Mental Health Assistance Allocation Plan (s. 1011.62(16)(a) and (b), F.S.)

1. Delivers evidence-based, mental health assessment, diagnosis, intervention, treatment and recovery, through a multi-tiered system of supports.

   Broward County Public Schools has a comprehensive electronic database known as Behavioral and Academic Support Information System (BASIS) that provides data needed to drive decision-making and instruction in schools. The data includes student assessment results, attendance data, discipline information, and demographic information. The data is analyzed to create at-risk indicators that guide school-based teams to prioritize student needs. Each school has a Collaborative Problem-Solving Team (CPST) that meets frequently to discuss students with academic, behavioral, or social/emotional concerns. Further data is collected through review of records, observations, interviews, etc. This information is then used to develop intervention plans tailored to the individual student’s need. The intervention plan may include individual or group counseling provided by school-based mental health professionals.

   Psychological evaluations are conducted for students suspected of having a disability and possibly needing more intensive services. Counseling and additional services can be added to a student’s IEP, as warranted. Psychiatric evaluations are conducted as a component of the referral process to consider a change of placement to a separate day school for a student needing a more therapeutic setting. Psychosocial evaluations are conducted as a part of Emotional or Behavioral Disability (EBD) evaluations or to obtain more information regarding a student’s social/developmental history when determined by the CPS team.

   The District’s Family Counseling Program provides free individual, family, and group counseling services. The goal of the program is to promote student academic performance, responsible behavior in school, and regular attendance. School-based teams and district mental health professionals also refer students and families to community providers for additional services.

   The District has a SEDNET (Multiagency Network for Students with Emotional Behavioral Disabilities) Coordinator who communicates with the local receiving facilities to address unique needs of students who have been hospitalized under the Baker Act. In applicable cases, SEDNET receives referrals and sends them out to school-based ESE Specialists. This referral can lead to a CPS team meeting, an IEP team meeting, a reevaluation plan meeting, or an initial referral for an evaluation.

   Broward County Public Schools’ (BCPS) School Counseling program is based upon the American School Counselor Association (ASCA) National Model. This comprehensive, research-based model’s mindsets and behaviors describe the knowledge, skills, and attitudes students need to achieve academic success, social-emotional development, and college/career readiness. The ASCA National Model’s standards for students form the basis for service delivery in all district schools, grade levels PK-12. In addition, the ASCA School Counselor Competencies outline the knowledge, skills, and attitudes that ensure school counselors are equipped to meet the rigorous demands of the profession and meet the needs of our diverse student population.

   **Tier 1** – To have an effective Tier 1 core - 1st criteria schools need to have 80% or greater of their students with 0-1 referrals; 2nd criteria: less than 15% with 2-5 referrals; 3rd criteria: less than 5%
with greater than 5 referrals. Schools can determine these numbers from BASIS referral data and risk factors to determine schools that have the greatest behavioral needs.

- Schools with highest suspensions
- Schools with high office discipline referrals (ODR)
- Schools with the greatest pattern of non-attendance
- Schools with excessive overage students
- Schools with highest number of Behavior Intervention Committee (BIC) referrals
- Support school-wide initiatives focusing on SEL and/or Reimagining Middle Grades

**Tier 2**

- Provide targeted prevention/intervention to students identified at the schools with the greatest need, as noted on Tier 1.
- Mental health professionals will provide more targeted counseling services, either individual or small group, e.g. social skills, prevention groups
- Behavioral analysts will provide schools with assistance to create targeted behavioral interventions individual student behavior plans, PBIP’s and FBA’s.
- Determine and provide specific supports to the school-based CPS team as it relates to targeted student interventions.
- Provide consultation/offer services to SEL liaison.
- Provide consultation/offer services staff at middle schools regarding Reimagining Middle Grades initiatives.

**Tier 3**

- Have mental health professionals provide more intensive and frequent counseling services
- Provide intensive support to students referred for expulsion/substance abuse abeyance
- Center schools – identify the needs of students not meeting with success in their current placement
- Enhance therapeutic services to the disciplinary centers
- Provide wraparound services for students referred to BIC; identify needs/plan, work on the transition to the BIC center and return to boundary school.
- Provide wraparound services to students referred to PROMISE, enhancing the case management process to include close monitoring and counseling.
- Provide intensive transition services to students returning from the hospital for psychiatric reasons, for example, Baker Act, residential placements.
- Behavioral analysts will provide schools with assistance to create individual student behavior plans, PBIP’s and FBA’s.
- Mental health professionals will provide more intensive counseling services, either individual or treatment groups, e.g. grief

