

Sumter County
Mental Health Plan
School Year 2020-21

Focus on delivery of evidence-based mental health services through MTSS Framework (including students with one or more co-occurring mental health or substance abuse diagnoses and students at high risk of such diagnoses):

The Sumter County School District implements evidence-based Multi-Tiered System of Supports. This approach allows us to meet the mental health needs and provide proactive, timely and evidence-based interventions to all students, whether their instructional model is face to face or distance learning. Sumter County now segregates Threat Assessment Team meetings from RtI meetings by establishing procedures for Mental Health Problem Solving Teams (MH/PST) at each school. This team will include the school counselor, school administrator, and outside agencies, as appropriate, with input from school staff and parents. We utilize a three-tier Problem/Solving Response to Intervention approach under the umbrella of the Multi-Tiered System of Supports (MTSS) framework with varying levels of support beyond what is used as the core curriculum. Sumter County will also employ a Multiagency Network (MAN) to coordinate and schedule meetings with stakeholders required by statute. The MAN includes school based personnel, SEDNET, Community Action Team (CAT) members, and other agencies, as appropriate based on student needs.

Tracking numbers of students at high risk for mental health or co-occurring substance abuse disorders is accomplished through a school based spread sheet for each area which feeds into a district spreadsheet. Each school MH/PST will maintain a spreadsheet throughout the year of names and steps taken for students who are at risk as indicated through the EWS, referral from staff, parents, students or law enforcement agencies, Baker Acts, student registration or transferred records information. The spreadsheet documents referral for screening/assessment date, referral for services date, recommended services, follow up meeting dates, and school-based and/or community-based services received. Sumter will transition to use of the Seminole Database for evaluating and tracking students who have made a threat. (See final paragraph in this section)

In Tier 1 school-wide and classroom-based strategies are used. Tier 1 includes core instruction in substance abuse, social-emotional learning, mandated mental health, substance abuse, and child trafficking curriculum, and overall mental health programs. If a child continues to exhibit mental health needs beyond the scope of the core curriculum, he or she will receive additional assistance, which can be provided with Tier 2 supports. All staff will be trained to support the mental health needs of our students using the state approved mental health first aid training program, which will help staff to recognize and respond appropriately to students in distress.

In Tier 2, we employ a standard protocol intervention approach. We utilize our Early Warning Systems data along with other student data, parent, staff, self, and peer referrals to identify students who may require additional mental health support. Targeted evidence-based mental health supports and interventions are provided. Interventions may include mental health counseling, substance-abuse counseling, anger management groups, social skills groups, check-

in/check out, mentoring, peer advisory, as well as other evidence-based interventions. The mental health supports and interventions are implemented based on individual student need to allow the child to achieve the social emotional standards necessary for success as a student.

If the combination of core and supplemental interventions is not sufficient for the student to meet expectations, Tier 3 intensive interventions and supports are added. Tier 3 interventions may include mental health counseling, substance-abuse counseling, functional behavior assessments to guide positive behavior intervention plans, as well as other evidence-based interventions.

When warranted, at Tier 1, 2, or 3, the Threat Assessment Team (TAT) will review pertinent data and develop an action plan for the student, as outlined below. If the interventions are not successful and/or require outside agency involvement, the TAT will refer the student directly to the appropriate agency or to the MAN, when needed, and share information regarding the student. Assessments will occur within 15 days of the initial referral, as per statute. Community agencies and/or the MAN will use the assessment/ diagnosis/ intervention/ treatment and recovery protocol to match or seek the appropriate services for the student. Therapy may include trauma-based therapy, substance abuse therapy, or therapy for co-occurring diagnoses.

The TAT's duties are the coordination of resources and assessment and intervention with individuals whose behavior may pose a threat to the safety of school staff or student consistent with the model policies developed by the Office of Safe Schools. The TAT will include persons with expertise in counseling, instruction, school administration, and law enforcement. The team meets monthly to review students of concern, based on criteria set by the district using indicators from legislation as well as other factors of mental health. However, if at any time a student is in immediate, acute distress with potential to harm him/herself or others, the TAT will convene and intervene immediately. Sumter TAT members receive mandatory training in use of the state approved CSTAG as well as Sumter TAT Procedures. Sumter County will employ outside community agencies, parents, primary care providers and others in this process to develop the treatment plan needed for the student. If a student must be out of school for any length of time due to treatment, a plan for re-entry will be developed by the TAT and involved groups/agencies when the student returns. Procedures for all aspects of the TAT have been developed to include referring at-risk students, gathering input from staff, peers, and family, information sharing with agencies and staff, making appropriate recommendations, follow through of services, monitoring of student success, notification of school staff, as appropriate, and documentation of steps taken.

