

# Hardee District Schools

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## Mental Health Assistance Allocation Plan 2019-2020

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

Students with behavioral, emotional or mental health needs are identified through a universal referral system in place for all school personnel (administrators, teachers, counselors, and other school staff), students, and parents. Additional screening will occur through the early warning system including (but not limited to) attendance, discipline, course performance and state assessment data. The school based problem-solving team, along with the social worker, will determine specific interventions based on the outcome of assessment(s)/evaluation(s) and the individual needs of the student. Various levels of intervention (universal, targeted, intensive) are available in the school for all students. Individual and/or group counseling will be provided to address the student's mental health needs identified through assessment/referral procedures. Interventions will be implemented for students at different levels of risk. Services are available for students with an emerging need and students experiencing a serious mental health problem. Any students endorsing risk of harm to self or others will receive immediate intervention. Services are provided within a Multi-Tiered System of Supports (MTSS) framework as outlined below:

**Tier 1**

- School-wide positive behavior incentives
- Child Safety Matters/Teen Safety Matters
- Lauren's Kids
- KidSmartz
- Character Counts
- Sanford Harmony
- Character Development and Leadership
- Garfield's Cyber Safety Adventures
- Drug prevention and awareness through Red Ribbon Week activities and Drug Free Hardee presentations
- Bullying Awareness and Education
- Suicide prevention and awareness through visual aids, assemblies, announcements, etc.
- LEADS: for Youth Suicide Prevention
- Health Fairs
- FortifyFL
- Youth Mental Health First Aid training for all school personnel. This will enable staff to identify students in distress and refer for assistance and support (part of the universal screening process).
- School personnel will refer to on-site school counselor for initial assessment of student needs. Any potential threats will be immediately referred to school principal/or designee and addressed via the school threat assessment team (potential

Tier 2 & 3 supports). A social worker, school psychologist, or mental health counselor will be contacted for immediate assessment of student.

## **Tier 2**

- Check In/Out
- Check and Connect
- Behavior Intervention Plan and/or Behavior Contract
- Possible referral to district mental health counselor, social worker or community provider for mental health supports and/or substance abuse treatment and intervention based on need.
- Progress monitoring for outside providers to share tracking data and monitoring information.
- District school counselors, social workers, school psychologists, and mental health counselors will assist with identification and access to appropriate mental health supports.
  - Evidence-based group for social, emotional and behavioral interventions based on needs (including anger management, grief, skills-based groups such as life, coping, problem-solving skills, etc.)
  - Monitoring of intervention and student progress
- Parents/guardians will receive assistance with accessing appropriate health care and community-based supports as needed.

## **Tier 3**

- District school counselors, social workers, school psychologists and mental health counselors will provide evidenced-based individualized counseling (i.e. Cognitive Behavior Therapy, Solution-Focused Problem Solving, Social Perspective Taking) and interventions as needed.
- School psychologists will assist with individual behavioral support plans/Functional Behavioral Assessments when necessary.
- District social worker or mental health counselor will follow-up on each threat assessment conducted.
- Safety plans will be implemented for each student returning to school following a Baker Act to crisis stabilization unit.
- School counselor, social worker or mental health counselor will conduct face-to-face follow up with all threat assessment/crisis students the following school day.
- Referral to district mental health counselor, social worker or community provider for mental health supports and/or substance abuse treatment and intervention based on need.
- Progress monitoring for outside providers to share tracking data and monitoring information.
- District social workers and mental health counselor will assist with identification and access to appropriate mental health supports.

- Monitoring of intervention and student progress
- Parents/guardians will receive assistance with accessing appropriate health care and community-based supports as needed.

**B. 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.**

The district will use a collaborative approach to address students' mental health and substance use/abuse needs. Internal collaboration occurs among the school MTSS team and school social worker/mental health counselor. In addition, the district collaborates with local community providers for mental health and substance abuse services and treatment interventions. Once a referral on a student has been received, additional information will be gathered in order to better understand the scope of the problem. Early warning system indicators are considered in making decisions as well. In collaboration with the parent/legal guardian, an intervention plan is developed, implemented and progress monitored. Adjustments to interventions are made based on how the student responds to the intervention(s).

Evidenced-based interventions are utilized such as Cognitive Behavior Therapy, Solution-Focused Problem Solving, Social Perspective Taking by District staff. An Memorandum of Understanding (MOU) is in place for community based mental health provider (Peace River Center for Personal Development, Inc.) for the provision of evidenced-based services. Referrals will be made to community based substance abuse provider (Tri-County Human Services) for students with substance abuse disorders or in need of substance abuse services and interventions.

