

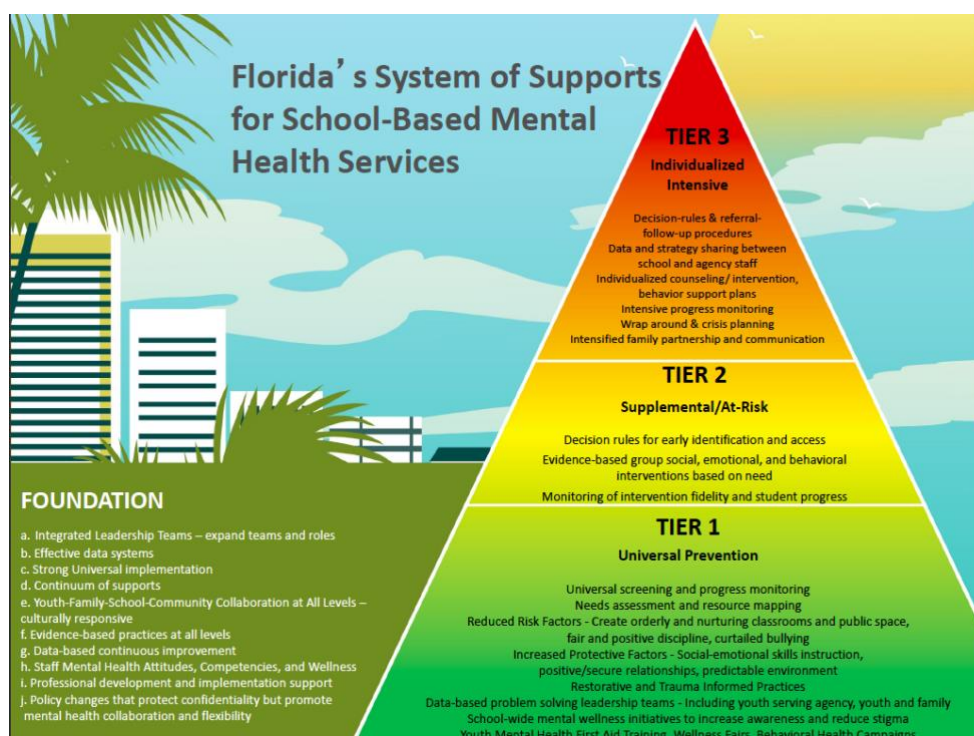
Pasco County Schools Mental Health Assistance Allocation Plan

2019/2020 Pasco County Schools Mental Health Assistance Allocation Plan

Introduction

In compliance with the Marjory Stoneman Douglas School Safety Act (SB 7026) and Implementation of Legislative Recommendations of the Marjory Stoneman Douglas High School Public Safety Commission (SB7030), Pasco County Schools has developed a plan which outlines existing programs and services, as well as how we plan to enhance the continuum of services to meet the social emotional and mental health needs of our students. The plan aligns to Pasco County Schools Theory of Action, which includes three key priorities of: High Impact Instruction, Collaborative Culture and Data-Driven Decisions. The focus of the plan centers around the key priority of Data-Driven Decisions, which includes the goal of increasing systems to support students. This aligns directly with the current and new initiative outlined in the Mental Health Assistance Allocation Plan, which provides funding to school districts to help establish or expand school-based mental health care. The goal of Pasco County's Mental Health Assistance Plan is to expand on the multi-tiered system of support currently in place for social-emotional and mental health and improve the quality and accessibility of mental health services through direct services and/or referral to outside providers.

Senate Bill 7026 (SB 7026) and 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.



The district actions include providing training, coaching and resources to school teams and individual stakeholders in order for Pasco County Schools to become a Compassionate School District. This includes the alignment of positive behavior education and prevention (i.e. Social Emotional Learning, Trauma Informed Care, Youth Mental Health First Aid and Restorative Practices) with direct services on a full continuum. The plan has been developed to align to our current multi-tiered system of support.

The outline of the Mental Health Assistance plan is divided into four parts:

- Part One: Continuum of Mental Health Services and Supports
- Part Two: How Services/Supports will be Provided and Monitored
- Part Three: School Board Policies
- Part Four: Identified Expenditures

Part One: Continuum of Mental Health Services and Supports

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

Tier I: Universal Strategies-focus on promoting social and emotional well-being and development of all students.

