Hardee District Schools

Mental Health Assistance Allocation Plan
2018-2019

Tier 1 Who: All Students
School-wide Positive Behavior Programs

School-wide mental/behavioral health curriculum (evidence-based curriculum)
- Second Steps
- Cloud 9
- Child Safety Matters
- Teen Safety Matters
- Lauren’s Kids
- KidSmartz
- CyberSafety
- Bullying (Awareness) Education/Consequences
- Know the Law
- Safety Assessment & Intervention
- D.A.R.E.

- Drug Free Hardee
- Red Ribbon Week
- EWS in place at all schools
- Elements- attendance, grades, referrals, suspensions, student/peer identified indicators
- Universal Screener- Teacher/Peer nomination form with progress monitoring
- Staff training- administrators, teachers/staff, students, parents

**Tier 2 Who: Students identified from screening process**
- Small group counseling (evidence-based curriculum) focused on the students with needs indicated by data such as EWS, academic, staff/parent reports, climate surveys (goal is to promote self efficacy)
- Curriculum:
  - Ripple Effects
- Check in and check out
- Behavior Intervention Plan and/or Behavior Contract
- Check and Connect (Hardee Junior High)
- Referral system to outside agencies
- Progress Monitoring process for outside providers to share tracking data and monitoring information
- Universal Referral of System Care

**Tier 3 Who: Students identified from screening or students who need more intense**
intervention (have been referred to counseling and/or crisis intervention, have moved into district with high level of support)

- Threat assessment
- School social worker/counselor follow up after every threat assessment
- Functional Behavior Assessment to BIP or Behavior Contract
- Safety plans
  - for students coming back into school after the Baker Act was instituted
- School counselor to conduct face-to-face follow up with all threat assessment/crisis students the following day
- Referral system to outside agencies
- Progress Monitoring process for outside providers to share tracking data and monitoring information
- Substance abuse interventions by community providers are offered or supplied to at-risk or who have received disciplinary referrals based on drug and alcohol abuse

Focuses on delivering evidence-based mental health services.

- **What awareness prevention efforts are provided that address mental health issues at tier one?**
  
  - **Mental Health Issues:**

  *The Hardee County School District offers curriculums that facilitate positive mental health. These curriculums are:*

  - **Second Steps** is an elementary program which focuses on healthy social and emotional learning, bullying prevention, and child protection. It integrates social emotional learning into the classroom.
  - **Cloud 9** is an elementary program designed for character building and self efficacy traits.
  - **Child Safety Matters** is a research-based curriculum for elementary students. It teaches students to prevent, recognize and respond appropriately to bullying/cyberbullying, all types of child abuse, digital abuse and other digital dangers.
  - **Teen Safety Matters** is a comprehensive, research based program for middle school students to prevent, recognize, and respond appropriately to bullying, cyberbullying, all types of child abuse, relationship abuse, human trafficking, digital abuse, and other digital dangers.
  - **Lauren’s Kids** is a sexual abuse prevention curriculum through education and awareness for all grade levels.
  - **KidSmartz** is a child safety program with abduction prevention lessons for elementary students that teaches about personal safety. Its premise is that all strangers can be potentially dangerous.
  - **Cyber Safety/Netsmartz** is a curriculum for elementary age students. It introduces the children
to basic internet safety with the goals of safety and identification of potential dangers.

■ Bullying (Awareness): Teaching students to recognize different types of bullying and ways to prevent bullying.

■ Know the Law teaches high school students common offenses committed by youth on a regular basis such as sexting, traffic law violations, narcotics, computer crimes, and property crimes.

■ Safety Assessment & Intervention is a program offered by Sandy Hook Promise. The threat assessment team of each school in the district (to include the principal, assistant principal, school counselor, a teacher, dean, and SRO) will be trained on how to identify, assess, and respond to threats of violence or at-risk behavior. This is designed to be a prevention program. The school staff will be trained, who will then educate the students.

○ Substance Abuse Issues:

The Hardee County School District offers curriculums/ initiatives that are designed to address and prevent substance abuse. These curriculums are:

■ Drug Abuse Resistance Education (D.A.R.E.) is a substance abuse prevention program taught by the Sheriff’s Department/SRO to an identified grade level at the elementary schools.

■ Drug Free Hardee provides education based on community needs for middle school students to address the negative effects that substance abuse and other destructive decisions have on the health and wellness of an individual.

■ Red Ribbon Week utilizes drug prevention activities to educate youth to stay drug free and healthy.

