2020-2021

Mental Health Assistance Allocation Plan

MUCSED MONROE COUNTY SCHOOL DISTRICT

Multi-Tiered System of Supports School-Based Mental Health Providers Interagency Agreements Referral Process Strategies and Programs Early Identification



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BE THE ONE is our commitment to providing a safe and nurturing educational environment which allows students to reach their social-emotional and academic potential.

Element One:

Focus on a multi-tiered system of supports (MTSS) to deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more co-occurring substance abuse diagnoses and to students at high risk of such diagnoses. This includes coordinated services with a student's primary and other mental health care providers.

Monroe County School District (MCSD) has a district level problem solving team (DAPPS) that oversees the school-based MTSS teams and their implementation of our MTSS Framework. DAPPS meets monthly to assess district-wide data, the quality of our supports at each tier, and the fidelity of implementation. The school-based MTSS teams meet monthly to review student specific and school wide data, student tier movement, school and community resource needs, and coordination of services with outside agencies.

MCSD's MTSS Framework

Assessment

Students in grades K-3 will be universally screened for social-emotional wellness using the Devereux Student Strengths Assessment (DESSA). Teachers will complete the ratings twice a year, once in October and again in February. Results come directly from the DESSA platform which integrates with Focus, our student information system (SIS). We will be able to use DESSA results, along with early warning system (EWS) data in Focus, to group students into tiers in order to receive the appropriate level of support. If MCSD starts out the year virtually due to COVID-19 the October date will still allow teachers approximately eight weeks to get to know their students before completing the screening, but our dates are flexible to allow more time if needed.

Students in grades 4-12 will be universally screened for social-emotional wellness using the Social-Emotional Health Survey (SEHS). Students will self-rate twice a year, once in October and again in February. Data will be exported from the SEHS platform and uploaded into our PowerBi platform for SIS integration. This will allow us to use SEHS and EWS data together to group students into tiers. The SEHS is available in Spanish to allow access to our English language learners and there is a read aloud option to allow access to our struggling readers and students with disabilities.

Diagnosis

MCSD does not use screening tools for clinical diagnostic purposes. In the event a student requires clinical diagnostic support we refer them to their pediatrician or to a local mental health agency. MCSD has a partnership with Guidance Care Center, our local mental health and behavioral services agency. They provide school-based therapeutic supports and agency-based psychiatric diagnostic and medical intervention services.



Intervention

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Tier 1

Evidenced-Based Support	Grade Level	Provider	Frequency
Positive Behavior Interventions and Support (PBIS)	PreK-12	Entire School Staff	Daily
Safer Smarter Schools	PreK-5	School Counselors	Weekly
Second Step	PreK-5	Teachers	Weekly
Project Wisdom	9-12	Teachers	Weekly
Purpose Prep	6-12	Teachers	Weekly
Signs of Suicide	6-12	School Counselors	Varies by Site
Say Something	6-12	SAVE Promise Clubs	Monthly
Start With Hello	K-12	SAVE Promise Clubs	Monthly
Calm Down Boxes	К-8	Teachers	As needed
Social Emotional Storybook Libraries	PreK-3	Teachers	As needed
Mental Health First Aid	Staff Training	MHFA Trainers	On-Going
Trauma Informed Care	Staff Training	Kognito	20-21 sy

PBIS is a district-wide initiative that is in place to establish a proactive behavioral and social culture so that all students can achieve social, emotional and academic success. MCSD has a partnership with University of South Florida PBIS/MTSS Project that provides guidelines and high standards for model school application of PBIS principals.

Safer Smarter Schools, Second Step, Project Wisdom, Purpose Prep and Signs of Suicide are all social-emotional learning curriculums that are integrated into school schedules. Lessons occur weekly in the classroom through a learning sequence and prescribed activities provided to the classroom teacher.

Say Something and Start with Hello are programs out of Sandy Hook Promise. Say Something and Start with Hello training is given to all students at the prescribed grade levels by members of the SAVE Promise Club. Each school has an established SAVE Promise Club that conducts the school-wide trainings and holds meetings and activities throughout the school year to promote the lessons. Say Something teaches students to recognize signs that someone may be a threat to themselves or others and how to respond. Start with Hello is a program aimed at reducing social isolation among the student population.

Every classroom in grades K-8 received *a calm down box* that contains evidence-based materials to help students reduce anger, frustrations and other negative emotions that interfere in learning and positive socialemotional development. Materials contained in the box are related to stress reduction and mindfulness practices. The purpose of the box remaining in the classroom is to provide a tool that can be used in the room where instruction takes place to reduce learning gaps that occur when a student needs to leave the room.

Every classroom in grades K-3 received *social-emotional storybooks* for their library. They received the behavior, social skills and emotional books sets by author Julia Cook. This year they will also receive a series of



books in both English and Spanish to assist in re-acclimating students to basic school behavioral expectations after such prolonged absences due to COVID-19.

All MCSD staff are in the process of getting trained in *Mental Health First Aid*. At this time approximately 25% of staff have been trained. Training was interrupted in the 2019-2020 school year when schools closed due to COVID-19. Training will resume in the 2020-2021 school year and a new virtual training format has been obtained to ensure training continues regardless of if schools re-open or not.

All MCSD staff will receive trauma informed care training via Kognito prior to the start of the 2020-2021 school year. Trauma informed care training has been a consistent offering on professional development days, but this will be a district wide training that all staff will receive. The district-wide training is in response to the global pandemic and the stress/trauma it has caused our families and community. MCSD's goal is to provide teachers and staff the tools needed to recognize and support students who have or currently are experiencing trauma.