- **School Counselor:** Pasco County Schools currently employs 173 school-based school counselors that are assigned to schools based on student population and identified unique school needs. All schools have a minimum of one school counselor, with some secondary schools having additional counselors depending on grade level, total population and unique school needs. The school counselor provides tier 1 services working proactively with students through the provision of school-wide lessons/interventions focused on health and wellness, decision-making, emotional regulation and conflict resolution.
- **School Nurses:** Pasco County Schools currently employs 47 school nurses. Each school in the district is assigned school nursing services 1–5 days a week based on student population and identified unique school needs. The school nurse serves to strengthen and facilitate the educational process by improving and protecting the health status of children and by identifying and assisting in the elimination or modification of health-related barriers to learning. School nurses also provide supervision and direction to clinic assistants, licensed practical nurses and other trained staff that provide direct health services to students in the school setting. Tier 1 supports include: health screening, immunization monitoring, promote school-wide health interventions, monitor for communicable disease, and provide health/wellness guidance for students and staff.
- **School Social Workers:** Pasco County Schools currently employs 68 social workers. Each school in the district is assigned social work services 1-5 days a week based on student population and identified unique school needs. The school social worker provides tier 1 services by utilizing a direct service delivery model to promote a connection between schools, families, and the community.
- **School Psychologists:** Pasco County Schools currently employs 43 school psychologists. Each school in the district is assigned psychologist services 1-5 days a week based on student population and identified unique school needs. School psychologists are strategically positioned in schools to promote mental and behavioral wellness and prevent mental and behavioral health problems. Tier 1 supports include: providing comprehensive school psychological services based on data-informed decisions through a collaborative, comprehensive problem-solving process utilizing current evidenced-based research in the areas of academic, behavioral, and social emotional.

Interventions/Resources:

- **Bullying Prevention:** School Counselors deliver classroom lessons that focus on understanding what bullying is and is not, recognizing bullying behaviors, responding to bullying situations, and promoting school safety.
- **District Crisis Intervention Team (CIT):** The primary purpose of the Crisis Intervention Team is to offer support and assistance to students, families, and staff when a crisis occurs. The CIT provides both direct and indirect emotional psychological first aid intervention services. The CIT delivers additional follow up supports depending on the nature and severity of the crisis. Due to the number of calls out the number of teams have increased from four to five regional teams, and the teams consist of trained school psychologist, social workers, school nurses and school counselors. Most CIT members have been trained in PREPaRe to assist Pasco in case of an emergency.
- **Early Warning System (EWS):** EWS is currently being utilized to have data readily available at the school or district level to accurately predict which students are at-risk or off-track for on-time high school graduation. MyAnalytics is another resource for schools to review school wide and individual data.
- **Parent/Family Education Nights:** Parent, family, and community involvement in education correlates with higher academic performance and school improvement. When schools, parents, families and communities work together to support learning, students tend to earn higher grades, attend school more regularly, stay in school longer, and enroll in higher level programs. A focus on parental education and involvement will continue to be a focus with the development of a Parent Mental Health training, where parents are educated on topics such as: bullying (physical, verbal and cyber), social media, sexting, sex trafficking and other issues negatively affecting a student's physical, emotional and mental health.
- **Positive Behavioral Interventions & Supports (PBIS):** Continue to increase capacity of schools utilizing positive behavior support through a proactive approach establishing the behavioral supports and social culture needed for all students in a school to achieve social, emotional and academic success.
- **Resource Mapping:** Use of a district resource map to identify experts in the field of mental health that have the knowledge to assist and/or train others, identify gaps in supports and provide training in the various resources and/or interventions.
- **Social Emotional Learning (SEL):** Continue to collaborate with an outside provider to assist with embedding SEL in instructional practices to support students in developing the necessary skills to reflect on their own learning, master academic content, engage in positive social interactions, and become lifelong learners. The 19/20 early release days will be used to train staff on SEL's.
- **Pasco Children Behavioral Health Partnership:** A community collaboration that promotes awareness and enhances mental health services to children while improving the overall wellness of the community. In addition, the partnership provides a System of Care grant that provides direct and wrap around services to students that qualify. With the ultimate goal of establishing a collective responsibility and collaboration of resources for at-risk families in the community.

- **Trauma Informed Care:** To train schools in Trauma Informed Care by building an understanding of the tenets: Safety, Predictability, Transparency, Voice and Choice. This first phase of three phases- introduces all school staff: on the compelling why for this initiative, the brain science behind trauma, how trauma impacts human behavior and recognizing what can be done to build resiliency for those impacted by trauma. Phase two and three training is delivered to schools by Campus Champions who trained to deliver the training.
- **Restorative Practices:** The ongoing goal and outcomes of Restorative Practices include positive relationships between students, teachers, and families. These positive relationships are believed to be a preventative factor for problem behaviors, which can lead to a lower rate of office referrals and suspensions. Training is provided to schools.
- **Mental Health Symposium:** A one-day professional development opportunity for community providers to train student services staff on the various community resources to enhance school based mental health services and to reduce the stigma of mental health.

Tier 2 and 3: Selected, brief strategies to support students at risk of or with mild mental health challenges.