Early Warning System (EWS) is in place at all schools in the district. It monitors the elements of attendance, grades, referrals, suspensions and other student/peer identified indicators such as individual plans and monitoring that has been initiated.

■ Small group counseling for identified at-risk students through Tri-County.

■ Big Brother/Big Sister Mentor Program

■ Mental Health Counseling for identified at-risk students.

Universal Screener - This will be a teacher/peer nomination form used to help teachers and peers nominate students based on the prevalence of both externalizing and internalizing behaviors. The form will be available for all students, however, the district will adopt a triage approach where the students with the highest scores will be nominated for immediate tier two or tier three supports. This nomination process will happen up to three times per school year. The school based teachers and school counselor(s) will nominate the students and school social worker will coordinate interventions.

Staff Training - The entire district will have Mental Health First Aid trainers in place at all schools. These trainers will be trained and will oversee the training of school staff on identifying
students in crisis and/or mental distress. When identified, these students will receive immediate intervention. School staff will also be trained by mental health professionals employed at the district level on crisis and threat assessment policies and procedures.

Parent Training Component - The school social worker will oversee parent trainings on recognizing warning signs of students in crisis and/or mental distress.

- **What evidenced based targeted mental health interventions are available to address mental health needs at tier two?**

  - After students are nominated by the Universal Screener, small group counseling groups will be facilitated by the school counselor, school psychologist, school social worker, the primary care provider, and/or outside contracted agencies (i.e., contracted Mental Health counselor, Peace River Center, Tri-County, New Horizons, Youth and Family Alternatives, Heartland Behavioral Health Services)

  - For small groups facilitated by the outside agencies, tracking data and monitoring information will be provided to help the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and negative discipline occurrences.

  - In addition to the results from the Universal Screener, students will be nominated for tier two small group counseling groups from data collected from the EWS, academic records, staff and parent reports, and school climate surveys.

  - Students will be asked to self-monitor through the small group process. This will help build awareness and self-efficacy.

  - Ripple Effects is a learner-directed, trauma-informed curriculum that encourages and facilitates individualized social-emotional learning through computer-based module learning. The school administration and school social workers and/or school counselors can monitor the student’s needs based on the modules chosen for learning and the student performance within those modules. Students nominated from the Universal Screening tool can be motivated by the tools incorporated in this curriculum.

  - A check-in and check-out system will be set up for students recognized as needing tier two intervention. These students will “check in” daily with a specified teacher, school counselor, dean, and/or administrator upon arrival to school, set goals for the day, and will “check out” with the staff member before leaving for the day. At check out, students will review goals and discuss barriers to attaining those goals, and celebrate success.

  - Students in the tier two level may be provided a behavior intervention plan or a behavior contract as determined by the MTSS Team.

  - Referral to outside counseling agencies is determined for the student on a case by case basis.

  - The school social worker will track and maintain the Universal Referral of System of Care referrals received from outside sources such as primary care providers and law enforcement.
These students will be placed in tier interventions such as a small group, check-in check-out, behavior contracts, Ripple Effects, and/or with contracted outside agencies for counseling services.

- **What intensive evidenced based targeted mental health interventions are available to address mental health needs at tier three?**
  - Students making a threat to self or others will be referred for a school-based threat assessment. The team assesses the risk and determines immediate action for the student. The student’s parent or guardian is contacted immediately and made aware of the situation and threat assessment outcome.
  - Following any threat assessment, unless the Baker Act was instituted, the school counselor performs a face to face follow up with the crisis student the following day.
  - For students in which the Baker Act was instituted, school safety plans will be developed before the student returns to school.
  - Substance abuse interventions are offered or supplied to at-risk students or to students who have received disciplinary referrals based on drug and alcohol abuse by community providers.
  - Students in tier three will be referred based upon individual needs to outside agencies for mental health counseling, psychiatric care, and/or targeted case management. For progress monitoring purposes, the outside agencies will provide tracking data and monitoring information to help the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and negative discipline occurrences.

**Includes description of supports that addresses mental health needs (assessment, diagnosis, intervention, treatment, and recovery).**

- **Does your plan include mental health screening and assessment procedures for determining which students need mental health interventions and treatment?**
  - All students (tier one) will be eligible for the Universal Screening tool. Upon evaluation of the screening (triage) and nomination, the students will be placed in either tier two or tier three for further intervention and treatment. In addition to the results from the Universal Screener, students will be nominated for tier two and/or tier three intervention (as mentioned above) from data collected from the EWS, academic records, staff, peer and/or parent reports, and school climate surveys. Recommendations from community health services will also be acknowledged through the Universal Referral of System of Care. When this referral is received, the school social worker will facilitate the tier two or three interventions that will best fit the individual needs of the student.