School based personnel for face to face and distance learning models are trained in the Columbia Suicide Screener and de-escalation procedures provide immediate evaluation and interventions to students with imminent needs. Mobile Response Team (MRT) is called for further de-escalation or assistance, if needed, unless the threat is deemed to need an immediate involuntary evaluation (Baker Act)

During the 2020-2021 school year, Sumter County Schools will train for and transition to implementation of the Threat Assessment Data Base developed by Seminole County Schools to evaluate threats through CSTAG and house data in a secure manner for Sumter students who have been evaluated for a threat.

Strategies and programs to improve identification and reduction of likelihood of development of mental health issues:

Face to Face and Distance Learning students will both be served by these processes. As the number of distance learning students is increasing, the school will continue to rely on teacher input to monitor student well-being, but we will request parent input on a regular basis to help us monitor each student's emotional and mental well-being and respond with timely and appropriate measures. All mental health supports and services will be available to all Sumter students.

Tier I: (Universal)

- Prevention: School wide School Culture Plan which integrates: trainings for teachers and paraprofessionals for creating a trauma sensitive classroom in response to the COVID Pandemic, PBIS systems, school wide research-based Character Education programs, school-wide social emotional learning program (varies by grade level and school with elementary schools using Sanford Harmony, and middle and high schools using Everfi social emotional curriculum or Alive2Thrive), attendance monitoring and recognition, and school based mentoring program, anti-bullying trainings for staff and students, 5 hours of mental health and suicide awareness training for students grades 6-12, internet safety/child trafficking and substance use and abuse avoidance curriculum for students grades K-12. Mental Health training for all staff (YMHFA trainings ongoing with all administrators, counselors trained, teachers at all of our 8 schools trained, and approximately 60% of support staff trained – our goal is to have to have 80% of support staff trained by end of year), school-family collaboration, availability of Kognito training for all staff.
- Identification and Referral: Early Warning System (EWS), surveys, staff, parent, peer referral, Social Sentinel online monitoring of social media
- Assessment: school-based problem solving team data review
- Diagnosis: diagnosis is reached through a collaborative effort of school-based and outside community providers
- Intervention: consultation with school psychologist, school social worker, school counselor

Tier II: (Targeted/At-Risk)

- Identification and Referral: EWS, student responses to mental health curriculums, referral from staff, school nurse/health professional, parent, or peer, TAT meetings to assess current mental health functioning of the student, feedback forms completed by mental health providers, teachers/staff, and parents, school-based problem solving teams
- Assessment: school or community based mental health screening, school or community based mental health assessment, informal interview of student with data review
- Diagnosis: diagnosis is reached through a collaborative effort of school-based and outside community providers

- Intervention: “You Are Not Alone” Suicide Prevention Curriculum for use with students at any grade level as needed, increased family-school collaboration, small group counseling on topics such as reducing the likelihood of at-risk students developing social, emotional, or behavioral health problems, depression, anxiety disorders, suicidal tendencies, or substance use disorder, check-in/check-out system, referral for outside agency counseling at school and/or home, school based social work services, supplemental social-emotional program for counselor, substance abuse counseling, anger management counseling, peer advisory, mentor program, problem solving/response to intervention process, connect children, youth, and families who may experience behavioral health issues with appropriate services
- Treatment and Recovery: TAT meetings to develop plan and timeline for implementation, monitoring, and gathering data, transitional plans from Tier 2 to Tier 1

Tier III (Intensive) or Immediate/Acute Distress:

- Identification and Referral: Baker Act, arrest, threat of violence to self or others, referral from staff, school nurse/health professional, parent, or peer, TAT meetings, feedback forms completed by mental health providers, teachers/staff, and parents, school-based problem solving teams
- Assessment: school based or community based risk or threat assessment, law enforcement officer assessment, functional behavior assessment, school or community based mental health assessment, including MRT, Baker Act assessments from the receiving facility, and psychoeducational assessments
- Diagnosis: diagnosis is reached through a collaborative effort of school-based and outside community providers
- Intervention: Employ services through outside agencies, including MRT, school based individual counseling, school based group counseling, crisis interventions, crisis response services, safety contracts to reduce the likelihood of at-risk students developing social, emotional, or behavioral health problems, depression, anxiety disorders, suicidal tendencies, or substance use disorder, or students who have dealt with trauma or violence, facilitate collaboration for mental health provider and primary care appointments, as appropriate, school-based social work services, individualized treatment plans, trauma-focused cognitive behavioral therapy, connect children, youth, and families who may experience behavioral health issues with appropriate services. Telehealth was implemented for therapy and counseling in the spring of 2020 due to COVID-19 Pandemic. Sumter County has added the use of telehealth as an acceptable option for school, community, and contract based therapy when face to face therapy is not possible.
- Treatment and Recovery: Employ outside agency, group or individual counseling, plan for re-entry into school if treatment and recovery require time outside of school, monitoring of safety plans or contracts, transitional plans from Tier 3 to Tier 2