- **School Counselor:** School counselors address student mental health concerns through a process of referral and identification generated by school administrators, faculty/staff, self/peer, parent/guardians or a community-based care provider. Services at the tier 2 level include when a referral is made, the school counselor will work with student and/or family to determine needs and determine if supports can be provided at school. If supports can be provided at school, the services are provided by the school counselor or other student services staff. If supports outside of school are appropriate, the school counselor will work with the family to refer to outside supports.
- **School Nurses:** Each school nurse provides health expertise, guidance and support and serves as a liaison to advocate for healthcare and a healthy school environment. Services at the tier 2 level include: development and review of Individualized Healthcare Plan (IHP) for students with chronic health conditions, provide access to appropriate resources for identified student health needs, consult with parents and/or medical professionals regarding health concerns, participate in multi-disciplinary team process to support student health needs and academic success, provide small group health counseling and consultation, and monitor EWS data (attendance, discipline, GPA) regarding health implications.
- **School Social Workers:** School social worker services at the tier 2 level include: classroom observations, collaborative intervention planning and implementation, group counseling services, individual counseling, assessment of student or family needs and connecting with community partners to address various systemic topics or needs. As well as the coordination of outside services on school campuses.
- **School Psychologists:** School psychological services at the tier 2 level include problem-solving student needs, monitoring service effectiveness, 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 intervention teams, and mentoring of students.
- **School Based Behavior Specialist:** Some schools have a behavior specialist allocated to a school. This allocation is based on the number of Exceptional Student Education (ESE) classes and/or the severity of the need at each school. Services at the tier 2 level include: being responsible for the development and implementation of behavioral and social skills programs for students with disabilities and implementation or coaching of others on research-based methods of classroom management and behavioral strategies.
- **Community Mental Health Supports:** Pasco County Schools currently have collaborative agreements with (10+) local community mental health agencies to provide mental health services for Pasco County students. These services range from outpatient supports to more intense/targeted mental health services. Our community collaboration also includes the referral to additional community support to address the needs of students and families:
 - Tier 1: Outpatient office/school based
 - Tier 2: Therapeutic Behavioral Onsite Services
 - Tier 3: Statewide Incentive Psychiatric Program (SIPP)

Interventions/Resources:

- **Positive Behavioral Interventions & Supports (PBIS):** Continue to increase capacity of schools utilizing Tier 2 PBIS supports through a proactive approach by providing remediation for students not meeting the Tier 1 expectation. Support students ‘at-risk’ for more intense problem behavior. Targeted instruction/intervention & supplemental support, in addition to and aligned with core academic & behavior curriculum.
- **TOOLS:** The TOOLS program is an educational intervention for students who are involved in a disciplinary action due to substance abuse, substance possession or fighting/physical aggression. The program provides effective prevention education while helping students remain academically engaged by reducing out of school suspension. Additional resources will be allocated to support this intervention at secondary schools.
- **Sandy Hook Promise:** Pasco County Schools has partnered with the Sandy Hook Promise, a non-profit organization established to prevent gun violence by teaching others to recognize the warning signs, how to intervene and get help for individuals who may be at risk of hurting themselves or others. This initiative has been implemented through the use of the "Know the Signs Programs." During the 2018-2019 school year a group of students from each school were trained in:

Start with Hello, and all secondary school were trained in *See Something, Say Something*. For the 2019-2020 school year, the training will continue to focus on all areas of “Know the Signs” program.

- **Youth Mental Health First Aid (YMHFA):** Pasco currently has 22 trainers, 18 of these trainers are also trained in Child-Mental Health First Aid. The training began in 2018/2019 while a full comprehensive plan for training for 2019-2020 is being created. The goal is to increase the number of employees trained in YMHFA, having all staff trained. Additional community partners have been trained to assist Pasco County Schools with this training: University of South Florida-Tampa (4 staff) and St. Leo’s College- Dade City (1 staff).

Screening & Assessment:

Students can be referred for mental health counseling or substance abuse treatment services in school and through community-based services. Referrals for these services can come from the staff, students or parents, as most referrals come through the School-Based Intervention Team. Services may be provided on campus by a trained staff member or referred to community partners.

Pilot: A grant with University of South Florida: (3) middle schools will be trained in utilizing a universal screener (3) per year for 3 years. Results will be analyzed and used to train staff on identifying more effective intervention selection.