Evidenced-Based Support	Grade Level	Provider	Frequency
Check In-Check Out	K-12	School Counselor, Staff	Daily
Contingency Management Plans	K-12	School Counselor, Teacher	Daily
Small Group Counseling	PreK-12	School Counselor, MFLC	Weekly
SEL Re-Teach Sessions	PreK-12	School Counselor, Staff	Weekly
Mentoring	K-12	Keys to be the Change	Weekly
Mentoring	K-12	United States Coast Guard	Weekly

Tier 2

Check In-Check Out is a system where students check in with teachers throughout the day to receive points based on how well they met school-wide expectations. The school counselors meet with the students in the morning to encourage them and provide reminders of their daily goals. They are essentially setting the tone for a positive day. School counselors check out with them at the end of the day to review teacher reports and provide feedback, praise and rewards.

Contingency management plans are specific to address targeted behaviors with regular feedback throughout the day by the classroom teacher. There is a cost-reward system built into the plan that may be implemented as little as once a day or as much as once every hour, depending on the level of need. School counselors and teachers collaborate on development and implementation.

School counselors utilize *small groups* for students with like needs. Groups may include students who need support with grief, substance use, social skills, emotional regulation or executive skills development, to name a few. School counselors use evidenced-based curriculum to support the groups. Why Try, Zones of Regulation, Strong Kids, Strong Start and Mind Up are purchased curriculum available to all school counselors. Our district also has contracted licensed Military Family Life Counselors (MFLC) through the Department of Defense to serve our military family students. They run small groups and meet with students individually.



School counselors, teachers and other staff utilize small group or one-on-one *SEL re-teaching* of lessons when necessary. If students are not responding to a particular lesson from one of our Tier 1 SEL programs, students receive individualized or small group re-teaching to ensure learning and practice of lessons.

Mentoring is provided by two agencies, Keys to be the Change and the United States Coast Guard, whom MCSD has partnership agreements with. Both agencies accept mentees via a referral process. The agencies link mentees with mentors and establish weekly visitation schedules at the school. Mentors are trained in mentoring by their individual agency.

Tier 3

Evidenced-Based Support	Grade	Provider	Frequency
	Level		
One on One Individual Sessions	PreK-12	School Social Worker, Therapist	Weekly-minimum
Direct In-Class Support and Teaching	PreK-12	School Social Worker, Therapist	Weekly-minimum
Functional Behavior Assessments (FBA)	PreK-12	School Social Worker	Monthly review
Behavior Intervention Plans (BIP)	Prek-12	School Social Worker	Weekly review
Crisis Intervention and Threat Assessment	PreK-12	Staff, Agency reps	As needed

One on one individual sessions are provided by the school social worker or assigned a private or community agency therapist. School-based sessions from the school social worker utilize curriculums such as Why Try, Zones of Regulation, Strong Kids, Strong Start and Mind Up. Sessions start out in an office setting and as skills are attained sessions transfer to the classroom or other appropriate school setting for further practice. This ensures transference of learned skills from an office setting to the real world setting.

Direct in class support and teaching is conducted by the school social worker and/or therapist with support and collaboration with the classroom teacher. This is imperative in ensuring that learned skills are not just demonstrated in the one on one setting, but can also be applied to the original setting where the difficulties arose.

Functional Behavior Assessments and Behavior Intervention Plans are developed and maintained by the school social worker. Certain schools and grade levels (9-12) have behavioral specialists and/or exceptional education teachers who develop and manage these plans. FBA's are used to determine the function of the behavior so targeted interventions can be developed to decrease problem behavior and increase positive replacement behaviors. The FBA's are used to develop the BIP's. BIP's contain the specific intervention at each tier, data collection method and progress monitoring tools. Data is generally collected daily, reviewed bi-weekly and graphed monthly. The FBA and BIP are both fluid documents that are amended based on student response to intervention.

MSCD has detailed, yet concise and easy to follow, *Crisis Intervention and Threat Assessment* protocols. For Crisis Intervention the Columbia Suicide Severity Rating Scale is used to determine response. Responses involve either a referral to a mental health agency or a call to the Mobile Response Team (MRT) for Baker Act



assessment. MRT's are staffed through the Guidance Care Center, whom we have a partnership with. They respond to the school to complete the assessment and take care of scheduling of intake/counseling appointments if a Baker Act is not deemed necessary. If a Baker Act is necessary, they take over management from the school and work with the family and the nearest receiving facility to arrange hospitalization and follow-up care. MSCD uses Florida Department of Education Forms for Comprehensive Threat Assessment when there is a perceived or real threat against another person or the school. Depending on threat level, law enforcement and/or MRT may be involved following the same process as the crisis intervention protocol. Each school has a crisis intervention and threat assessment team that consists of the following:

- Administrator
- School Counselor and/or school social worker
- School psychologist
- School nurse (if appropriate)
- School Resource Officer
- Private Agency Representative (Therapist, case manager, MRT rep)

MCSD also has a district threat assessment team to review, monitor and intervene in cases were a threat was deemed substantial. The team meets immediately, either in person or virtually, as soon as a substantial threat is identified. The purpose of the team is to make district level decisions regarding supports and actions that the school based teams are not able to make. This streamlines the system allowing for faster decisions and more positive outcomes. Members of the district threat assessment team include:

- Coordinator of Alternative Education
- Coordinator of Adult Education
- School Safety Coordinator
- Transition Specialist
- Lead School Social Worker
- Lead School Counselor
- Coordinator of Health/Science Education
- Coordinator of Juvenile Justice Education
- Administrator (school principal and school assistant principal)
- Children's Case Manager with GCC
- Monroe County Sheriff Department representative

Treatment and Recovery

School-Based:

Once students are identified through universal screening and review of early warning system data as needing tier two and tier three support, they are assigned a school based mental health provider, such as a school counselor or school social worker. The school based mental health provider implements evidence-based interventions and supports in collaboration with the student, the student's family, classroom teacher and other relevant staff. We use a strengths-based approach to build the student up versus a discipline response which, in most cases, has proven less productive and beneficial to student growth. Baseline data is gathered



prior to intervention implementation, and data continues to get gathered throughout the intervention process. Data is analyzed once a month at behavioral data chat meetings. Decisions regarding tier movement and intervention adjustments are made at those meetings. If a student is making progress the student may be moved to a lower tier due to decreased need for support, or the behavioral goals may be adjusted to work on a new area of skill development. If a student is not making progress, the intervention may be amended or the student may be recommended for further evaluation via outside agency referral or referral for a school-based exceptional education evaluation.