Strategies to increase school based mental health services:

Sumter District Schools continues to fund a Licensed School Psychologist – Mental Health position for increased school based mental health services and successful integration of all components of our Mental Health Plan. In the 2020-21 school year, Sumter will use the Mental Health Allocation, along with funding from our Title IV, Part A grant, to pay the salary of a Licensed School Psychologist – Mental Health - for direct services to students, to reduce the ratio of student to mental health staff. Sumter District also funds two additional certified School Psychologists who are also highly qualified and are called upon to serve students with mental health needs. Sumter will continue to use the Mental Health Allocation to fund a position for Social Worker – Mental Health for coordination and integration of mental health services between families, school, and community services.

To protect the maximum amount of time that school based student services personnel spend providing direct services to students, school administration at each school have been directed to continually review school counselor duties and allocation of time. Schools must ensure that school counselors attend the monthly school Threat Assessment Team meetings, have the flexibility to react to crisis situations, and have protected time to provide direct mental health services to students.

Collaborative partnerships with community partners and agencies:

Sumter District Schools has partnered with community based resources to expand and enhance mental health services available to students.

Sumter Schools has developed MOUs or MOAs with the following agencies for on and off campus services:

- Life Stream Behavioral Center of Lake and Sumter County – Mobile Response Team, Community Action Team, Baker Acts, TBOS (Therapeutic Onsite Services), CCOS (Children’s Clinical Onsite Services), Turnabout Program (Substance Abuse) Potentials (risk avoidance) therapy
- Lake and Sumter Children’s Advocacy Center – contracted services for trauma based therapy
- Edgenuity Purpose Prep – mental health instruction mandates
- Social Sentinel – online monitoring of social media
- Kids Central – ESSA services
- Department of Children and Families – child welfare interventions
- Youth and Family Alternatives – attendance (CINS/FINS)
- Sumter County Health Department – health education and screenings, health services
- SEDNET
- Division of Juvenile Justice – students with criminal activity
- Agency for Persons with Disabilities
- The Centers – services for person with developmental disabilities

- E3 Solutions (Suicide Prevention and risk behavior avoidance)

We will coordinate, developing MOUs as appropriate, with state and community agencies, as listed below, for mental health services to increase our resource base for students and families, primarily for off campus services:

- Lutheran Services Florida
- CARD (Center for Autism and Related Disabilities)
- Hospice
- Families First
- New Beginnings Youth Shelter
- FSPT (Family Services Planning Team)
- E3 Solutions (Suicide Prevention and risk behavior avoidance)
- Sumter CAP (Risk behavior avoidance)

Ensuring Mental Health Timelines:

When mental health referrals are made to school-based or community-based mental health providers, the assessments will be provided by a district employed school psychologist within 15 days of the referral–School-based mental health services will be initiated within 15 days after identification and assessment through the use of a district employed School Psychologist. MOUs and contracts with community based service providers must state that the receiving agency can and will initiate mental health services within 30 of the referral from the school.

Describe the process for coordinating mental health services with a student’s primary and other mental health providers:

Sumter County will seek parent permission for release of records from primary and other mental health providers. Through MOUs with agencies and partners, we will share information for students at risk, as provided by the guidelines in legislation. Information gathered and housed by the TAT will be shared with the CAT, MRT, and/or MAN, and other agencies, when appropriate for a continuum of services. Social workers and/or other school based mental health professionals will work with parents/guardians and all agencies, care providers, or groups involved with the assessment, diagnosis, intervention, treatment and/or recovery of a student by requesting permission for records. Follow up will be provided to ensure communication is viable and effective, and that records are released, gathered, stored in a confidential manner, and shared, when needed.

Records of students with mental health documents, as described in legislation, who are transferring in our out of our school system will be requested immediately from the sending Florida school district, and sent to receiving Florida school district within 3 school days.

Upon a student’s transfer to a different school, the TAT must verify that intervention services provided to the student remain in place until the TAT of the receiving school independently determines the need for intervention services. Likewise, any student entering our school

system who has received intervention services will continue receiving services until a determination is made regarding the need to continue, modify or discontinue services.