- **Does your plan include coordination and supports for students who received intensive**
community health services?

○ Each student referred out for community health services will be monitored and tracked by the school social worker. Community agency representatives sign in to each school in which they visit for client interaction. These logs are kept and reviewed by school staff. The school counselor and the school social worker will keep a log of students referred to agencies by the school district. In addition, a log will be kept of students who are referred to the district for services from community health partners from the Universal Referral of System of Care. When students are referred to an outside agency/community health partner, treatment plans and dates and times of students seen will be provided by the agency and given to the school counselor of each school. This information will be placed in the student’s MTSS file. This information will also be duplicated by the agency and given to the district’s school social worker.

○ The school social worker will keep a log of each student referred to counseling. This referral is sent to the school counselor. The school counselor and school social worker will communicate monthly about the progress of the student’s counseling. The school social worker will communicate monthly with the community mental health partners. For progress monitoring purposes, the outside agencies will provide tracking data and monitoring information to help the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and negative discipline occurrences, as well as monitoring mental health progress. The school social worker will coordinate interventions from the student’s treatment plan created by the community health agency with classroom interventions for teachers of the student.

○ In situations where the Baker Act is instituted, the school social worker will attempt to remain in contact with the receiving facility with the goal of receiving release of information forms from the parent/guardian to receive medical and mental health records. A school safety plan will be created before the student returns.

Identifies evidence-based mental health services for students with one or more co-occurring mental health or substance abuse diagnoses and students at risk of such diagnosis.

● Does your plan include a process for identifying and delivering evidence-based mental health interventions?

● Does your plan include a process for identifying and delivering evidence-based substance abuse interventions?

○ All students (tier one) will be eligible for the Universal Screening tool. Upon evaluation of the screening (triage) and nomination, the students will be placed in either tier two or tier three for further intervention and treatment. In addition to the results from the Universal Screener,
students will be nominated for tier two and/or tier three intervention (as mentioned above) from data collected from the EWS, academic records, staff, peer and/or parent reports, and school climate surveys. Recommendations from community health services will also be acknowledged through the Universal Referral of System of Care. When this referral is received, school social worker will facilitate the tier two or three interventions that will best fit the individual needs of the student.

**Describes the collaborative partnerships with community providers and agencies.**

- Does your plan include detailed procedures for referring students to school-based mental health interventions and community-based mental health providers for treatment?
- Does your plan include detailed procedures for referring students to community-based substance abuse treatment?

○ All students (tier one) will be eligible for the Universal Screening tool. Upon evaluation of the screening (triage) and nomination, the students will be placed in either tier two or tier three for further intervention and treatment. In addition to the results from the Universal Screenner, students will be nominated for tier two and/or tier three intervention (as mentioned above) from data collected from the EWS, academic records, staff, peer and/or parent reports, and school climate surveys. Recommendations from community health services will also be acknowledged through the Universal Referral of System of Care. When this referral is received, school and/or district-based mental health professionals will facilitate the tier two or three interventions that will best fit the individual needs of the student.

○ Each student referred out for community health services will be monitored and tracked by the school district. Community agency representatives sign in to each school in which they visit for client interaction. These logs are kept and reviewed by school staff. The school social worker will keep a log of students referred to agencies by the school district. In addition, a log will be kept on students who are referred to the district for services from community health partners from the Universal Referral of System of Care. When students are referred to an outside agency/community health partner, treatment plans and dates and times of students seen will be provided by the agency and given to the MTSS team leader of each school. This information will be placed in the student’s MTSS file. This information will also be duplicated by the agency and given to the district’s school social worker.

○ The school social worker will keep a log of each student referred to counseling. The school counselor and school social worker will communicate monthly about the progress of the student’s counseling. The school social worker will communicate monthly with the community mental health partners. For monitoring purposes, the outside agencies will provide tracking data and monitoring information to help the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and
negative discipline occurrences as well as monitoring mental health progress. The school social worker will coordinate interventions from the student’s treatment plan created by the community health agency with classroom interventions for teachers of the student.

○ In situations where the Baker Act is instituted on a student, the school social worker will attempt to remain in contact with the receiving facility with the goal of receiving release of information forms from the parent/guardian to receive medical and mental health records. A school safety plan will be developed before the student returns to school.