Other data sources and incidents that will be considered for screening/assessment:

- At-Risk Youth referrals
- Baker Act
- Court ordered mental health services
- Early Warning Systems
- Expulsion
- Juvenile intelligence data sharing
- Threat Assessment
- Mental Health Assessment referrals

Intervention/Treatment/Recovery:

- Continue to refine new assessment procedures of threat to self and threat to others, in addition to the adoption of the new state threat assessment procedures and training
- Continue to alignment of law enforcement and school district procedures to ensure effective collaboration when providing assistance/support for all threats
- Refine the Pasco County District Threat Assessment Team - to assist schools in problem solving unique situations, review at-risk data or systemic issues for at-risk students. This district team will meet monthly or more often if warranted
- Development of a District Safety Prevention and Reflection Workgroup - collaboration with district and school administrators. This cross functional team will meet monthly
- Refinement of threat assessment team at each school which meets monthly or more often if warranted, to review incidents of threat and problem solve additional supports and services if needed.
 - Utilizing the new confidential Threat Assessment Database as a case management system to monitor student and team actions
- Continue data sharing between the school district and local law enforcement agencies
- Continue to attempt data sharing to collaborate with local Baker Act facilities, if available
- Work in collaboration with community mental health providers by utilizing the new universal release to improve community collaboration
- Continue funding to all middle and high schools for Alternatives to Suspension (ATS) program
- Continue to develop expertise of student service staff to provide school-based coaching in tier 3 supports
- Continue to develop safety plans to support students who have been Baker Acted. The process includes schools being notified by the Pasco County Mental Health Liaison to school administration and school student services staff. The plan is developed to support the student upon re-entry to prevent potential future baker acts.

Focus on evidence-based mental health services for students with:

- **One or more co-occurring mental health**
- **Substance abuse diagnosis**
- **Students at high risk of such diagnosis**

The following evidence based mental health and substance abuse interventions will continue or will be included in the new mental health initiatives:

This includes targeted small group instruction as well as utilization of the following curriculum/interventions:

Cognitive Behavioral Therapy: Cognitive behavioral therapy, or CBT, is a short-term therapy technique that can help people find new ways to behave by changing their thought patterns. Engaging with CBT can help people reduce stress, cope with complicated relationships, deal with grief, and face many other common life challenges

Coping Cats: The Coping Cat program is a [CBT](#) manual-based and comprehensive treatment program for children from 7 to 13 years old with separation anxiety disorder, social anxiety disorder, generalized anxiety disorder, and/or related anxiety disorders. [1]

Dialectical Behavior Therapy: Dialectical behavior therapy (DBT) provides clients with new skills to manage painful emotions and decrease conflict in relationships.

Emotional Focused Therapy: Emotionally Focused Therapy (EFT) is a short-term form of therapy that focuses on a relationships and attachments/bonding.

Mindfulness: Mindfulness is a state of active, open [attention](#) on the present. Mindfulness can be a healthy way to identify and manage hidden emotions that may be causing problems in our personal relationships.

Motivational Interviewing: MI is a counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes.

Second Step: Second Step is a program rooted in social-emotional learning (SEL) that helps transform schools into supportive, successful learning environments uniquely equipped to encourage children to thrive. More than just a classroom curriculum, Second Step's holistic approach helps create a more empathetic society by providing education professionals, families, and the larger community with tools to enable them to take an active role in the social-emotional growth and safety of today's children.

Social Skills: Social skills are the skills we use to communicate and interact with each other, both verbally and non-verbally, through gestures, body language and our personal appearance. Human beings are social creatures and we have developed many ways to communicate our messages, thoughts and feelings with others.

Trauma Informed Care: Trauma-Informed Care (TIC) understands and considers the pervasive nature of trauma and promotes environments of healing and recovery rather than practices and services that may inadvertently re-traumatize.

TOOLS: The TOOLS program is an educational intervention for students who are involved in a disciplinary action due to substance abuse, substance possession or fighting/physical aggression. The program provides effective prevention education while helping students remain academically engaged by reducing out of school suspension. Additional resources will be allocated to support this intervention at secondary schools.

Youth Mental Health First Aid: YMHFA training introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations. Topics covered include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders.

Zones of Regulations: The Zones of Regulation is a conceptual framework used to teach students self-regulation and self-control.

Identified strategies to:

- **Improve the early identification of social, emotional, or behavioral problems or substance abuse disorders**
- **Improve the provision of early intervention services**
- **Assist students dealing with trauma and violence**

Pasco County Schools: Creating Compassionate Schools



Pasco County Schools has made a commitment of Creating Compassionate Schools. **Compassionate** Schools benefit all students who attend but focus on students chronically exposed to stress and trauma in their lives. Schools create compassionate classrooms and foster compassionate attitudes of their school staff. The goal is to keep students engaged and learning by creating and supporting a healthy climate and culture within the school where all students can learn. It is not a program; it is a process and as such is not “one size fits all.” Each school and community will develop their own unique compassionate “personality.” This is done by engaging in the following professional development.