Community Based:

Community based treatment and recovery is dependent upon the agency. Guidance Care Center (GCC) counseling services vary regarding level of need. In the school setting GCC offers basic intervention supports, alcohol and substance abuse prevention programs and counseling, and therapy that ranges from general counseling to intense wrap around supports by their Community Action Team (CAT). MFLC sees military students informally individually or in small groups. Mentors receive intensive training in mentoring and see the students informally one on one. Students may receive services from community based agencies via referral by school staff or parent request.

Coordinated Services

MCSD has coordinated services with GCC, DOD, Keys to be the Change, and USCG to provide direct services for our students. In addition to GCC counselors, interventionists and case managers all providing services to our students at school, in their offices and in the student's home, GCC's executive director is a member of our Multi-Agency School Safety Committee and our Re-Opening of Schools Task Force. GCC staff also provides professional development training to our staff and recently completed a full day training on trauma for all of our school resource officers. MCSD also utilizes GCC's MRT for crisis and threat response. MCSD has GCC counselors in our school buildings to support students with life skills, mental health issues and substance abuse treatment and prevention. The DOD has maintained Military Family Life counselors in all of our schools and provide training on referral and service requirements/protocols to school staff. Keys to be the Change and the United States Coast Guard coordinate with school administration to identify students who are at-risk but who also do not already have counseling or support services. This is to ensure that services do not overlap with that of other school based mental health providers. MCSD schools each maintain a database of students who receive school and community based support. The teams at each school that provide these supports meet monthly to review cases and data. The database prevents duplication of services which allows our mental health providers to divide and conquer, thus reaching more students.

MCSD has a partnership with SEDNET South Florida. SEDNET is a multi-agency network for students with emotional/behavioral disabilities. SEDNET coordinates school districts with mental health, child welfare, juvenile justice and other services to meet the needs of students with emotional and behavioral disabilities. SEDNET has provided MCSD with mental health curriculum, such as Zones of Regulation, and on-site training on various mental health topics to key staff.



MCSD has a partnership with the University of South Florida MTSS/PBIS Project. Our district USF representative sits on our DAPPS Team, worked with a team of MCSD staff to identify instruments and develop protocols for universal social-emotional wellness screening, and is a member of our Re-Opening of School Task Force. USF oversees our Tier 1 PBIS program and works as a consultant for MCSD on topics and needs relating to student social emotional wellness.

MCSD has a partnership with Florida Keys Area Health Education Center (AHEC). AHEC is a medical clinic on site at our schools. AHEC provides medical and educational services. Their goal is to promote health and wellness through education, health assessments, and professional development.

School and community-based mental health providers work together to bring mental health training to school staff. Coordinated efforts with GCC, SEDNET, and USF have brought professional development to our staff on a variety of topics. These include but are not limited to: warning signs and signals for suicidal children and adolescents, trauma informed care, strategies to support students with behavioral challenges, psychopharmacology and common diagnoses of school aged children.

Element Two A:

Direct Employment and/or contracted relationships with school-based mental health service providers to expand and enhance school-based student services and to reduce the ratio of students to staff in order to better align with nationally recommended ratio models.

Title	#	Credentials	Staff to Student Ratio	Organization Standards
School Psychologist	5	Master's degree	1:1774	NASP – 1:500-700
School Social Worker	5	Master's degree	1:1550	NASW – 1:250
School Counselor	20	Master's degree	1:443	ASCA – 1:250
School Nurse	10	Master's degree	1:775	NASN – 1:750
Behavior Specialist	1	BcaBA	Varies based on enrollment/eligibility	
Behavior Specialist	.5	Master's degree	Varies based on enrollment/eligibility	
Coordinator of Student Support	1	Master's degree	District level staff *pending board approval	

School-Based Mental Health Service Providers

Two school social workers are fully funded through this allocation. The Coordinator of Student Support* position is partially funded through this allocation and partially funded through district funds. *pending board approval

School Psychologists assess students to determine need and qualifications for exceptional education services. They provide support to staff in development and implementation of FBA/BIP's and consult with staff and families on a variety of topics and issues related to student's academic, social, emotional and behavioral well-being.

School Social Workers work directly with tier 3 students providing direct intervention, referral and family support services. They provide support to staff in development and implementation of FBA/BIP's and consult



with staff and families on a variety of topics and issues related to student's academic, social, emotional and behavioral well-being. They also serve on school-based crisis and threat assessment teams.

School Counselors work directly with tier 2 students and other students who need support as needed. The provide referral services and serve on school-based crisis and threat assessment teams.

School Nurses provide direct medical care to students and referral services. They dispense medication to students with social, emotional and mental health needs, provide on-going communication with parents, and coordinate services with student's primary care physician and/or prescribing doctors.

Behavioral Specialists work directly with students with disabilities. They provide support to staff in development and implementation of FBA/BIP's and consult with staff and families on a variety of topics and issues related to student's academic, social, emotional and behavioral well-being.