**C. Includes district 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.**

The School District employs the following:

2.5 School Psychologists

10 School Counselors (1 at each elementary, 2 at middle school, 3 at high school)

**D. 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).**

The school based mental health providers and student services director have met consistently throughout the year to review the district mental health plan and services in place to assess the on-going needs of students within the district. The district revised its universal referral process in efforts to streamline procedures and provide more direct access to services for students. Revisions have been made to the district guidance plan to enable counselors quick access to monthly awareness and prevention topics . Ongoing communication and meetings will continue throughout the year to share information and seek input. After a review of staffing allocations, the district decided to add a licensed mental health counselor to district staff to provide services to students at all schools.

- E. 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).**

The district has a MOU with the local community based mental health provider (Peace River Center for Personal Development, Inc.) to provide direct mental health services to students in the district. Services detailed in the MOU include Peace River Center providing a dedicated mental health counselor to implement services to students at all schools within the district. Services include mental health screening and assessment, diagnosis, treatment planning, individual and group counseling. Services may either be provided on school-site or at Peace River Center based on the needs of the student/family. In addition, Peace River Center operates the Community Action Team (CAT) services and the district has the ability to refer students to the CAT team based on needs, as well as a mobile crisis unit with services available 24/7.

- F. State how the plan will establish 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:** As part of the district review of the universal referral procedure, all referrals are sent to the school counselor and are date stamped. Each successive contact by social worker, school psychologist or mental health counselor are documented and dated on the referral to ensure timely follow-up and compliance within a 15 day time frame for assessment. Students who are at risk for suicide or self-harm will be assessed immediately (see Baker Act procedures).
- 2. School-based mental health services are initiated within 15 days of identification and assessment:** Upon receipt of the a referral for a student in need of services, the school counselor will make an initial contact with the student to better determine specific nature of the problem and assess the needs. The school-based problem solving team will meet weekly for all new referrals made to determine a plan of intervention for that student. School counselor or social worker will contact parent/legal guardian to initiate services within 15 days of identification and assessment.
- 3. Community-based mental health services for students are initiated within 30 days of referral:** If, in consultation with the parent/legal guardian, the problem-solving team determines referral to a community-based care provider is the best plan to meet the needs of the student. Services will be initiated with the local community mental health provider or substance abuse provider with services being initiated within 30 days of receiving the district referral.

- G. Describe process for coordinating mental health services with student's primary mental health care provider and other mental health providers involved in the students care.**

Upon receipt of a universal referral for services, the social worker will seek to obtain a signed release of information form from the parent/legal guardian for each provider involved with the student. The release of information forms will then be sent to each respective provider to coordinate services for that student. School based interventions as well as physician and

therapist directed interventions will be combined and used in tandem to facilitate positive student healing and improvements.

The school counselor will keep a log of each student referred for counseling and the services being provided whether by district staff or community provider. The social worker will monitor progress from services provided through community partners. For monitoring purposes, the community providers will provide tracking data and monitoring information to help the district track the targeted student's growth (or lack thereof). The social worker will coordinate interventions from the student's treatment plan created by the community provider with any needed supports in the school environment.

In situations where the Baker Act is instituted on a student, the 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 (See Baker Act procedures).

**H. 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.**

All staff will be trained in Youth Mental Health First Aid. This course will help staff to identify warning signs and symptoms that a student may be developing a mental health need or having a mental health crisis. Staff will also be trained in suicide awareness, prevention, and postvention, and child abuse identification, intervention, and reporting. All staff will be educated on the universal referral system so they are able to refer a student at any time for whom they have a concern. In addition, the district will utilize curriculum as noted in Tier 1 interventions to include social emotional learning, drug abuse awareness, suicide prevention and awareness.

**I. Describes the process for coordinating mental health services for students at charter schools that are part of the schools district plan.**

There are currently no charter schools within Hardee County.

**J. Identifies strategies to:**

- 1. Improve the early identification of social, emotional or behavioral problems or substance abuse disorders.** Through the school enrollment process, students will be identified who have a history of mental health needs and placed on a monitoring list. School wide prevention awareness will highlight important information so that students are more knowledgeable on mental health concerns and how to seek help. All staff will be trained in Youth Mental Health First Aid. This course will help staff to identify warning signs and risk factors of mental health problems. Staff will be educated on the universal referral system so they are able to refer a student at any time for whom they have a concern. Students and parents will also be informed on the referral process to seek assistance.
- 2. Improve the provision of early intervention services.** District personnel will meet consistently throughout the year to strategize and plan for improvements to the process of providing mental health services to the students in the district. Part of

that process includes streamlining the system to ensure students receive services that best fit their needs as well as receive services in a timely manner. Timeframes have been incorporated including the 15 day response and initiation of services for district provided services and initiating services within 30 days when needed for community providers. With the training of staff in Youth Mental Health First Aid, the goal is to increase awareness among staff of the signs and symptoms and increase the provision of early intervention services.

