SEMINOLE COUNTY PUBLIC SCHOOLS
MENTAL HEALTH FRAMEWORK

FEW
- Individualized Professional Development
- Re-entry Planning
- Individual and Group Interventions
- Behavior Intervention Plans
- Community Based Mental Health Supports including CAT Team, Crisis Planning, and Wraparound
- Intensified Family Partnership and Communication

SOME
- Early identification and Referrals
- Targeted Professional Development
- Individual and Group Interventions
- Community Based Mental Health Supports
- Monitoring of Intervention Fidelity and Student Progress

ALL
- Consistent Implementation of District Policies
- Positive School Climate
- Social Emotional Learning
- Positive Behavior Supports
- Fair and Positive Discipline
- Crisis Response Team
- Universal Prevention
- Mental Health Stigma Reduction
- Trauma Informed/Culturally Sensitive Practices
- Promoting self-care of staff

FOUNDING PRINCIPLES
1. SCPS’ strategic plan and commitment to “Conditions for Learning”
2. Importance of Staff Development to allow for strong universal implementation
3. Collaboration between families, schools, and community to foster genuine relationships with all stakeholders
4. A commitment to Evidenced Based Practices
5. A commitment to a safe and healthy learning environment throughout the district
Seminole County Public Schools (SCPS) System Initiative D: Conditions for Learning in the Strategic Plan outlines all the conditions, when optimal, that will benefit student learning. Condition 2 addresses Student Wellness, which encompasses students’ emotional and mental health well-being. Mental and emotional health falls on a continuum from wellness to severe illness; this plan is developed in order to provide a multi-tiered approach to mental health services.

The goal of SCPS’s mental health plan is to expand on the multi-tiered system of support currently in place for mental and social-emotional health and improve the quality and accessibility of mental health services through direct services and/or referral to outside providers. Senate Bill 7030 (SB 7030) requires all school districts to submit board approved plans to the commissioner of education by August 1st of each fiscal year.

Seminole County Public Schools wants to ensure we are listening to student voice in the development of our mental health plan. During the 2018-2019 school year, SCPS hosted a school board workgroup on mental health with representatives from each high school’s student government. The feedback from this workgroup was used to identify a few key areas of focus for school mental health support. These items include:

- Increased student education on mental health and suicide prevention in order to de-stigmatize mental illness and increase awareness of students in need. SCPS is collaborating with NAMI to bring their Ending the Silence presentation to all SCPS high schools with future goals to expand this to include all middle schools.
- Establish Mental Wellness Activities at four target high schools.
- Expanding parent knowledge of mental illness by providing Youth Mental Health First Aid trainings to Parent Teacher Association groups.
- Increased awareness of school mental health supports and mental illness in order to reduce stigma through student-led videos on the morning announcements and the use of the SCPS remind system.
- Provide staff training on staff self-care, trauma-informed support, and cultural competence in working with diverse student populations including all races, religions, ethnicities, and LGBTQ+ students.
- Educate key personnel on all high school campuses on how to create safe spaces for diverse student populations including LGBTQ+ students.
- Provide student service led activities on campus to reduce bullying.
  Collaborate with student government on student-led initiatives related to reducing the stigma of mental health and using the “see something, say something” system.

The following multi-tiered system of support initiatives for mental health and social-emotional initiatives aligned with SB 7030 and are currently in place to support this effort.

Tier I: Universal Strategies-focus on promoting mental and social-emotional health and development of all students.
• **Coordinator for School Counseling Services:** The Coordinator for School Counseling Services provides support to the Certified School Counselors in the implementation of Strategic Plan Initiative D: Conditions for Learning through the coordination of professional development in the area of mental health and social-emotional well-being.