Coordinator of Student Support is a district position added in the 2020-2021 school year to oversee and coordinate the behavior aspects of MCSD's MTSS Framework, provide direct supervision to school social workers, serve on the district threat assessment team, serve on the district DAPPS team, serve as the school representative on the multi-agency Mental Health and Substance Abuse Committee, provide professional development to staff on mental health related topics, and to provide parent workshops on topics related to mental and behavioral health. This position is also responsible for analyzing district Tier 2 and Tier 3 response to intervention and universal screener data, and suggest procedure and policy changes to enhance student outcomes.

*This position is currently pended school board approval

Community-Based Mental Health Providers

Title	#	Credentials
Behavior Analyst and Consultant for ESE	1	Ph.D.
GCC Project Success Counselor	4	Bachelor's degree +
GCC Counselors	16	Master's degree

4 GCC counselors are partially funded through this allocation and partially funded through GCC resources

The Behavior Analyst and Consultant for ESE works specifically on FBA/BIP's for students referred by the district behavior specialist. They collaborate on interventions, behavior plans, data collection and analysis, IEP goals, referrals to outside agencies and family supports.

GCC Project Success Counselors provide outreach and substance abuse education. They provide evidence based programs, Too Good for Drugs and Teen Intervene, to address the impacts of substance abuse on their lives and the lives of their families. They work to promote healthy decision making.



The GCC counselors provide a variety of services to students in the school setting, from life skills to clinical therapeutic supports. These counselors address mental health and substance abuse issues.

Element Two B:

Strategies to increase the amount of time that school-based student services personnel spend providing direct services to students, without interrupting core academics. This may include the review and revision of district staffing resource allocations based on school or student mental health assistance needs.

GCC counselors are in every school in the district. GCC counselors are able to address the day to day mental health needs of students on their caseloads, allowing school-based mental health providers more time to support their caseloads of students. In addition, GCC's supportive response to students in crisis via their MRT teams allows for a seamless transition from school-based to community-based support, allowing the school-based mental health provider to return to the larger school population while the community-based mental health provider works with the student in crisis

Administrators limit the amount of extra duties not associated with mental health services (lunch duty, bus duty, testing coordination, etc) for student services personnel to be able to spend more direct face to face time with students who need mental health services. This will receive particular emphasis in the 2020-2021 school year due to community impacts on mental health and overall wellbeing due to COVID-19.

School social workers have a very specific job description, which is to work with tier 3 students with social, emotional or behavioral challenges. They also work with Tier 3 students who struggle academically when a specific family need is identified that, if addressed, would likely lead to positive impacts on educational performance. This specific job role is protected to prevent other non-mental health related tasks from becoming part of their day to day responsibility. This enables them to focus solely on the students on their caseloads.

Element Three:

Contracts or interagency agreements with one or more local community behavioral health providers or providers of Community Actions Team services to provide behavioral health staff presence and services at schools. Services may include, but are not limited to, mental health screenings and assessments, individual counseling, family counseling, group counseling, psychiatric or psychological services, trauma informed care, mobile crisis services and behavior modification.

MCSD has contracts and interagency agreements with the Guidance Care Center (GCC), the local community mental health agency. The agreements stipulate on-site mental health counselors to provide support in the school setting. The agency also provides intake services, mental health screenings and assessments, individual and family counseling, psychiatric care, case management, and substance abuse treatment and recovery services. School personnel are able to refer students and/or families to GCC for support and GCC responds to these referrals within 7 days. Schools are able to access their Mobile Response Team (MRT) for crisis intervention and support by calling a designated phone number and requesting on-site support. We are also



able to refer our most at-risk students to their Community Action Team (CAT) for complete wrap around support.

MCSD maintains valuable partnerships with Community Providers and agencies. These include: Keybridge Counseling, Wesley House Family Services, the Domestic Abuse Shelter, Children in Need of Services/Families in Need of Services, Department of Juvenile Justice, Monroe County Sheriff's Department, Key West Police Department, Florida Keys Outreach Coalition, Samuel's House, Christina's Courage, Center for Autism and Related Disabilities, Florida Diagnostic Learning and Resources System, SEDNET, University of South Florida's Positive Behavioral Support and Multi-tiered Systems of Supports projects, and Pinnacle Group. Collaboration includes information and resource sharing, coordinated treatment planning and delivery, and consultative services.

Element Four:

Policies and procedures, including contracts with service providers, that will ensure all students who are referred to a school-based or community-based mental health service provider for mental health screening for the identification of mental health concerns and ensure that the assessment of students at-risk for mental health disorders occurs within 15 days of referral. School-based mental health services must be initiated within 15 days after identification, and assessment and support by community-based mental health services must be initiated within 30 days after the school or district makes a referral.

School-Based Policies and Procedures for Timelines of Assessment and Initiation of Services

A referral form and process for behavioral and/or mental health concerns is embedded in the district's MTSS process. School-based mental health providers review referrals for Tier 2 and Tier 3 support within three days of receipt of referral and a Problem Solving Team (PST) meeting is scheduled by the MTSS coordinator for that

specific school. The PST develops a plan of action that involves assessment in the form of direct observation, parent and teacher interviews, student record review, review of completed universal screeners for behavior, and/or interviews with outside services providers. Services are initiated within 15 days of referral. If parents are unable to attend the PST meeting or unable to provide written permission for Tier 3 services, then Tier 2 services are initiated until parental permission for additional support is received. Obtaining parental consent for school-based personnel to contact outside service providers is embedded in this process.

Responsibilities of the Problem Solving Team

The PST/MTSS facilitator is responsible for coordinating and conducting PST meetings for all students who require Tier 3 support. Individual student MTSS plans are developed, reviewed and completed during these meetings. Individual student plans are required at Tier 3 because Tier 3 interventions address significant (often well below grade level) skill deficits.