**Note:** These services are being proposed for general education students

2. **Focuses on evidence-based mental health services for students with one or more co-occurring mental health or substance abuse diagnoses and students at high risk of such diagnoses.**

Broward County Public Schools, through the Department of Diversity, Prevention & Intervention (DPI), provide education and awareness of substance use in an effort to promote the academic success, health, and well-being of students. This department provides schools with curriculum and materials to promote awareness and prevention. Every October, BCPS observes National Substance Abuse Prevention Month. This observance highlights the vital role
of substance abuse prevention in both individual and community health, while remembering those who have lost their lives to substance abuse. Broward Schools observes World No Tobacco Day (WNTD) every year on May 31. Sponsored by the World Health Organization (WHO) since 1987, its goal is to highlight the health risks associated with tobacco use and encourage governments to adopt effective policies to reduce smoking and other tobacco use. Additionally, prevention efforts across the district include Red Ribbon Week and school-based Health and Wellness Fairs.

Students who have been suspended for substance-related infractions are referred to Substance Abuse Counselors/Abeyance Case Managers that conduct substance abuse evaluations. In addition, consultation and intervention services may be provided for students who have not committed a drug or alcohol related offense but are at high-risk for drug and/or alcohol involvement. Substance abuse referrals can come from school-based administration, guidance counselors, teachers, parents, etc. Students may also seek out services on their own.

Delivery of services is determined after the Substance Abuse Case Manager conducts an assessment. The case manager will develop a plan and monitor the student or refer to one of the Behavioral Health Partners specializing in substance abuse treatment. If the Substance Abuse Case Manager determines the student does not have a significant substance abuse issue, they will refer the student to the Family Counseling Program for mental health intervention.

3. Includes direct employment of school-based mental health services providers (i.e., school psychologists, school social workers, school counselors and other licensed mental health professionals) to reduce staff-to-student ratios and meet student mental health assistance needs.

- 47 Family Therapists are licensed with the following: LCSW, LMFT, LMHC. All have master's degrees or higher.
- 136 School Social Workers have a minimum of a master's degree; some also have a Ph.D., Ed. S. and CAP (Certified Addiction Specialist).
- 120 School Psychologists (with a master's degree or higher) are assigned to schools.
- 44 ESLS counselors all with a master's degree or higher (75% are licensed in the following areas LMHC, LMFT, LCSW and some have the following degrees, Ph.D., Psy.D., Ed.D.)
- 436 Certified School Counselors, each with a master's degree or higher.
4. Identifies strategies to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).

In order to expand the delivery of direct mental health services in a timely manner to all schools throughout the District, the mental health staff to be funded by this allocation will be strategically distributed in regions throughout the District. This regional configuration will allow for an immediate response from a highly qualified team of mental health professionals to address a crisis or acute mental health needs. Each region includes approximately 45 schools.

<table>
<thead>
<tr>
<th>5 Nurses</th>
<th>Available as needed in all 5 regions</th>
<th>$395,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Family Therapists</td>
<td>2 per Region</td>
<td>$790,000</td>
</tr>
<tr>
<td>10 School Counselors</td>
<td>2 per Region</td>
<td>$790,000</td>
</tr>
<tr>
<td>10 School Psychologists</td>
<td>Available as needed in all 5 regions</td>
<td>$790,000</td>
</tr>
<tr>
<td>10 School Social Workers</td>
<td>2 per Region</td>
<td>$790,000</td>
</tr>
<tr>
<td>10 Behavior Analysts</td>
<td>2 per Region</td>
<td>$790,000</td>
</tr>
<tr>
<td>5 EAP Counselors</td>
<td>1 per Region</td>
<td>$395,000</td>
</tr>
<tr>
<td><strong>Total Personnel</strong></td>
<td></td>
<td><strong>$4,740,000</strong></td>
</tr>
<tr>
<td><strong>Training &amp; Materials (7.6%)</strong></td>
<td></td>
<td><strong>$360,000</strong></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>$5,100,000</strong></td>
</tr>
</tbody>
</table>

5. Includes contracts or interagency agreements with local behavioral health providers or Community Action Team services to provide behavioral health services on or off the school campus (plan must specify the type of services that are provided in the agreement).

- Broward Schools has a contract with a Child & Adolescent Psychiatrist (M.D.)
- Psychological Services has consultant agreements with a Child & Adolescent Psychiatrist (M.D.) and a Pediatric Neurologist (M.D.)
- 2/3 of the District’s current nursing staff (ARNP, RN, LPN) are provided through contractual agreements with community agencies

6. States how the plan establishes school board policies and procedures that ensure for all schools, including charter schools, to ensure:

1. **Students referred for a mental health screening are assessed within 15 days of referral:**
   School Social workers receive referrals from school personnel and follow up with referred student, initiating contact with the student within 7 days of referral. All interventions are documented in the District Behavioral and Academic Support Information System (BASIS). This includes referrals to school-based mental health clinicians and referrals to community mental health partners.