• **Certified School Counselor:** One hundred thirty-one school-based certified school counselors are assigned to schools based on student numbers and learning community need. The training school counselors receive in the area of mental health cover topics such as suicide prevention, Youth Mental Health First Aid (YMHFA), and Question Persuade Refer/Treat (QPR/QPRT). The school counselor provides tier one services working proactively with students through social emotional learning classroom lessons and hosting workshops for parents and students addressing topics such as but not limited to adjustment, stress, and help seeking attitudes. In addition, school counselors complete the enrollment residency form to determine family physical needs and make referrals to Families In Need (FIN) and the school social worker.

• **School Board Nurses:** SCPS currently employs twenty school board nurses. Each school in the district is assigned school board nursing services based on need. They provide medication administration training to staff and are responsible for creating Individual Healthcare Plans (IHC).

• **Social Workers:** SCPS currently employs twenty-three school-based social workers. Each school in the district is assigned social work services 1-5 days a week based on need. The department utilizes a direct service delivery model to promote a connection between schools, families, and the community.

• **School Psychologists:** SCPS employs thirty School Psychologists strategically positioned in schools to promote mental and behavioral wellness and prevention of mental and behavioral health problems by consulting with school members and working directly with students.

• **Behavior Support Team:** SCPS utilizes a Behavior Support Team consisting of four School Psychologists, four Behavior Analysts, and four Teachers on Assignment that provides in depth training and clinical case consultation across all schools in the district. The team provides systematic training support in Trauma Informed Care, Emotional Self-Regulation, Classroom Management, Positive Reinforcement Strategies, Mindfulness, and Self-Care. In addition, they support in the creation of Social/Emotional Learning Curriculum.

• **Licensed Mental Health Providers (LMHC/LCSW/LMFT):** SCPS employs fifteen licensed mental health providers to support elementary and secondary schools, including one licensed mental health provider to support alternative school sites and justice involved youth and one supporting initiatives related to enhanced staff training and procedures.

• **QPRT Suicide Risk Assessment and Training:** The QPRT Suicide Risk Assessment and Training Course is designed for all primary healthcare professionals, counselors, social workers, psychiatrists, psychologists, substance abuse treatment providers, clinical pastoral counselors and licensed and certified professionals who evaluate and treat suicidal persons. Seminole County has sixteen QPRT trained individuals in the district.
Suicide Prevention Training: During the 2018-2019 school year, the third quarter staff training included a 2-hour online training on suicide prevention. During the 2019-2020 school year, part of onboarding of new staff will require the suicide prevention training.

Youth Mental Health First Aid (YMHFA): SCPS currently has nine staff members trained as YMHFA trainers, as well as two additional trainers employed by SCPS charter schools.

Youth Mental Health Awareness training provided by DOE: First quarter of the 2019-2020 school year, all school staff will complete the 60-minute online module and an in-person guided discussion.

SCPS Crisis Team: The primary purpose of the ESSS Crisis Response Team (CRT) is to offer support and assistance to students, families, and staff when a crisis occurs. The CRT provides both direct and indirect emotional first aid intervention services. The CRT coordinates additional follow up supports depending on the nature of the crisis.

Parent/Family Education Nights: The primary purposes of parent nights are to educate parents about bullying (physical, verbal and cyber), social media, sexting, sex trafficking and other issues negatively affecting student physical, emotional and mental health.

Social Emotional Learning: SCPS has a Social Emotional Learning (SEL) Teacher on Assignment (TOA) who supports the implementation of SEL curriculum district-wide through staff training and education. SCPS has identified preferred curriculum at the elementary, middle, and high school levels. These programs are available to all SCPS schools.

Tier 2: Selected, brief strategies to support students at risk of or with mild mental health challenges. The below staff provide direct and indirect services to address emerging or mild mental and behavioral health problems and to prevent risky behaviors.

Certified School Counselor: School counselors address student mental health concerns through a process of referral and identification generated by school administrators, faculty and staff, self/peer, parents, guardians, or a community-based care provider. When a referral is made, school counselors collect quantitative data (e.g. attendance, grades, and/or number of referrals) and qualitative data (e.g. student interview or teacher and counselor observations) and shares the information with a community provider when the parent has signed permission.