Members of the Problem Solving Team

At a minimum, the PST Facilitator, Teacher, and Parent **must** attend each meeting. However, it is important to have a well-balanced team of professionals from various disciplines. This will help ensure that the team focuses on viewing the student holistically. Other staff members that can be invited to these team meetings include, but are not limited to, the school counselor, school social worker, school psychologist, reading/math coaches, and ELL teacher. Also, with permission from the parent, representatives from outside agencies, such as medical and mental health professionals, may attend.



Community-Based Policies and Procedures for Timelines of Assessment and Initiation of Services

Referrals for community-based mental health services are staffed within seven days of receipt of referral with an in-take usually haven taken place within that same timeline. Once the in-take with the family is complete then a therapist is assigned with first appointments scheduled within two weeks.

Process for Coordinating Mental Health Services

MCSD has a process in place to coordinate mental health services with a student's primary care provider and other mental health providers, including procedures for information sharing. Services are provided on an individual level and involve multi-agency entities through an authorized releases of information form. This form clearly articulates the nature of information to be shared including exchange of information related to mental health treatment plans, diagnoses, medication, treatment progress notes, grades, Office Discipline Referrals, Individual Educational Plans and other information deemed to be educationally relevant. All information is shared on a need-to-know basis and used for the purposes of coordination and consistency of care between agencies. School and community-based mental health service providers meet on a monthly basis at their designated school site to review caseloads, problem solve, review data, and ensure services are not duplicated.

Coordination of Mental Health Services for students at Charter Schools

The Superintendent's office provides information regarding Mental Health services to Charters on a regular basis; Charter Schools are included in ongoing Mental Health efforts and submit their own Mental Health Plans.

Element Five:

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

Strategies

Universal screening for social emotional wellness occurs twice a year to identify students at-risk of developing social, emotional and behavioral problems. These problems impact academic success and can be early indicators of mental health and/or substance abuse issues. Once identified, MCSD utilizes its' MTSS Framework and embedded problem solving process to determine tier level and begin school-based interventions and/or referrals to outside agencies. Community partnerships are utilized for referral services and additional levels of support that cannot be obtained at the school level. When community partnerships are in place school staff have authorized releases of information in order to coordinate care.

MCSD has a team of staff that are certified Mental Health First Aid trainers. They are in the process of training our entire staff in Mental Health First Aid. This year all staff will receive Trauma Informed Care training. MCSD also offers yearly professional development on topics specific to mental health, behavior, social-emotional development, and trauma/chronic stress.



MCSD has a robust SEL curriculum that is embedded into student's weekly schedule. The district also purchased SEL libraries for all of our PreK-3 classrooms. This year we are adding books in Spanish to these libraries to better support the social emotional wellness of our English Language Learners.

Programs

SEL programs used at the Tier 1 level in the district include Second Step, Project Wisdom and Purpose Prep. The Purpose Prep curriculum contains the curriculum required for students in grades 6-12 to receive the state mandated five hours of mental health training. At the Tier 2 and Tier 3 level our school counselors and school social workers use Zones of Regulation, Why Try, Strong Kids, Strong Start, and Mind Up. Take Stock In Children, Keys to be the Change, and the US Coast Guard all have mentoring programs in place within our district. GCC, through their life skills counselors based within our schools, teach two prevention programs, Too Good for Drugs and Teen Intervene. School counselors teach Signs of Suicide during classroom guidance lessons. Last school year our district formed SAVE Promise Clubs at all schools to implement two programs through Sandy Hook Promise, Start with Hello and Say Something. Start with Hello is a program that addresses social isolation and Say Something is a program that teaches students the warning signs and signals for selfharm, suicide and threats against others. Say Something also teaches students what to do if they see these warning signs in others or themselves.

Element Six A:

Strategies to improve early identification of social, emotional or behavioral problems or substance abuse disorders to improve the provision of early intervention to assist students in dealing with trauma and violence.

In order to promote early identification and prevention, MCSD uses universal screening measures for grades K-12. These screening tools are short strength-based assessments used to evaluate large groups of students quickly and effectively. Universal screening is an objective, evidence-based way to measure which students may be at-risk for developing social, emotional, behavioral and/or substance abuse disorders in the future. This data, along with early warning system data, teacher and parent input, is used to determine level of school-based support and need for referral services to outside agencies.

On-going staff professional development in the areas of Mental Health First Aid and Trauma Informed Care give staff the tools they need to identify concerns and make appropriate referrals for school-based interventions and services.

MCSD employed a school social worker specifically for our PreK programs. This social worker has implemented the MTSS Framework for our preschool classrooms offering direct support in our early intervention programming for students.

Element 6 B:

A plan to support students to return to brick and mortar by providing counseling and other supportive services to students affected by the pandemic.

MCSD formed a re-opening task force comprised of more than 50 administrators, teachers, school and community-based mental health providers, doctors and health department officials, business leaders,



curriculum specialists, and others to develop our Guidebook for Safely Re-Opening Schools. The task force was divided into committees, one of which was the Whole Child Committee. This committee focused on support systems that will encompass the needs of students beyond core academics. Neuro- and behavior science research shows that the brain functions in a bottom up manner. When applying this research to the academic setting, students must feel safe, and they must be emotionally regulated before learning will take place. Social and emotional health is of utmost importance during this time and must be addressed and supported before academic learning even begins. In order to ensure our students are ready to learn, our district has adopted a Maslow before Bloom philosophy. Using Maslow's Hierarchy of Needs as an organizational framework, considerations and supports were developed for supporting the whole child, regardless of learning venue. Our Whole Child, Maslow before Bloom, framework is below.