2. **School-based mental health services are initiated within 15 days of identification and assessment; and**
   When a referral is received for mental health services, the appropriate school-based mental health clinician makes initial contact with the student within 2 days, not to
exceed 7 days. Interventions are recorded in BASIS and tracks response time and successful linking to services.

3. **Community-based mental health services for students are initiated within 30 days of referral.**
   As above, referrals to community partners are handled in like manner, such that adherence to timeline is monitored. The response time for each partner agency is assessed to determine continuation of the annual agreement.

7. Describes process for coordinating mental health services with a student’s primary mental health care provider and other mental health providers involved in the student’s care.

   School-based teams and mental health professionals within Broward County Public Schools obtain legal guardian consent to release information to community-based mental health providers for treatment. Referrals are tracked through Broward County Public School’s electronic system known as BASIS. Referrals and the timeline in which services are established are tracked. School mental health professionals may also consult with families on possible referrals to the Community Action Treatment (CAT) team via Smith Community Mental Health. The team is comprised of a psychiatric registered nurse, clinician, youth and adult support case manager. The agency will help determine if the student meets criteria and if not connect them to a more appropriate resource.

   Additionally, if a school professional who is assessing for suicidality believes that a student is at risk for suicide, they may contact Henderson Behavioral Health’s Youth Emergency Services (YES) team for additional support or assessment to consider the possibility of a hospitalization under the Baker Act. If the YES team determines that the student meets criteria, they will help the school arrange for transportation to a local receiving facility.

   SEDNET referrals are generated by residential sites, local Baker Act receiving facilities, and day treatment facilities when the youth is moving towards a discharge. These referrals are sent to Broward County Public Schools’ SEDNET office via a case manager. The case manager contacts the family to discuss the referral and the unique needs of the family. With parental consent, the SEDNET case manager communicates with the school-based mental health professionals and the student’s home school to examine the needs of the student. The case manager tracks the referral and also maintains contact with the family to assist with connections to community-based supports.

8. Identifies strategies or programs to reduce the likelihood of at-risk students developing social, emotional or behavioral problems; depression; anxiety disorders; suicidal tendencies; or substance abuse disorders.

   Each school holds CPS team meetings at schools to identify at-risk students. The use of at-risk indicators (office discipline referrals, absenteeism, etc.) trigger school-based teams to meet and discuss student needs. As a result, students needing mental health services can be referred to school based mental health professionals.

   The school district advertises the availability of free counseling services through the Family Counseling Program to parents providing them with the opportunity to see counseling services on their own. The Family Counseling Program also accepts referrals from administrators, school social workers, school psychologists, school counselors, teachers, and friends of students. Students are also able to refer themselves.
Healthcare personnel in school clinics may identify and provide referral for students needing mental health evaluation. Students are also identified through SEDNET referrals that are received from hospitals, residential providers, and day treatment providers. The school-based team then determines whether services are warranted. Students with an IEP or 504 Plan can also be identified for counseling as a related service based on the individual’s need.

9. Describes the process for coordinating mental health services for students at charter schools that are part of the school district’s plan.

The school district’s plan will be available to the charter schools, for implementation, using their State allocated funds. The charter schools will provide services to meet the District’s plan.

10. Identifies strategies to:

   1. Improve the early identification of social, emotional or behavioral problems or substance abuse disorders;
   2. Improve the provision of early intervention services; and
   3. Assist students dealing with trauma and violence.

   Broward STOPS Violence! is a Federal grant that provides for 3 years of implementation for violence prevention. Curriculum is available to all schools in the District. STOPS is an acronym for Schools, Teachers, Organizations, Parents, and Students. The program is comprised of two initiatives: “Start with Hello” teaches students about social isolation and methods of forming connections; “Say Something” teaches students how to recognize signs and signals of violence to self or others, especially in social media, and how to report that information to a trusted adult.