School Board Nurses: Services include acting as a liaison between home, school, and medical providers when mental health challenges may be emerging.

Social Workers: Services include classroom observations, collaborative intervention planning and implementation, psychoeducation skills groups, services, tier 2 counseling services, and assessment of family needs.

School Psychologists: Services include facilitating skills group counseling (social skills, anger management, stress reduction, etc.), classroom observations, assessment and interpretation of behavioral data to monitor response to interventions, consulting with school-based teams, mentoring of students.
• **Behavior Support Team:** Services include classroom observations, specific training of research-based behavioral strategies, assessment and interpretation of behavioral data, modeling of instructional techniques, parent training on targeted behavior skills, and consulting with school-based teams.

• **Community Mental Health Supports:** SCPS will continue to collaborate with local collaborative agreements with local community mental health agencies to provide school-based counseling services in SCPS schools, as well as office and home-based services. The agencies listed below are grant funded and provide individual and group therapy on school campuses at no cost to the district.

**Programs:**

New Horizons: The New Horizons Program is a middle and high school-based prevention program that helps to diminish and correct the antisocial behaviors. New Horizons gives students the skills and positive feedback they require to become productive members of their school and community.

ALPHA: Based out of select Seminole County Public Elementary Title One Schools, ALPHA reaches students (ages 9-12) who present behavior such as disruptive classroom behavior, low self-esteem, anger issues, peer pressure or coping with grief. Students in the ALPHA Program experience academic and social gains through peer interaction, positive school experiences and preventive counseling.

UCF Counseling Practicum: UCF counseling practicum students work in conjunction with UCF supervisors and school-based personnel at targeted schools to provide SCPS students and families mental health services. These appointments are held on site during after school hours.

SCPS has cooperative agreements with local community providers serving a variety of age groups and special populations. SCPS has an established procedure for approving new agencies as needed.

• **SEDNET:** Brevard and Seminole Counties facilitate and coordinate mental health services for youth with or at-risk of emotional behavioral disabilities.

Tier 3: Intensive, ongoing strategies to support those with significant mental health needs.

The below staff provide direct and indirect services to address significant mental and behavioral health problems.

• **District Mental Health Counselors:** Services include providing individual counseling services for mental health and substance abuse for the most intensive students, collaboration with outside mental health and substance abuse providers to ensure students engaged in necessary outside supports maintain these supports and school connection, support schools with re-entry planning process for students following an in-patient admission, risk assessments, and participation in school threat assessment teams.
• **Social Workers:** Services include individual counseling services, risk assessments, collaboration with outside mental health and substance abuse treatment providers, and consultation with parents.

• **School Psychologists:** Services include individual counseling services, development of Functional Behavior Assessments (FBA) and individualized Behavior Intervention Plans (BIP), and psychological assessment.

• **Behavior Support Team:** Services include development of Functional Behavior Assessments (FBA) and individualized Behavior Intervention Plans (BIP), in-class support for high magnitude behavior, staff training for implementation of individual strategies related to the BIP, collaboration with outside mental health providers, and consultation with parents.

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

All SCPS school personnel will receive youth mental health awareness and assistance training to help school personnel understand the signs and symptoms of mental health disturbance, illness, and substance abuse. SCPS will have all staff trained using Youth Mental Health Awareness training with Kognito during the first quarter and continue efforts to train all staff in Youth Mental Health First Aid (YMHFA). SCPS has revised the Mental Health/Substance Abuse Services – Decision Tree for Services (APPENDIX A) to be used by certified school counselors, district mental health counselors, social workers, school psychologists and/or school board nurses when determining next steps for a student. The decision tree will assist school district personnel in determining the best level of support for the student.