E faster til fører fo	STUDENTS MUST MASLOW BEFORE THEY CAN BLOOM			
	FACE TO FACE BLENDED VIRTUAL			
Physiological Needs Air, water Food, Shelter	 Frequent fresh air exposure Flexibility with personal water bottles and snacks On-going resource referrals for families Both Both Both Both Bi-weekly student needs check 			
Safety Personal Security Health Mental Health	 PSA's prior to start to ease anxiety First week of school: TIC Restorative Practices Lessons on new procedures Universal screening for social- emotional wellness In person sessions for T2, T3 and GCC Trauma Informed Care practices Trauma Informed Care practices Virtual format Virtual wellness checks T2/T3 and GCC supports provided virtually 			
Love and Belonging Friendship Family Sense of Connection	 Start with Hello SEL Lessons Emphasis of first week is connection and healing over academics Same Across all Models 			
Esteem Respect Self-Esteem Status Recognition Strength	 Maximize extracurricular clubs and sports to highest degree possible Additional flexibility, understanding and support of students as they transition from the home learning environment to the school learning environment 			
Self-Actualization				



Teachers and staff will all receive Trauma Informed Care training prior to the start of the school year. They will also receive training on the importance of SEL curriculum. Both of these trainings will pay particular emphasis to how the pandemic impacts student's social, emotional, behavioral and academic functioning. This increased level of awareness will allow teachers to respond to student's need from a standpoint of compassionate understanding.

Prior to the school re-opening there will be public service announcements for students showing them what the "new normal" will look like when they return. This will include directional hallways, social distancing and handwashing procedures, new signage, mask requirements, and other new protocols. Giving students this information prior to returning to school will lesson anxieties when it comes to the unknown of what school will look like.

The first week of school will focus on SEL lessons and learning of new procedures. This will give students the time they need to re-acclimate to the brick and mortar school setting after such a prolonged absence.

School-based mental health provider's sole responsibility when students return to the brick and mortar setting will be to universally screen, identify and provide direct services to students impacted by the pandemic. In order to ensure safety protocols to limit transmission of COVID-19 while supporting students, a specific support process will be in place. Students will see school-based mental health providers via a scheduled appointment or, if an immediate need arises, staff will call/text/radio the assigned mental health provider to come to the student. School counselors and school social workers will be provided special masks that allow students to see their mouths. This is to prevent miscommunication due to an inability to see facial expressions. They will also be provided clear plexi-glass dividers for desks/tables as an additional level of personal safety to staff and students.

School-based mental health providers will meet weekly during the first six weeks of the return to the brick and mortar setting to assess student needs and coordinate care. After the six-week period teams will decide if weekly meetings are still required or if they can move to biweekly, or to the standard monthly meeting schedule.

Expenditures:

Funds for the 2020-2021 Mental Health allocation are used for two school social work positions (salary and benefits), a partially funded contract with Guidance Care center which allows for 4 full-time therapists from our local mental health agency to work in our schools servicing students, and a partially funded position of Coordinator of student support which oversees the district's MTSS-Behavior program and all mental health related services. The remaining funds are distributed amongst six charter schools. Each of the charter schools have a separate mental health plan and those are attached to this document.

A detailed expenditure list for 2020-2021 is below:



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Expenditure Reason	Amount
Sigsbee Charter School allocation – details on attached plan	\$23,291
May Sands Montessori Charter School allocation – details on attached plan	\$4,738
Treasure Village Montessori Charter School allocation – details on attached plan	\$8,856
Ocean Studies Charter School allocation – details on attached plan	\$5,978
Somerset Academy Charter School allocation – details on attached plan	\$2,214
Big Pine Academy Charter School allocation – details on attached plan	\$4,074
Salary and Supplements – 2 school social workers	\$145,200
10% retirement – 2 school social workers	\$14,520
7.65% Social Security – 2 school social workers	\$11,107.80
Group Insurance – 2 school social workers	\$21,145.80
2% Worker's Compensation – 2 school social workers	\$2,904
Guidance Care Center – partially funded contract – therapists	\$69,110
Coordinator, Student Support – partially funded position	\$62,884
Total	\$376,023

Expenditure Assurances:

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; screen for at-risk students; and connect children, youth and families with appropriate behavioral health services

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

The district employs a Medicaid specialist as a means to gain funding for school-based mental health services by billing Medicaid for services administered through all qualifying staff.

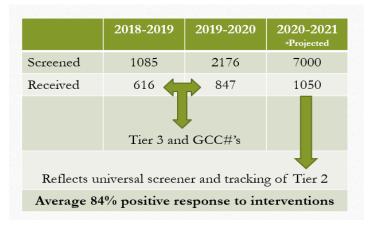
Program Implementation and Outcomes

All school-based mental health services providers maintain an on-going log of students screened, referred, and serviced for mental/behavioral health needs; the district coordinates with the Guidance Care Center and other outside agencies to obtain number of students who receive community based interventions/support.



Data from 2018-2019 reflects screening completed via informal teacher reports and early warning system data. Screening numbers increased in 2019-2020 as a result of a pilot universal screening program implemented at two schools. The projected increase in students screened for 2020-2021 reflects universal screening for social emotional wellness of all students. The number of students who received services

documented from 2018-2020 reflects the number of students who received tier 3 school-based mental health support and students who received community-based mental health support. The projected increase in this area of 2020-2021 reflects new data collection procedures that will be in place for students who receive Tier 2 support. Data collected on students who receive school-based tier 3 supports shows that 84% of those students have a positive response to intervention, enabling them to move to a Tier 2 or even Tier 1 level of support.



Completed by Erin Williams, MCSD District Lead School Social Worker July 2020



SIGSBEE CHARTER SCHOOL

Mental Health Assistance Plan 2020-2021 Submitted to: Superintendent Theresa Axford Monroe County School District

A. Mental Health Allocation Plan

Sigsbee Charter School employs a licensed school counselor onsite as well as a behavior specialist. In addition, there are three licensed Military Family Life Counselors (MFLCs) provided to the school to assist with students' mental health needs.