- Handle with Care
- Positive Behavioral Interventions & Supports
- Social Emotional Learning
- Summer Behavior Institute
- Trauma Informed Care
- Youth Mental Health First Aid

Identify strategies or programs to reduce the likelihood of at-risk students developing social, emotional or behavioral problems: Depression, anxiety disorder, suicidal tendencies, or substance abuse disorders

- Check and Connect
- Mental Health Referrals
- SEL- Adoption of SEL standards
- Threat Screener
- Trauma Informed Care Training
- Youth at Risk Staffing
- Youth Mental Health First Aid

Part Two: How Services and Supports Will be Provided and Monitored

Employment of school based mental health service providers to reduce staff-to-student ratios and meet student mental health assistance needs

- Two mental health coaching positions were created to support school-based student service teams to work more effectively and efficiently in meeting the needs of students. The two staff members assist schools in problem solving, identify priorities and providing coaching as needed.
- Many student services staff are assignments to multiple schools, but most assignments were condensed to limit assignments to no more than two schools
- Additional school counselor, social worker, psychologist and nurse positions were allocated to reduce the staff to student ratios at high need schools or regions

Strategies to increase the amount of time student services personnel spend providing direct mental health services

- Staff job descriptions will be updated to identify student services staff priorities that focus on assessment, diagnosis, intervention, treatment and recovery for social emotional, behavioral and mental health services.
- Through the use of Request for Services, district supervisors and administrators will be able to monitor and support staff’s work in regards to timelines and additional supports as needed
- Due to school psychologist shortage, we have contracted with outside agencies as well as online services

School board policies and procedures for all Schools, including Charter schools to ensure:

- **Student referred for mental health screening are assessed within 15 days of referral**
- **School-based mental health services are initiated within 15 days of identification and assessment**
- **Community-based mental health services for students are initiated within 30 days of referral**

The new requirement was added into school board policy on 7/23/19. To assist schools in adhering to the timeline, a new system for will be developed in the Pasco County student information system: myStudent to track all *Request for Services*. When a student is referred to a school-based student service staff member, the student will be identified in myStudent and the timeline will be monitored to ensure the student is assessed with in 15 days. If a student is assessed and it’s determined they are in need of mental health services, the student will also be identified in myStudent and the timeline will be monitored to ensure the student has been services are initiated within 15 days.

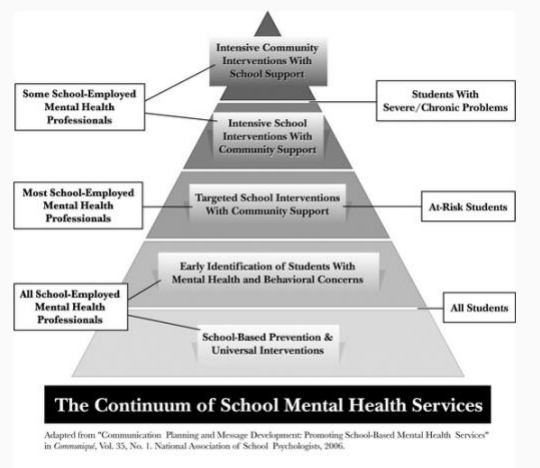
If a student is assessed and services are needed and can’t be provided school based and a referral to an outside services are not available, a referral to Pasco MH Liaison will occur.

Pasco County Schools contracted with Central Florida Behavior Health Network, as the managing entity for all mental health providers funded by the MH Allocation. All subcontracts between CFBHN and all community providers include the following: Individuals needing treatment services will receive services, depending on the severity of individual need, within the following timeframes:

- A. Emergent need: within six (6) hours of first contact

1. An individual who is in imminent danger of harm to self or others, or who requires immediate access to services, must be directed to the most appropriate care, which may include: an emergency room, crisis stabilization unit or detoxification services for evaluation and treatment, if indicated. Care is to be rendered within six (6) hours of first contact.
- B. Urgent need: within forty-eight (48) hours of first contact
 1. An individual whose clinical situation is serious and is expected to deteriorate quickly if care is not provided; however, the situation does not require immediate attention and assessment, the individual is not a danger to self or others and is able to cooperate in treatment. These individuals are to be seen within forty-eight (48) hours of first contact.
- C. Routine need: within ten (10) calendar days of first contact
 1. First Contact to Assessment
Service requests for symptoms that do not meet the criteria for emergent or urgent, and do not substantially restrict an individual's activity, but could lead to significant impairments if left untreated, are to receive assessment services within (3) calendar days (72) hours. This is mandatory for child welfare involved individuals.
 2. First Contact to First Treatment Appointment
Service requests for symptoms that do not restrict normal activity but could develop significant impairment if left untreated are to receive services within seven (7) calendar days. This is mandatory for child welfare involved individuals and persons discharged from acute care and residential level I and II.