Expenditures

2020-2021 Sumter Mental Health Allocation	Allotment: 240,864.00
<u>Contracted Services:</u> Lake Sumter Children’s Advocacy Center (.7 of contract total) (school based therapy services: 3 therapists)	120,976.00
<u>Contracted Services:</u> <u>LifeStream Behavioral (.12 Of contact total)</u> (school based therapy services: 2 therapists, 2 counselors,	8000.00
<u>District Personnel:</u> Psychologist (.50 of salary) For school based evaluations and therapy	37,467.00
<u>District Personnel:</u> School Social Worker (.7 of salary) For communication, coordination between families, school, care providers	50,369.00
<u>Mandated Curriculum mental health:</u> Edgenuity Purpose Prep – for students in grades 6-12	13,725.00
<u>Identification of social, emotional, or behavioral problems:</u> Social Sentinel (Social media monitoring and alert program) (Cost - \$9300. Portion not covered by district funds last year=\$4650.00)	4650.00
<u>Professional Development:</u> Non-instructional personnel training for YMHFA	5677.00

School based personnel funded, in part, by the Sumter Mental Health Allocation:

One Licensed School Psychologist (.50)

One Social Worker: MS in Human Services (.7)

Contract personnel funded, in part, by the Sumter Mental Health Allocation:

3 X Registered Mental Health Counselor interns

Life Stream – CCOS (therapy) and Potentials counseling - \$110,000.00

Services funded wholly or in part by the Sumter Mental Health Allocation:

Social Sentinel social media monitoring

Edgenuity Purpose Prep online instructional for mental and physical health

Sumter District Expenditures for mental health community based services:

E3 Solutions - \$1300 for copies/pamphlets for suicide prevention for students

Sumter District Expenditures for mental health services, other:

Maintaining an additional Professional Development Day to allow time and resources for mental health and SEL trainings, including YMHFA, for teachers and staff - \$107,915.00

Certified and Licensed School Psychologist (.5) - \$51,510.00

Youth Mental Health First Aid Train the Trainer – 2 personnel trained – \$3000 registration and hotel

Expenditure Assurances/No supplanting/Seeking other funds

- 100% of the Sumter Mental Health Allocation will be used for providing mental health services. See the attached budget.
- No allocation funds have been used to supplant other funding or increase salaries or provide bonuses.
- The maximum allowable percentage of Title IV, Part A funds have been allotted for providing/increasing direct and contracted school based mental health services.
- Medicaid reimbursement for allowable mental health services, when procedures are established by the state, and other 3rd party payments will be pursued.

Monies which became available after Sumter's 2019-20 Mental Health Plan was submitted included the following which were used to increase mental health services:

- \$25,000.00 - SEDNET One Time funds were used for the state mandated curriculum Mental Health Suicide Prevention for all students grade 6-12 and books for YMHFA trainings for staff
- \$9168.00 – Youth Mental Health Awareness Project Grant was budgeted for YMHFA training stipends for support personnel and training manuals. Funds were not able to be completely expended due to COVID.

Program Implementation and Outcomes

As of June 2020 the Sumter student population covered by this plan was 5427. This does not include the Villages Charter School numbers as they have a separate Mental Health Plan. Our current ratios of school based mental health providers are listed below:

School Psychologists: 4 total employed by the district. 4 are DOE Certified School Psychologists, and 2 of these are Florida Licensed School Psychologist. Ratio: 1 to 1356

School Counselors: 10 DOE Certified School Counselors are employed by the district. Ratio: 1 to 543

School Social Worker: 1 DOE Certified School Social Worker employed by the district. Ratio: 1 to 5427

MH/PST: Tracking numbers of students at high risk for mental health or co-occurring substance abuse disorders is accomplished through a school based spread sheet for each area which feeds into a district spreadsheet. Each school TAT will maintain a spreadsheet throughout the year of names and steps taken for students who are at risk as indicated through the EWS, referral from staff, parents, students or law enforcement agencies, Baker Acts, student registration or transferred records information. The spreadsheet documents referral for screening/assessment date, referral for services date, recommended services, follow up meeting dates, and school-based and/or community-based services received.

Threat Database: Sumter County will transition to implementation and then train annually on the Threat Assessment Data Base developed by Seminole County Schools to evaluate threats through CSTAG and house data in a secure manner for Sumter students who have been evaluated for a threat.

Charter School Coordination: Though the Villages Charter School has a separate Mental Health Plan, we coordinate with them by sharing ideas, recommendations, sharing concerns and warnings of issues. Grant resources for mental health training and resources are shared, based on enrollment. I and one of our school psychologist provided the state mandated TAT trainings to their TAT team members this year as they did not have a DOE approved/trained trainer.