This support services team provides the following:

- Support in assessing the need for mental health support
- Intervention plans for specific students in the MTSS process
- Individual counseling of students
- Small group counseling
- Whole class lessons on wellness, suicide prevention, anti-bullying and healthy relationships
- Professional development training to instructional and non-instructional staff
- Parent workshops and outreach

The school behavior specialist works with the Multi-tiered System of Supports (MTSS) Coordinator to assist staff in identifying students who need intervention based on behavior and/or social-emotional concerns. The behavior specialist monitors intervention and provides assistance to staff on appropriate progress-monitoring.

The school counselor works with and refers students in crisis for immediate mental health screening at the Guidance Care Center (GCC), working with District personnel to ensure that students have access to crisis counselors and immediate assessments. The counselor also provides services as dictated by students' IEPs.

SCS provides instructional programming at each grade level to help with self-esteem, character education, anti-bullying and health/wellness education. The certified nurse, counselor and trained classroom teachers are available to ensure program goals are met. Examples of programs include:

- Second Steps Character Education
- Organwise
- "An Apple A Day" program provided by the Guidance Care Center
- Middle School Health/Wellness guest speakers
- Restorative Practices

B/C. Expenditures/ Expenditure Assurances

The Mental Health Assistance Allocation is used to fund the school guidance counselor and/or the behavior specialist positions at the school. Additionally, funds are used to provide training and resources in creating preventative climates in classrooms. This allocation does not supplant other funding sources, increase salaries or provide staff bonuses.

D. Program Implementation and Outcomes

Students at risk are identified through the MTSS process. The students and/or any related incidents are tracked in the school district's SIS system, Focus. The school counselor and principal monitor interventions, services and assistance.

Submitted by: Elisa Jannes, principal, Sigsbee Charter School

Sigsbee Charter School

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BIG PINE ACADEMY 30220 Overseas Highway BIG PINE Key, FL 33043

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Mental Health Assistance Program 2020-2021 Submitted to: Superintendent Theresa Axford Monroe County School District

A. Mental Health Allocation Plan

Big Pine Academy employs 2 ESE teachers / school counselors onsite to assist with students' mental health needs.

This support staff provides the following:

- Support in assessing the need for mental health support
- Intervention plans for specific students in the MTSS process
- Individual counseling of students
- Small group counseling
- Whole class lessons on wellness, suicide prevention, anti-bullying and healthy relationships
- Professional development training to instructional and non-instructional staff
- Parent workshops

The school counselors work with the Multi-tiered System of Supports (MTSS) Coordinator to assist staff in identifying students who need intervention based on behavior and/or social-emotional concerns. The counselors monitor intervention and provides assistance to staff on appropriate progress-monitoring.

The counselors also refer students in crisis for immediate mental health screening at the Guidance Care Center (GCC), working with District personnel to ensure that students have access to crisis counselors and immediate assessments. The counselor provides instructional programming at each grade level, upon request to help with self-esteem, character education, anti-bullying and health/wellness education. Examples of programs include:

- Second Steps Character Education
- Organwise
- Bibliography Therapy

B. Expenditures/ Expenditure Assurances

The Mental Health Assistance Allocation is used to fund the school counselors at the school. Additionally, funds are used to provide training and resources in creating preventative climates in classrooms. This allocation does not supplant other funding sources, increase salaries or provide staff bonuses.

C. Program Implementation and Outcomes

Students at risk are identified through the MTSS process. The students and/or any related incidents are tracked in the school district's SIS system, Focus.

Submitted by: Sarah Williams, principal, Big Pine Academy

PRINCIPAL

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ADMINISTRATIVE ASSISTANT

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BOARD OF EDUCATION

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Mental Health Assistance Plan 2020 – 2021

Ocean Studies Behavioral Approach

As a school founded on Montessori ideals, we believe that every person deserves respect. Our goal is to establish a safe, warm, and caring environment where we teach students positive and appropriate ways to handle conflicts. Cooperation and collaboration are encouraged rather than competition. Ground rules are necessary to establish and maintain an environment conducive to the development of self-discipline, self-control, concentration, and independence. They are responsibilities based on the rights of people in the group to learn and work safely and respectfully.

Establishing a Safe School

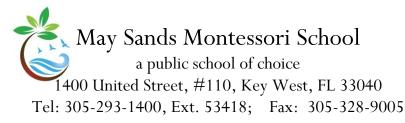
A therapist from the Guidance Care Center will be on site for 4 hours every other week to provide any mental health assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses. The therapist from the Guidance Care Center will also coordinate such services with students' parents/guardians, a student's primary care provider, and the student's other mental health providers on an as needed basis. In the event of an emergency or that additional time is needed, the therapist will be contacted and the necessary services will be provided.

In the instance of site based school closures and the implementation of Distance Learning, services will be provided to families through a secure portal to be chose by the Guidance Care Center. The therapist will provide bi-weekly updates to the principal, Trisha Woods.

The Mental Health Assistance Allocation of \$5,978 will be used to pay the therapist from the Guidance Care Center for the services, to purchase any materials needed for assessment and/or counseling, and to provide targeted staff development for school mental health during the upcoming school year.

Mental Health Plan Allocation

Somerset Island Prep estimates an allocation of \$1642 for Mental Health Assistance, according to the Monroe County School District. The funds are allocated in our budget to contract a Mental Health Counselor to meet the social, academic, and mental wellness of Somerset Island Prep students. Somerset Island Prep will seek services from WestCare, the Guidance Care Center, and other health care professionals.

