on a student's background. These mental health providers will be assigned to schools to coordinate Tier II and Tier III services with primary care providers and mental health agencies

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

when additional mental health or substance abuse support is needed. SCPS will pursue active consent for Medicaid School Match billing from parents with students receiving Medicaid. The Mental Health Service Providers will keep ongoing communication regarding the plan of care with the student's primary care physician.

Evidenced Based Practices provided by mental health professionals may include:

Cognitive Behavior Therapy (CBT): Cognitive behavior therapy is a psychotherapy that is effective for a variety of diagnoses including depression, anxiety, substance abuse and co-occurring disorders. CBT focuses on feelings, thoughts, and behaviors by challenging negative thoughts or beliefs, changing destructive behavior patterns, and focusing on solutions. It is appropriate for children and adolescents.

Trauma-Focused Cognitive Behavior Therapy (TF-CBT): is a specialized treatment approach for working with children and adolescents that have experienced trauma. It assists children, adolescents, and their families in reducing the emotional effects of trauma.

Play Therapy: Play therapy is primarily used with children ages 3-12, but can also be appropriate for adolescents. The focus in play therapy is the use of play to help children express and communicate their feelings, resolve issues, and process trauma. It is based off the developmental needs and stages of the child.

Multidimensional Family Therapy (MDFT): Multidimensional Family Therapy (MDFT) is focused on working with a youth and their family to enhance their problem solving and coping skills and increase their overall interpersonal functioning as a family unit.

Solution-Focused Brief Therapy (SFBT): SFBT is a short-term, solution-focused treatment appropriate for all ages. The focus is on creating goals and a vision for the future, then identifying the necessary skills, abilities, and resources to meet these goals.

Dialectical Behavior Therapy (DBT): DBT is a type of cognitive behavioral therapy that emphasizes individual psychotherapy and group skills training classes to help people learn and use new skills and strategies to develop a life that they experience as worth living. DBT skills include skills for mindfulness, emotion regulation, distress tolerance, and interpersonal effectiveness. It is highly effective for non-suicidal self-injury.

Motivational Interviewing (MI): MI is a technique that is based on a client centered approach with the goal of increasing a person's motivation to change. It relies on 4 basic principles: express empathy; support self-efficacy; roll with resistance; and develop discrepancy. MI is beneficial for substance abuse and co-occurring disorders.

Mental Health Assistance Allocation & Behavioral Health Plan 2018-2019

Sarasota County Public Schools: Focus on Prevention

Total State Funding Allocation:	
\$1,048,815 total minus 15% allocation to Charter Schools of \$157,322 = 891,493	
<i>Curriculum to Enhance Tier I and Tier II Support</i>	
<i>Materials</i>	<i>Total Cost</i>
Restorative Strategies Books	\$19,600
CHAMPS Books	\$38,690
Discipline in the Secondary Classroom Books	\$23,779
Culturally Responsive and Trauma Informed Teaching Books	\$0
<i>Expand Behavioral & Mental Health Training Opportunities</i>	
Substitutes (Youth Mental Health First Aide Training)	\$25,000
Suicide Prevention Certification	\$0
Trauma Informed Care Training	\$0
Substitutes (Restorative Strategies)	\$62,500
Substitutes (CHAMPS & Discipline in the Secondary Classroom)	\$113,750
<i>Contracted Mental Health Services</i>	
Mental Health Therapists	\$616,174
<i>Total Allocation Plan Expenditures</i>	<i>\$891,493</i>