   When students are exhibiting post-traumatic stress symptoms, they are able to receive appropriate therapeutic intervention as 85% of the Family Therapists are trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).
EXPENDITURES

11. Number of school-based mental health providers funded by the allocation and licensure/certification for each.

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Licensure/Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Nurses</td>
<td>RN (Registered Nurse)</td>
</tr>
<tr>
<td>10 Family Therapists</td>
<td>LCSW, LMHC, LMFT, Psy.D., Ph.D.</td>
</tr>
<tr>
<td>10 School Counselors</td>
<td>Florida School Counselor</td>
</tr>
<tr>
<td>10 School Social Workers</td>
<td>Florida Certification as School Social Worker MSW, LCSW, Ph.D., Ed.D.</td>
</tr>
<tr>
<td>10 Behavior Analysts</td>
<td>Certification as Applied Behavior Analyst MA, MS, or higher</td>
</tr>
<tr>
<td>5 EAP Counselors</td>
<td>MSW, LMHC, LCSW, LMFT, Psy.D., Ph.D.</td>
</tr>
</tbody>
</table>

12. Number of community-based mental health providers funded by the allocation and licensure for each.

Not applicable

13. School district expenditures for services provided by contract-based collaborative efforts or partnerships with community mental health program agencies or providers.

- Broward Schools has a contract with a Child & Adolescent Psychiatrist (M.D.)
- Psychological Services has consultant agreements with a Child & Adolescent Psychiatrist (M.D.) and a Pediatric Neurologist (M.D.)
- 2/3 of the District’s current nursing staff (ARNP, RN, LPN) are provided through contractual agreements with community agencies

14. Other expenditures (specify type and amount).

- Training and national certification in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), $250 per certificate, up to 25 staff.
- Introduction to Neurosequential Model of Therapeutics, as assessment tool, $250 per person.
EXPENDITURE ASSURANCE

15. One hundred percent of state funds are used to expand school-based mental health care; train educators and other school staff in detecting and responding to mental health issues; and connect children, youth and families with appropriate behavioral health services.

One hundred percent of state funds for Mental Health Allocation will be used to expand school-based mental health care.

<table>
<thead>
<tr>
<th>Personnel Type</th>
<th>Count per Region</th>
<th>Budget Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Nurses</td>
<td>1</td>
<td>$395,000</td>
</tr>
<tr>
<td>10 Family Therapists</td>
<td>2</td>
<td>$790,000</td>
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<tr>
<td>10 School Counselors</td>
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<td>10 School Social Workers</td>
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</tr>
<tr>
<td>10 Behavior Analysts</td>
<td>2</td>
<td>$790,000</td>
</tr>
<tr>
<td>5 EAP Counselors</td>
<td>1</td>
<td>$395,000</td>
</tr>
</tbody>
</table>

**Total Personnel** $4,740,000

**Training & Materials (7.6%)** $360,000

**TOTAL** $5,100,000

16. Mental health assistance allocation funds do not supplant other funding sources OR increase salaries or provide staff bonuses.

This plan addresses District service limitations and enhances the quality and fidelity of program implementation. Targeted and/or intensive interventions will be provided based on unique school needs. This does not replace current service delivery, nor will it be used for salaries or staff bonuses. All staff in this plan will be newly hired.

17. Describes how district will maximize use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants).

The Family Counseling Program with Broward County Public Schools is funded through a grant from Broward County Community Partnership Division/Children’s Services. The Family Counseling Program has been receiving this grant for more than 15 years. Since the program continues to meet/exceed outcomes with students and families required by the grant, we anticipate to maintain this successful partnership and continue the level of grant approval each year.

Broward County will continue to seek reimbursement for services through Medicaid, and grant opportunities.

Grant funding from The New York Life Foundation will allow Broward County Public Schools to engage in consultative services with the National Center for School Crisis and Bereavement. The partnership will allow an interdisciplinary team of medical, mental health, and school professionals to support short-term and long-term recovery in the aftermath of the crisis at Marjory Stoneman Douglas High School. This will include educational and mental health resources in crisis management tools, professional development and training, community presentations, and support to students, families, and staff.

The School Emergency Response to Violence (SERV) Grant is intended to address the long-term recovery efforts that may be needed following a traumatic event. Extended Services grants may
provide for up to 18 months to help students, teachers, and school staff recover from a traumatic event. The SERV grant will provide for:

- Technical assistance on developing an appropriate recovery plan for addressing student needs and assessing the Federal, State, and local resources available to the LEA, IHE, and community to carry out this response.
- Mental health assessments, referrals, and services related to the traumatic event (with the goal of restoring victims/survivors to their pre-incident levels of functioning)
- Overtime for teachers, counselors, law enforcement and security officers, and other staff
- Substitute teachers and other staff as necessary
- Emergency transportation such as expenses incurred during evacuation
- Transportation and other costs to operate school at an alternative site
- Repairs of minor damage caused by the traumatic event (Extended Services Grants only)
- Temporary security measures such as non-permanent metal detectors and additional security guards and security cameras. This list is not meant to be exhaustive. Applications to fund other services will be considered if the proposed activities are not among the list of services and activities that may not be funded (see response to FAQ Question 5); and are necessary to restore the learning environment.