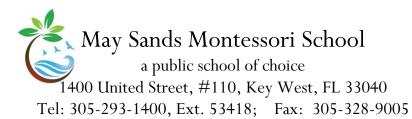


Mental Health & Wellness Assistance Allocation Plan

As plans to reopen schools continue to adapt to the public health crisis presented by COVID-19, mental health supports are a vital component of the framework. Now more than ever, schools that seek to educate the whole child must engage in promoting social and emotional development in addition to academic rigor. The Collaborative for Academic, Social, and Emotional Learning (CASEL) created a guidance document for schools that affirms the value of a systemic approach to social and emotional learning (SEL) in rebuilding a learning community.

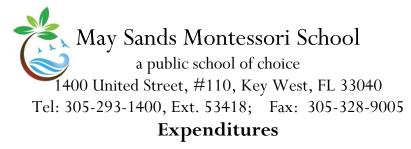
In the process of reopening schools, SEL provides an opportunity to elevate student voice and agency, support educator SEL and well-being, deepen partnerships with families, broaden our definition of what learning is and where it takes place, and contribute to more inclusive and equitable learning environments (CASEL, p. 4).

As an innovative model of education, the May Sands Montessori School offers child-centered learning environments that support pro-social learning and personal development as fundamental components of its design. The school includes regular and varied opportunities for family engagement as a means of improving the school community through communicating expectations of scholarly behaviors, aligning values that model good citizenship, and offering personalized feedback to support the growing child's independence. To establish a safe and nurturing environment for all students, the Mental Health and Wellness Plan draws from research-based best practices that align with Montessori pedagogy. Additionally, the school coordinates community resources from the Monroe County School District (MCSD) as well as the Guidance Care Center (GCC) to ensure a continuum of support for mental health training, assessment, diagnosis, intervention, treatment and recovery services.



School Plan of Support

Item	Timeline	Completion Date
Confirm community-based support for school-based services	July 2020	7/9/2020 personal communication with M. Dunleavy, GCC
Attend ASCD virtual conference: Respond, Reimagine,	July 16, 17, 2020	
Restart the presentation will be on ensuring not only the physical safety but also the social, emotional, mental well-being of students, staff, and communities using the Whole School, Whole Community, Whole Child Model (WSCC).		
Confirm presenter for staff meeting to provide information	August 5, 2020	
on signs and symptoms of stress to observe in students, faculty, and staff		
Present the five core competencies identified by the	August 6, 2020	
Collaborative for Academic, Social, and Emotional Learning (CASEL) to all staff		
Establish schedule of support for school-based services	By August 7, 2020	
Schedule supplementary health and wellness instructional	ongoing	
programming with community-based resources to support all	throughout	
students	SY2021	
Continue Youth Mental Health First Aid Training for new	By December	
employees	2020	
Schedule monthly Problem Solving Team Meetings with	SY2021	
Instructional Staff to address intervention concerns for		
students presenting with academic, behavior, and/or		
emotional needs		
Conduct a mid-year review of the school's Mental Health	January 2021	
Plan		
Develop an updated Mental Health Plan based on feedback from SY2021 implementation	June 2021	



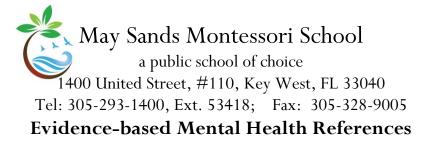
The school will contract with the Guidance Care Center/WestCare for school-based counseling services during the 2021 school year for a fee of \$8,000.

Funding Allocation

The May Sands Montessori School anticipates an allocation of \$4738 for Mental Health Assistance for the 2021 school year (Erin Williams, personal communication, July 2, 2020).

Expenditure Assurances

The school's Mental Health Assistance allocation does not supplant other funding sources, increase salaries, or provide staff bonuses. The school uses 100% of the Mental Health Assistance allocation toward funding the services of a licensed clinician from the Guidance Care Center (GCC) to provide school-based mental health care. The school will maximize the resources available through its sponsor and other educational memberships to complete Professional Crisis Management Training, Youth Mental Health First Aid Training, and additional professional development targeted at effectively supporting students' mental health.



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Treasure Village Montessori Mental Health Allocation 2020-2021

86731 Overseas Highway Islamorada, FL 33036 (305) 852-3482 Fax: (305) 852-2432 Treasurevillagemontessori.com

Submitted to: Superintendent Mark Porter Monroe County School District

A. Mental Health Allocation Plan

Treasure Village Montessori will be contracting with the Guidance Care Clinic for the 2020-2021 school year. We will have a certified therapist on campus one full day each week to provide any mental health assessments, interventions, and other services to student and/ or staff members. In an event that an emergency occurs and more services are needed the therapist will be provided at the agreed contracted rate.

The counselor will work in collaboration with our Multi-Tiered System of Supports (MTSS) Coordinator to help in identifying students in need of social/emotional interventions. This will ensure continued supports are being offered in various school settings to provide the best care for students.

Treasure Village Montessori utilizes the Stephen Covey, Leader in Me concepts throughout the school in order to foster a safe and nurturing environment. The Montessori Curriculum also allows for a focus on various social and emotional concepts including, but not limited to: Character Education, Self-esteem, anti-bullying education and mindfulness techniques.

B. Expenditures/Expenditure Assurances

The entire Mental Health Assistance Allocation will be used to fund the school guidance counselor. Additional funding necessary to fulfill the plan outlined above will be obtained from the annual budget. This allocation is not used to supplement any other programs.

C. Program Implementation and Outcomes

Students are identified through the MTSS program, or through self-identification or referral in emergency cases. All behavioral incidents are tracked in the school district's SIS system, Focus. The Principal works collaboratively with the counselor to monitor all services.

Submitted By: Kelly Mangel, Principal, Treasure Village Montessori Charter School

Treasurevillagemontessori.com

Treasure Village Montessori is committed to inspiring lifelong learners and problem solvers who will continue to be compassionate and respectful global citizens who take pride in themselves, their academic excellence, and their community.