For all school mental health supports and active cases provided by the district, a psychosocial assessment will be completed, if deemed appropriate, to identify treatment needs and appropriate interventions in order to ensure a recovery-based model of care. When a referral to an outside provider is more appropriate, the outside provider is responsible for a psychosocial assessment in order to diagnose, identify treatment needs and appropriate interventions in order to ensure a recovery-based model of care. Students that are referred to or are already engaged in outside services that require tier 3 support will have scheduled check-ins.

Collaborative partnerships with community mental health professionals will be achieved through monthly meetings with The Children's Cabinet of Seminole County; quarterly meetings with Seminole System of Care (SSOC), Seminole County Opioid Task-Force, and Police-Mental Health Collaboration (PMHC) and Bureau of Justice Assistance (BJA); and bi-annual meetings with community and mental health partners.

School board counselors, nurses, social workers, psychologists and District Mental Health Providers will coordinate the provision of mental health services with a student’s other mental health providers to include case manager, psychiatrist, therapist, and other mental health professionals when appropriate. In order to facilitate this collaboration, the school will ensure that they offer the parent/guardian the opportunity to sign Parental Permission for Release of Information or Request for Review of Student Information, Form 707 (APPENDIX
Furthermore, community mental health partners will be encouraged to have a release signed for SCPS students as part of their intake process. This will allow for communication that meets HIPPA AND FERPA guidelines related to confidentiality. Coordination efforts will include case consultation, additional needs assessments, recommendations for school or home supports, and referral for additional services.

Program Implementation and Outcomes (s.1011.62(16)(d), F.S.)

The following process has been put into place in order to collect data regarding the number of students screened/assessed, number of students referred for internal mental health services with the District Mental Health Professional, and number of students referred to an outside mental health provider:

- School counselors, social workers, and district mental health professionals complete the “Seminole County Public Schools Consent to Refer and Referral Form” when referring to an outside mental health agency. These forms are submitted to the Program Specialist for Mental Health Services who coordinates with the data entry personnel for data collection and reporting. The school staff making the initial referral will be responsible for reporting the outcome of the referral and notification to the Program Specialist for Mental Health Services.
- School counselors, school board nurses, and school psychologists complete a 158(e) Referral form (APPENDIX C) to refer students to the School Social Worker when screening, consent, and intake are necessary. A copy of the 158(e) Referral form will be submitted to the Program Specialist for Mental Health Services who will then coordinate with the data entry personnel for entry of this information.
- SCPS social workers provide direct services to students referred by certified school counselors. For students exhibiting emerging or identified mental health issues, the social worker receives referrals from the school counselor for screening and intake of students. The school social worker makes contact with a parent to include their concerns and observations. They provide a combination of direct service support and referrals to district and community mental health providers to meet the unique needs of each student based on the assessment outcomes and collaboration with parents. They communicate outcomes and progress with school counselors, district mental health professionals, school psychologists, and the program specialist. They support the reporting process as outlined in SB 7030.
- School-based personnel (school social workers and district mental health professionals) who complete tier 2 and tier 3 mental health screenings (examples of such screenings listed below) provide a log of these screenings to the Program Specialist for Mental Health Services for coordination of data entry by the clerical personnel.
- Students identified by the threat assessment team as at risk for a mental health disorders will be screened and provided the opportunity for mental health services within 15 days (S.B. 7030).
- The Program Specialist for Mental Health Services is responsible for maintaining records of the number and credentials of mental health providers employed by the district.
• The Program Specialist for Mental Health Services is responsible for maintaining records of the number and credentials of mental health providers contracted by the district.
• S.B. 7030 three-day requirement for a school to transfer verified reports of a student with a serious or recurrent behavior patterns (includes threat assessments, intervention services, and psychological evaluations/treatment plans/progress notes) to a receiving school will be documented, tracked, and released by the District Mental Health Program Specialist and School Safety and Security Director.