Currently, BCPS partners with the United Way of Broward County to provide Tier 1 substance abuse prevention programs to the District's 234 schools. This partnership involves programs that are directly run by the United Way, such as Project Brain, Choose Peace, Sweet and Delicious, the Broward Youth Coalition (substance abuse and mental health prevention), and our annual Above-the-Influence District-wide awareness event. In addition, the United Way funds various agencies throughout the county to deliver substance abuse education programs that are evidence-based to our students. We help to coordinate the agencies to ensure that services are spread evenly throughout our schools and in schools that have the greatest need. In addition, sexual health education is provided to all students in Grades K-12 through support from the Center of Disease Control and the District. As part of the age-appropriate curriculum, substance abuse is discussed with sexual health due to the correlation between the two.

The District is applying for additional grant opportunities, including: BJA STOP School Violence Prevention and Mental Health Training Program (USDOJ); BJA STOP School Violence Threat Assessment and Technology Reporting Program (USDOJ); Community Champions Grant Program (Florida Panthers, NHL); Title IV, Part A, Student Support and Academic Enrichment (FLDOE); COPS (USDOJ); and Safe Haven (USDOJ).
PROGRAM IMPLEMENTATION AND OUTCOMES

18. Identifies the number and ratios of FDOE-certified or licensed, school-based mental health services providers employed by the district (i.e., school psychologists, school social workers, school counselors and other mental health services providers by licensure type).

<table>
<thead>
<tr>
<th>Professionals</th>
<th>Number of Staff</th>
<th>CURRENT RATIO Staff to Student</th>
<th>Recommended Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Assistance Program</td>
<td>2</td>
<td>1 to 17,500</td>
<td>1 to 5000</td>
</tr>
<tr>
<td>School Counselors (Guidance Counselors)</td>
<td>450</td>
<td>1 to 524</td>
<td>1 to 250</td>
</tr>
<tr>
<td>ESE (Exceptional Student Education) Counselors</td>
<td>44</td>
<td>1 to 795</td>
<td>Based on student need, per IDEA</td>
</tr>
<tr>
<td>School Psychologists</td>
<td>120</td>
<td>1 to 2,262</td>
<td>1 to 500</td>
</tr>
<tr>
<td>Family Therapists</td>
<td>47</td>
<td>1 to 5,777</td>
<td>1 to 250</td>
</tr>
<tr>
<td>School Social Workers</td>
<td>136</td>
<td>1 to 1,196</td>
<td>1 to 250</td>
</tr>
<tr>
<td>Health Services (Nurses)</td>
<td>23</td>
<td>1 to 3,884</td>
<td>1 to 750</td>
</tr>
</tbody>
</table>

19. Includes system for tracking the number of students at high risk for mental health or co-occurring substance abuse disorders who received mental health screenings or assessments; number of students referred to school-based mental health services providers; number of students referred to community-based mental health services providers; number of students who received school-based interventions, services or assistance; and number of students who received community-based interventions, services or assistance.

- **Family Counseling Program**: Student demographic information is entered into a local database and the total number of referrals is reported annually.
- **School Social Work Program**: Student referrals are documented in the Behavior and Academic Support Intervention Services database (BASIS). The BASIS database also includes the number and types of interventions provided per student.
- **Psychological Services**: For a psychoeducational evaluation, referrals are created in BASIS and sent into the district office to be opened and assigned to a school psychologist. The database includes types of referrals, consent received dates, and evaluation completion dates. When a student is referred to a school psychologist for mental health counseling, the services are documented by the individual practitioner in Accellify. This includes student names, type of services provided, frequency/duration, and date/time of service.
• **Exceptional Student Education Counseling**: When it is determined through data collection (i.e. observations, prior interventions) that a student who has an IEP may benefit from counseling, then the IEP team convenes to determine if the service is needed. The counseling is then added as a related service to the IEP and documented in Accelify as it occurs.

• **School Counseling (Guidance)**: Formal and informal referrals for school counseling services are made by staff, students, or stakeholders via school-based systems. Interventions are documented in the student information system based upon the service delivery model and American School Counselor Association (ASCA) standards.

• **Nursing (Student Health)**: Students with chronic health conditions requiring counseling services are referred to the school social worker. The total number of referrals are entered on a Monthly Summary Log and reported to Florida Department of Health.

• **Community Providers**: Referrals through BASIS to community providers can be tracked to identify the number of referrals and status of the referral.