Process for coordinating mental health services with a student's primary mental health care provider and other mental health providers involved in the student's care



Once a determination has been made that a student needs mental health counseling or services, the student services staff will work with the parent/guardian to obtain a signed release to collaborate with the community provider. If it's determined that services cannot be provided on campus, a referral will be made to CFBHN Project manager. This is a new position being allocated to assist with the coordination of services and to facilitate the communication with the parent, school and outside provider. The District Mental Health Liaison will coordinate with the Project Manager of CFBHN to obtain the needed mental health supports. The project manager will also coordinate the services needed, follow-up on the student's treatment plan and assist with barriers to treatment when applicable.

Process for coordinating mental health services for students at charter schools that are part of the school district's plan

All charter school participating with the district plan will be included in the plan in all areas. This includes:

- Stipends provided for attending training: SEL (early release), YMHFA, PBIS and TIC
- Access to the new electronic data collection tools for threat assessment
- Ability to refer students to the Pasco Youth at Risk staffing team
- Resources purchased
- Ability to refer to MH liaison for potential MH allocation for students in need of community mental health services that are not available through other funding sources
- Administrator training
- Access to personnel for problem solving
- Access to funds for alternative to suspension

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

Central Florida Behavior Health Network (CFBHN) will continue to be contracted as Pasco County Schools managing entity for all mental health referrals and services being paid by the MH Assistance funds. The benefits of utilizing the managing entity is so that a variety of mental health services and funding options for families can be expanded to provide a true System of Care for Pasco County students. CFBHN develops contracts with community providers to provide services to Pasco County students. Included in the contracts are the identified services, fees, liability and special provisions.

Included in our contract with CFBHN is the continued funding of a Project Manager, who is a licensed mental health provider, located at Pasco County Schools district office but employed by CFBHN. The project manager will continue to provide the following: Program coordination, voucher approval, data collection and analysis, providing support and consultation to address behavioral health concerns for eligible students and families. The program manager will work with community partners/stakeholders and help individuals and families, where applicable, access services and to be engaged in those services. Pasco county schools will continue to engage in Memorandum of Understandings (MOU's) and/or interagency agreements with other community mental health providers to provide services on campus. The services providers bill Medicaid for eligible students. Pasco County schools provides in-kind services if appropriate.

Community Action Team: The CAT is designed to allow children and families in Pasco County the option to remain in the least restrictive environmental setting with support from a multiple disciplinary team. The CAT program focuses on strengthening relationships within the family and developing a natural support system for the individual served and their family. Pasco County School collaborated with Bay Care to access and make referrals as needed. (Bay Care)

Counseling to Optimize Mental health and Promote Achievement in Student Success: Project Compass is a school overlay program in Pasco County designed to incorporate facilitative assistance into school settings through positioning mental health professionals within high risk targeted schools on a daily basis to provide family navigation, training, screening, intervention and counseling services. (Bay Care)

Mobile Response Team: MRTs provide on-demand crisis intervention services in any setting in which a behavioral health crisis is occurring, including schools. Mobile response services are available 24/7 by a team of professionals and paraprofessionals, who are trained in crisis intervention skills to ensure timely access to supports and services. In addition to helping resolve the crisis, teams work with the individual and their families to identify and develop strategies for effectively dealing with potential future crises. (Bay Care)

Program Implementation and Outcomes

Information will be surveyed and collected by the district and will be used for additional mental health referral options. The data below will be submitted annually by September 30th to the Florida Department of Education.

System for Tracking:

- 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 service providers,
- Number of students referred to community based mental health service providers
- Number of students who received school-based interventions, services or assistance
- Number of students who received community-based interventions, services or assistance

Information will be surveyed and collected by the district and will be used for additional mental health referral options. The data below will be submitted annually by September 30th to the Florida Department of Education.

Identify the number and ratios of FDOE-certified or licensed: School based mental health services providers employed by the district (by licensure type)

- School psychologist
- School social worker
- School counselor
- Other mental health providers

Part Three: School Board Policies

Threat Assessment Teams

The primary purpose of a threat assessment is to minimize the risk of violence at school. Threat assessment teams are responsible for the coordination of resources and assessment and intervention with individuals whose behavior may pose a threat to the safety of school staff or students consistent with the model policies and procedures developed by the Office of Safe Schools which addresses early identification, evaluation, early intervention, and student support.

A. Location and Membership

1. Threat assessment teams are located at each school in the District and composed of individuals with expertise in counseling, instruction, school administration, and law enforcement.
2. The Board authorizes the Superintendent to create procedures for the purpose of:
 - a. identifying team participants by position and role;
 - b. designating the individuals (by position) who are responsible for gathering and investigating information; and
 - c. identifying the steps and procedures to be followed from initiation to conclusion of the threat assessment inquiry or investigation.