**Tier 2 and Tier 3 Mental Health Screeners**

SCPS social workers and district mental health counselors will use the following screeners to guide treatment with students when appropriate:

<table>
<thead>
<tr>
<th>Screen</th>
<th>Screening Area</th>
<th>Ages</th>
<th>Length to complete</th>
<th>Completed By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revised Child Anxiety and Depression Scale (RCADS)</td>
<td>Anxiety</td>
<td>Grades 3-12</td>
<td>5-10 minutes</td>
<td>Student Caregiver</td>
</tr>
<tr>
<td></td>
<td>Depression/mood</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Penn State Worry Questionnaire for Children</td>
<td>Anxiety</td>
<td>Ages 7-17</td>
<td>5 minutes</td>
<td>Student</td>
</tr>
<tr>
<td>Patient Health Questionnaire- 9 (PHQ-9)</td>
<td>Depression/mood</td>
<td>Ages 11-17</td>
<td>5 minutes</td>
<td>Student</td>
</tr>
<tr>
<td></td>
<td>Suicide</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child PTSD Symptom Checklist</td>
<td>Trauma</td>
<td>Ages 8-18</td>
<td>10-20 minutes</td>
<td>Student Clinician</td>
</tr>
<tr>
<td>Generalized Anxiety Disorder-7 (GAD-7)</td>
<td>Anxiety</td>
<td>Ages 11-17</td>
<td>5 minutes</td>
<td>Student</td>
</tr>
<tr>
<td></td>
<td>Trauma</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>CRAFFT 2.0</td>
<td>Substance Use</td>
<td>Ages 12-18</td>
<td>5 minutes</td>
<td>Student Clinician</td>
</tr>
<tr>
<td>Brief Problem Checklist (BFP)</td>
<td>Anxiety</td>
<td>Ages 7-18</td>
<td>2 minutes</td>
<td>Student Caregiver</td>
</tr>
<tr>
<td></td>
<td>Depression</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Disruptive Behavior</td>
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<tr>
<td>Strengths and Difficulties Questionnaire (SDQ)</td>
<td>Anxiety</td>
<td>Ages 4-17</td>
<td>5-10 Minutes</td>
<td>Student Caregiver</td>
</tr>
<tr>
<td></td>
<td>Depression/Mood</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Disruptive Behavior</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Global Functioning</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Hyperactivity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social Skills</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Fourteen **district mental health professionals** [Licensed Mental Health Counselor (LMHC), Licensed Clinical Social Worker (LCSW), and Licensed Marriage and Family Therapist (LMFT)] will provide direct mental health, substance abuse, and co-occurring therapy to students at tier 3 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 district mental health professionals will be assigned to schools to coordinate tier 3 services with mental health agencies 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. SCPS will also designate one of the fourteen district mental health professionals as a lead for the division. The lead will be assigned schools and will have additional responsibilities related to coordinating with community partners to attend division meetings in order to provide trainings. One district mental health professional paid out of another funding source is responsible for coordinating district mental health training for school and district staff.

SCPS will continue to employee **four social workers** who will provide direct services to students referred by certified school counselors. These four social workers are in addition to the 23 employed by the district to assist with tier 1 and tier 2 services. The four social workers will assist in meeting the 1011.62(16)(b)(4) requirement to reduce the likelihood of at-risk students, especially our unaccompanied homeless youth and homeless minors, to develop social, emotional, or behavioral health problems depression, anxiety disorders, suicidal tendencies, or substance use disorders due to the additional trauma of homelessness in their lives. SCPS will also employ **two school psychologists** to assist in providing tier 2 interventions.

**Evidenced Based Practices provided by district licensed 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.
**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 Motivational Interviewing 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 four basic principles: express empathy; support self-efficacy; roll with resistance; and develop discrepancy. MI is beneficial for substance abuse and co-occurring disorders.