- 3. Assist students dealing with trauma and violence.** If school personnel are aware that a student has experienced specific trauma or violence, they will complete the universal referral for assessment and intervention services. Through school wide prevention awareness programs/activities, students will gain knowledge regarding mental health concerns and can seek assistance for a peer or self-report concerns to staff or the school counselor. Procedure for follow up will be followed as outlined in previous sections.

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

1 Social Worker is a Licensed Mental Health Counselor

1 Social Worker is not certified/licensed; holds a Bachelor of Arts in Psychology for case management/parent outreach

1 Licensed Mental Health Counselor

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

1 Contracted Licensed Mental Health Counselor for Specialized Mental Health Assessments/Therapy

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

1 Contracted Licensed Mental Health Counselor

1 Contracted Board Certified Behavior Analyst

**N. Other expenditures (specify type and amount).**

Salary and Benefits for two Social Workers	\$ 132,904.00
Local Travel for two Social Workers	\$ 2,000.00
Repairs and Maintenance (copy machine upkeep)	\$ 1,498.00
Supplies (copy/colored paper, YMHFA Manuals, mental health curriculum, file folders, tape, etc)	\$ 23,506.00
Capitalized Furniture Fixtures and Equipment (copy machine)	\$ 16,000.00
Professional and Technical Services to (contract for services; such as conducting risk assessments, provide mental health counseling)	\$ 25,000.00
Salary and Benefits for one Mental Health Counselor	\$ 68,372.00
Local Travel for one Mental Health Counselor	\$ 1,000.00
Non-Capitalized Furniture, Fixtures and Equipment (office desk, chairs, filing cabinet)	\$ 5,000.00
Computer for one Mental Health Counselor	\$ 1,000.00
Travel for Staff to attend Trainings and Workshops	\$ 10,000.00
Extra Duty for staff to attend Trainings and Workshops	\$ 3,529.00
Other Purchased Services/Rental (Yearly subscription/license for software programs)	\$ 15,600.00
2019-2020 Hardee Mental Health Assistance Allocation	\$ 219,956.00
2018-2019 Carried Forward Balance	\$ 85,453.00
2019-2020 Grand Total	\$ 305,409.00

**O. 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.**

All funds will be used to reduce the staff to student ratio by directly hiring school-based mental health service providers and the costs associated with setting up the work space. Other costs will be related to the mental health needs for the district and used to pay for local travel, professional development and implementation costs, and supplies.

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

All proposed expenditures are being used to hire additional staff (2 Social Workers and 1 Mental Health Counselor) to reduce the staff to student ratio for the district. The allocation will also be utilized for other contracted mental health services as necessary, to further meet the mental health needs of students. Funds will be used to purchase supplies, equipment/furniture, curriculum, and for training and implementation. The mental health assistance allocation funds does not supplant other funding sources, nor are the funds used to increase salaries or provide staff bonuses.

**Q. Describes how district will maximize use of other sources of funding to provide school-based mental health services.**

Hardee District Schools maximizes use of local, state, and federal funding sources to provide school-based mental health services. Medicaid reimbursement will be utilized as appropriate for services. State Personnel Development Grant (SPDG) will provide for costs associated for the Check and Connect Mentor Program at middle school. Title IV, Title V resources will 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.

**R. Identifies the number and ratios of FLDOE-certified or licensed, school-based mental health services providers employed by the district.**

2.5 School Psychologists	Shared between 5 Elementary, 1 Middle, 1 High, 1 Alternative School : 5000 students
2 Social Workers	Shared between 5 Elementary, 1 Middle, 1 High, 1 Alternative Schools : 5000 Students
1 Licensed Mental Health Counselor	Shared between 5 Elementary, 1 Middle, 1 High, 1 Alternative Schools : 5000 Students
5 School Counselors	1 at each Elementary School : 500
2 School Counselors	Middle School : 1250
3 School Counselors	High School : 1400

**S. 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.**

Each school counselor will maintain a log at the school that is shared between the school psychologists, social workers, mental health counselor, and student services director 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.