B. Responsibilities and Activities of Threat Assessment Teams: The responsibilities and activities of threat assessment teams include, but are not limited to, the following:

1. identification of individuals in the school community to whom threatening behavior should be reported and provide guidance to students, faculty, and staff regarding recognition of threatening or aberrant behavior that may represent a threat to the community, school, or self;
2. utilizing the Department's behavior threat assessment instrument developed pursuant to F.S. 1001.212;
3. consult with law enforcement when a student exhibits a pattern of behavior, based upon previous acts or the severity of an act, that would pose a threat to school safety;
4. consult with law enforcement when a student commits more than one (1) misdemeanor to determine if the act should be reported to law enforcement;
5. if a preliminary determination is made by the threat assessment team that a student poses a threat of violence or physical harm to himself or others, the threat assessment team will report its determination to the Superintendent; The Superintendent shall immediately attempt to notify the student's parent or legal guardian. However, nothing in this paragraph shall preclude District personnel from acting immediately to address an imminent threat.
6. if a preliminary determination is made by the threat assessment team that a student poses a threat of violence to himself or others or exhibits significantly disruptive behavior or need for assistance, authorized members of the threat assessment team may obtain criminal history record information pursuant to F.S. 985.04(1) as provided in F.S. 985.047; Members of the threat assessment team may not disclose any criminal history record information obtained pursuant to this paragraph or otherwise use any record of an individual beyond the purpose for which such disclosure was made to the threat assessment team;
7. create procedures related to engaging behavioral health crisis resources.

C. Referral to Mental Health Services

All school personnel who receive training pursuant to F.S. 1012.584 shall be notified of the mental health services that are available in the District. All student referrals for mental health screenings, school-based mental health services, and/or community based mental health services shall be initiated within the timeframes established by law.

D. Sharing of Information

The District and other agencies and individuals that provide services to students experiencing, or at risk of, an emotional disturbance or a mental illness and any service or support provider contracting with such agencies may share with each other records or information that are confidential or exempt from disclosure under F.S. Chapter 119 if the records or information are reasonably necessary to ensure access to appropriate services for the student or to ensure the safety of the student or others.

E. Immediate Mental Health or Substance Abuse Crisis

If an immediate mental health or substance abuse crisis is suspected, school personnel shall follow policies established by the threat assessment team to engage behavioral health crisis resources. Behavioral health crisis resources, including, but not limited to, mobile crisis teams and school resource officers trained in crisis intervention shall provide emergency

intervention and assessment, make recommendations, and refer the student for appropriate services. Onsite school personnel shall report all such situations and actions taken to the threat assessment team, which shall contact the other agencies involved with the student and any known service providers to share information and coordinate any necessary follow-up actions. Upon the student's transfer to a different school, the threat assessment team shall verify that any intervention services provided to the student remain in place until the threat assessment team of the receiving school independently determines the need for intervention services.

Each threat assessment team shall report quantitative data on its activities to the Office of Safe Schools and shall utilize the threat assessment database developed pursuant to F.S. 1001.212.

F. Referral to Mental Health Services

All school personnel who receive training pursuant to F.S. 1012.584 shall be notified of the mental health services that are available in the District.

G. School Environmental Safety Incident Reporting

The Superintendent is responsible for ensuring the accurate and timely reporting of incidents related to school safety and discipline in accordance with Florida law and rules promulgated by FLDOE.

Expenditures Assurance:

The following expenditure include the assurance:

- 100% of the 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.
- The mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses.
- Pasco County Schools currently utilizes General Revenue Fund, Individuals with Disabilities Education Act (IDEA) grant, Title IV and other Federal Program grants to support the continuum of services to meet the social emotional and mental health needs of our students.
- Medicaid billing is used for students who are Medicaid eligible, the purpose of the Medicaid Certified School Match program is to provide reimbursement for medically necessary services provided by a school district for Medicaid eligible students.

Expenditures:

Information will be surveyed and collected by the district and will be used for additional mental health referral options. The data below will be submitted annually by September 30th to the Florida Department of Education.

- Number of school-based mental health providers funded by the allocation and licensure/certification for each.
- Number of community-based mental health providers funded by the allocation and licensure of each.
- School district expenditures for services provided by contract-based collaborative efforts or partnerships with community mental health program agencies or providers.