SCPS will set aside funds to **contract mental health services** from approved providers to cover additional mental health, substance abuse and co-occurring therapy services to SCPS students that providers cannot bill through Medicaid or other forms of insurance. These additional services would include supports for students during a crisis recovery event and treatment for intensive mental health issues, substance abuse, and eating disorders. Funds would be reimbursed to approved providers upon completion of a monthly service log being submitted with a request for payment.

SCPS employs one **Program Specialist for Mental Health Services** to coordinate the delivery of social emotional, mental health, and substance abuse services at all levels across the district. This individual supports mental health trainings for schools and provide clinical and administrative supervision for district licensed mental health professionals. The Program Specialist schedules biannual meetings with all approved mental health providers, coordinate mental health, and wrap around services as well as intervention, treatment and recovery outcomes. This individual is responsible for tracking referrals, outcomes and follow-up care. Additionally, this person coordinates services with primary care providers and evaluate policy and procedures that support the mental health services in the district. Data reporting related to SB 7030 will be reported by this individual to DOE beginning September of 2019.

SCPS will schedule quarterly multi-disciplinary meetings at each school to discuss mental health issues in the district and implementation processes and procedures. The multi-disciplinary team consists of certified school counselors, nurses, social workers, school psychologists, behavior support team staff and district licensed mental health providers.

SCPS hired one (1.0) **clerical positions** to facilitate the data entry as required by SB 7030 and 1011.62(b)(5)(d)(1-3). Beginning September 30, 2019, and annually thereafter, each school district is to submit a report to the Department of Education on program outcomes and expenditures for the previous fiscal year. This clerical position is to assist with maintaining a database of the number of students receiving screenings/assessments, referred to and receiving services by either school-based or community-based providers. Additionally, SB 7030 requires that procedures be in place documenting a student referred to a school-based or community-based mental health
services for mental health AND receiving the screening within 15 days of the referral. SCPS will meet statutory requirements by having a dedicated data entry person.

SCPS will coordinate with the District PTSA to provide Youth Mental Health First Aid Training for parents in order to educate and overcome the stigma associated with mental illness. We will also develop a two-hour universal training that educates about the continuum of mental health and early warning indicators associated with mental illness (attendance, behavior, academics).

Expenditures: **Allocated Amount $1,728,659.00**

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<tr>
<th>Position/Title</th>
<th>FTE</th>
<th>Funding - Direct Services</th>
<th>Indirect Mental Health Support</th>
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<td>District Mental Health Counselors (DMHC)</td>
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<tr>
<td>Lead DMHC supplement</td>
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<td>School-based Social Workers to work with all students, especially our homeless unaccompanied youth and homeless minors at the high school level.</td>
<td>4</td>
<td>$296,000</td>
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<tr>
<td>School psychologists</td>
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<tr>
<td>Mental Health Referrals to Community Providers</td>
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<tr>
<td>Clerical, Data Entry (12 months)</td>
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<td>Mental Health Training</td>
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<td>Proportionate Share to Galileo</td>
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<tr>
<td>Mental Health Training Materials</td>
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<td><strong>Total</strong></td>
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<td><strong>$1,509,008</strong></td>
<td><strong>$219,651</strong></td>
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</tbody>
</table>
APPENDIX A

Mental Health (MH)/Substance Abuse (SA) Services – Decision Tree for Services

Identification & Referral
School Admin.
School Staff
Self/Peer
Parent
Guardian
Community

Quick Intervention
Informal interview of student w/ data review

Full Intervention
Formal screening
Review of student data

No MH or SA risks identified

Minimal MH risks and No SA identified

MH and/or SA identified

Student referred by School Counselor to SSW for further screening, consent, and intake

Tier 1 services continue and are monitored by Tier 1 providers

Short-term Tier 2 intervention services provided by school-based team and monitored for progress

Student referred by School Counselor to On-Site/Off-Site Community-Based MH services for intake and consent