**Does your plan include a process to coordinate mental health services with a student’s primary care provider or other mental health providers?**

● **Does your plan include procedures for information sharing?**

○ The school social worker will track and maintain the Universal Referral of System of Care referrals received from outside sources such as primary care providers and law enforcement. These students will be placed in tier interventions such as a small group, check-in check-out, behavior contracts, Ripple Effects, and/or with contracted outside agencies for counseling services.

○ Parental consent forms will be attached to the Universal Referral of System of Care referrals. In this way, the school district can directly contact and collaborate with the student’s primary care provider and/or other mental health providers. School based interventions as well as physician and therapist directed interventions will be combined and used in tandem to facilitate positive student healing and improvement.

○ The school social worker will keep a log of each student referred for counseling. This referral is sent to the school counselor. The school counselor and school social worker will communicate monthly about the progress of the student’s counseling. The school social worker will communicate monthly with the community mental health partners. For monitoring purposes, the outside agencies will provide tracking data and monitoring information to help the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and negative discipline occurrences as well as monitoring mental health progress. The school social worker will coordinate interventions from the student’s treatment plan created by the community health agency with classroom interventions for teachers of the student.

○ In situations where the Baker Act is instituted on a student, the school social worker will attempt to remain in contact with the receiving facility with the goal of receiving release of information forms from the parent/guardian to receive medical and mental health records. A safety plan will be developed before the student returns to school.

**Describe how you will document how many students are referred for services**
and how many students receive school based and community services.

○ Each student referred out for community health services will be monitored and tracked by the school district. Community agency representatives sign in to each school in which they visit for client interaction. These logs are kept and reviewed by school staff. The school social worker will keep a log of students referred to agencies by the school district. In addition, a log will be kept of students who are referred to the district for services from community health partners from the Universal Referral of System of Care. When students are referred to an outside agency/community health partner, treatment plans and dates and times of students seen will be provided by the agency and given to the school counselor of each school. This information will be placed in the student’s MTSS file. This information will also be duplicated by the agency and given to the district’s school social worker.

○ The school social worker will keep a log of each student referred to counseling. This referral is sent to the school counselor. The crisis counselor and school social worker will communicate monthly about the progress of the student’s counseling. The school social worker will communicate monthly with the community mental health partners. For progress monitoring purposes, the outside agencies will provide tracking data and monitoring information to the district track the targeted student’s growth (or lack thereof) in attendance, positive grade trending, and decreased office discipline referrals and negative discipline occurrences as well as monitoring mental health progress. The school social worker will coordinate interventions from the student’s treatment plan created by the community health agency with classroom interventions for teachers of the student.

○ Students in tier three (and sometimes tier two on a case by case basis) will be referred to outside agencies for mental health counseling, psychiatric care, and/or targeted case management.

● Describe other outcome data that will be used to evaluate effectiveness of services (e.g., Early Warning System indicators, Youth Risk Behavior Survey data, school climate/student engagement data).

○ Early warning system indicators

○ School climate survey data

○ Universal screener (teacher/peer nomination forms)

○ Module test scores from curriculum such as Ripple Effects

○ Progress monitoring process for outside providers to share tracking data and monitoring information

○ Threat assessment outcomes

○ Check-in, check-out data
Behavior Intervention notes and plans
Teacher/administrative/guidance data from meetings with students and parents

Program Implementation and Outcomes:

Identifies number and credentials of mental health services providers employed by the district.

- Two state licensed social workers

Identifies number and credentials of mental health service providers contracted by the district.

- One contracted LMHC

Expenditures:

Documents 90% of expenditures allocated were allocated to direct mental health services or coordination of such services with primary care and mental health providers.

- Budget

Includes assurances that Mental Health Assistance Allocation does not supplant other funding sources or increase salaries or provide staff bonuses.

- Hardee District Schools will continue to employ three school psychologists who counsel students either individually and/or in a group setting. Contracted mental health counseling will be maintained for students with identified needs based on IEP goals and/or other at-risk factors. Contracted behavioral analysts will remain in place for identified students requiring more intensive supports. Thus, these services will continue to be funded through IDEA.

Describes how district will maximize use of other sources of funding to
provide school-based mental health services.
○ Medicaid reimbursement will be utilized as appropriate for services.
○ SPDG: Check & Connect Mentor Program at HJH
○ Title IV: resource to provide additional curriculum and support for safe, well-rounded students
○ Title 1, Part A, Title 1 Part C, Title III: Federal Programs to provide funding for parent-family engagement activities