Mental Health Allocation Budget for 2019-2020

Mental Health Allocation			\$1,924,067.00
Roll Forward			\$797,299.42
Total			\$2,721,366.42
Social Emotional Learning (AIR) - See attached plan	Embed Social Emotional Learning in instructional practices in order to support students in developing the necessary skills to reflect on their own learning, master academic content, engage in positive social interactions, and become lifelong learners.	1	\$242,895.00
Together We Stand	Funding to obtain a guest speaker.	1	\$5,000.00

Evidence-based Tier 1, 2 and 3 Resources	Purchase evidence-based Tier 1, 2 and 3 resources.	1	\$50,000.00
Materials, resources and supplies	Materials, resources and supplies for professional development.	1	\$50,000.00
Parent Training	Provide funding to obtain guest speakers and child care.	3	\$5,000.00
Assessment Protocols for screening and assessment	Funding to purchase behavior rating scales and pre/post data outcomes.	1	\$50,000.00
PBIS Trainers	Increase cadre of trainers to provide targeted training at tier 2 & 3.	1	\$30,000.00
Alternatives to suspension	Provide support to student to maintain their access to instruction while providing targeted skill development, related to academic and social/emotional deficits. Additional duty to for staff. Provides all 32 secondary/alternative schools and charter schools that opt into the district plan with \$3,750 for ATS programs.	1	\$130,000.00
Stipends, Substitutes, Summer Hours	Stipends, substitutes and summer hours needed to provide evidence-based mental health trainings for staff related to co-occurring mental health or substance abuse diagnoses and students at risk of such diagnosis (e.g. Youth Mental First Aid Training, Trauma Informed Care, Student Congress, PBIS, etc.).	1	\$100,000.00
Threat Assessment Tool	An electronic threat assessment tool to capture all of the necessary information from beginning to the end of the process thus providing transparency and supporting best practices.		\$30,000.00
Substitutes	Substitutes to provide additional adults to assist with temporary safety & security of students.	1	\$90,000.00
Pasco County Mental Health Liaison	School Social Worker on assignment to support coordination of baker act reentry, collaboration with community agencies to support referrals to mental health agencies including Central Florida Behavioral Health Network.	2	\$60,234.84
Central Florida Behavioral Health Network	Manage the mental health services being provided and Licensed Mental Health Project Manager.	1,2	\$566,074.71
Bookkeeper/Secretary	Clerical support for data reporting.	2	\$34,495.16
Secretary II 245	Clerical support for data reporting.	2	\$34,495.16
Contracted Behavior Analyst Support	To provide behavior analyst support to the most at risk students in need to Tier III mental health supports.	3	\$80,000.00
Tier 3 Behavior Support (2 Behavior Specialists)	These positions will be responsible for early intervention and problem-solving as a relates to behavior and social emotional learning. This would include expertise in the area of functional behavioral analysis, data collection, progress monitoring, intervention implementation and analyzing students' response to intervention in order to assist school-based teams in making data driven decisions. The District Behavior Specialist position would also focus on improving outcomes for students. This position would ensure best practices are in place, quality interventions are implemented, and appropriate resources are aligned to student needs.	3	\$142,877.96
Program Coordinator for Social Emotional Learning	This position will build a comprehensive system of supports and structures to enable social emotional learning at be implemented at the classroom level.	1	\$80,893.19

	This will include overseeing the professional learning, guiding the district- social emotional learning team and oversee project management with SEL Solutions.		
Supervisor for Mental Health Initiative	"This position will focus on and monitor the implementation of multi-tiered system of supports. To ensure evidence-based mental health care, assessment, diagnosis, intervention, treatment and recovery services are provided to students. Implement strategies to increase the amount of time that school-based student services personnel spend providing direct services to students, which may include the review and revision of district staffing resource allocations based on school or student mental health assistance needs. "	1,2	\$99,261.24
Additional student services instructional staff (1 certified school counselor)	Direct employment of school-based mental health service providers to reduce the staff-to-student ratios and meeting student mental assistance needs at an alternative school for student involved in the juvenile justice program and have therapeutic social emotional needs.	3	\$68,983.25
Additional student services staff to reduce ratio (1 school psychologist, 1 school nurse, 1 school social worker)	Direct employment of school-based mental health service providers to reduce the staff-to-student ratios and meeting student mental assistance needs.	3	\$200,213.03
Behavior Analyst (.25)	Direct employment of school-based mental health service providers to reduce the staff-to-student ratios and meeting student mental assistance needs.	3	\$16,002.66
Additional student services instructional staff (1 school psychologist, 1 school nurse, 1 school social worker, 1 certified school counselor)	Instructional staff to provide coaching to school-based student services staff related to the mental health initiatives.	1,2	\$269,196.28
Total			\$2,435,622.48
Charter School Proportionate			\$142,871.97
Total			\$2,578,494.45
Evidence-based treatment elements *The plans required under paragraph must be focused on delivering evidence-based mental health care treatment to children and include the following elements:			
1. Provision of mental health assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.			
2 Coordination of such services with a student's primary care provider and with other mental health providers involved in the student's care.			
3. Direct employment of such service providers, or a contract-based collaborative effort or partnership with one or more local community mental health programs, agencies, or providers.			
Note: Funding totals are approximate and may be adjusted.			