Tier 2 Services
Individual Intervention
Group Counseling
Classroom Observation
Case Management
Referral Services

Tier 2 Providers:
School Counselor
School Psychologist
School Social Worker
On-Site Community MH Provider

Tier 2/Tier 3 Services
Individual Counseling
Group Counseling
FBA/BIP
Case Management
Family Consultation
Referral Services

Tier 2/Tier 3 Providers:
School Psychologist
School Social Worker
Behavior Support Team
District Mental Health Professionals
On-Site Community MH Provider

Tier 3 Services
Individual Counseling
Group Counseling
Case Management
FBA/BIP
In Home Support
Reentry Support:
Recovery Group
Formal SA Assessment
Family Consultation
Refer to Treatment
Treatment Support

Tier 3 Providers:
School Psychologist
School Social Worker
Behavior Support Team
District Mental Health Professionals

Community Resources
Formal SA Assessment
Mental Health Providers/ Hospitals
Medical Care/ Primary Care Provider
Family Services
Parent Support/Training
Social & Health Services
Educational (Voc/College)
CAT Team/Wraparound

Rev: 6/11/2018
NAME OF STUDENT: ________________________________

DATE OF BIRTH: ____________________________ SCHOOL: ________________________________

DATE: ____________________________

I hereby grant permission for communication both oral and written, regarding the above named student which includes:

☐ 1. Psychological/Educational Reports (intellectual processing, projectives, academic abilities)
☐ 2. Educational data which may include standardized tests, daily grades, and report cards.
☐ 3. Present levels of subject area performance, adaptive and behavior scales, social history, and individual educational plans.
☐ 4. Other ________________________________

BETWEEN:
SEMINOLE COUNTY PUBLIC SCHOOLS - ATTENTION: ________________________________

SCHOOL NAME: ________________________________

ADDRESS: ________________________________

(StREET) (CITY) (STATE) (ZIP CODE)

(AREA CODE) (TELEPHONE) (AREA CODE) (FAX)

AND:
NAME OF AGENCY/PERSON: ________________________________

ADDRESS: ________________________________

(StREET) (CITY) (STATE) (ZIP CODE)

(AREA CODE) (TELEPHONE) (AREA CODE) (FAX)

It is understood that the above information will be maintained in confidence and only accessed by authorized school board personnel.

Authorized Signature/Date ________________________________

Relationship ________________________________

(Street) ________________________________

Home Telephone ________________________________

(City) (State) (Zip Code) ________________________________

If no telephone, please give a telephone number where you can be contacted.

THESE RECORDS MAY NOT BE RELEASED TO ANOTHER PARTY AND/OR AGENCY WITHOUT PRIOR APPROVAL OF THE PARENT/GUARDIAN AND/OR ADULT STUDENT.

SCPS Form 707(e) (Rev. 06/29/11)
### REFERRAL FORM

**Student:**

**Referral Date:**

**School:**

**Referred to:**

**Referred by:**

**Counselor:**

**Parent/Guardian:**

**Address:**

- Street
- Apt. #

- City
- Zip Code

**Student #:**

**510B/543 Date of Parent Signature:**

**DOB:**

**Grade:**

**Title:**

**Title:**

**Teacher:**

**Relationship:**

**Home Phone:**

**Work/Other Phone:**

**Signature:**

**Principal/Designee**

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**Exceptionality:**

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**All other active referrals:**

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**Referral Information:**

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<tr>
<th>Date</th>
<th>Action Taken and Results</th>
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**Date:**

**Signature:**

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**Further Action Needed?**

- [ ] Yes (If yes, attach new referral.)
- [ ] No

**DISTRIBUTION:**

- [ ] Referral Source (for file when completed)
- [ ] Nurse/Social Worker/Vision/OT/PT/Deaf - Hard-of-Hearing (for Pre-K Disabilities use only)
- [ ] Referral Source

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SCPS Form 158(e) (Rev. 07/07/16) SB