

Mental Health Response Plan

District and Community Mental Health Team Members:

Mrs. Rose Roland, Assistant Superintendent
Ms. Michelle Newman, Chief of Safety and Security
Mr. Greg Akin, Chief Operations Officer
Ms. Amanda Wiles, Executive Director of ESE
Dr. Mary Alice Myers, Coordinator of Student Services
Ms. Dianne Martin-Morgan, Coordinator, School Social Services
Mr. Troy Radford, Coordinator, School Psychological Services
Mr. Sean Richter, Mental Health Specialist
Mrs. Jessica McIntyre, Mental Health Specialist
Ms. Julie Barrow, SEDNET Regional Project Manager
Ms. Jennifer Stephenson, SMA Healthcare
Ms. Felicia Walker, Halifax Behavioral
Ms. Katie Ostrander, Adapt Behavioral

School District of Volusia County



VCS
Mental
Wellness

Linking Healthy Minds for a Positive Future

Good mental health is critical to a student’s success in school and life. Research suggests that students who receive social–emotional and mental health support achieve academically as well as emotionally. School climate, classroom behavior, on-task learning, and students’ sense of connectedness and well-being all improve as well. Mental health is not simply the absence of mental illness, but also encompasses social, emotional, and behavioral health and the ability to cope with life’s challenges. Left unmet, mental health problems are linked to costly negative outcomes such as academic and behavior problems, dropping out, and delinquency.

Volusia County Schools has developed a comprehensive plan to address the mental health, social-emotional, and behavioral needs of our students.

Volusia County Schools believes in the importance of an integrated student services approach to addressing the needs of our students. School-employed mental health professionals are trained to address mental health, social-emotional and behavioral needs. School counselors, school psychologists, school social-workers, and behavioral specialists provide the vast majority of school-based mental health services. They are specially trained in school system functioning and learning, as well as how students’ behavior and mental health impacts their ability to be successful in school.

Volusia County Schools currently employs the following school-employed mental health providers:

Title	Description	Number of Mental Health Providers	Provider to Student Ratio (60,876 students)	Nationally Recognized Student Ratio
School Social Workers	23 School Social Workers	23	1:2,647	NASW 1:250
School Psychologists	27 School Psychologists	27	1:2,255	NASP 1:1,000
School Counselors	148 School Counselors at all three levels.	148	1:411	ASCA 1:250
School Nurses	10 RN’s 43 LPN’s 28 Clinic Assistants [CNAs] 3 CMA	84	1:725	NASN 1:750
Mental Health	7 Mental Health Counselors 5 School Social Workers 2 School Psychologist 2 Substance Abuse Counselors 2 Care Coordinators 1 Counselor on Assignment 2 District Mental Health Specialists	21	1:2,899	IACS 1:1,000-1,500
Total		303	1:201	

School-based Mental Health Providers Funded through Mental Health Allocation					
Mental Health Team Members	5 Social Workers	Licensed	Registered	FLDOE Certification	18
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
	2 School Psychologists	Licensed	Registered	FLDOE Certification	
	School Psychologist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	School Psychologist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	7 Mental Health Counselors	Licensed	Registered	FLDOE Certification	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1 Counselor on Assignment	Licensed	Registered	FLDOE Certification	
	Counselor on Assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	2 District Mental Health Specialists	Licensed	Registered	FLDOE Certification	
	Mental Health Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Mental Health Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Community-based Mental Health Providers Funded through Mental Health Allocation				
	2 Substance Abuse Counselors	Licensed	Registered	FLDOE Certification
	Substance Abuse Counselor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Substance Abuse Counselor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2 Care Coordinators	Licensed	Registered	FLDOE Certification
	Care Coordinator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Care Coordinator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2 Mental Health Counselors			
	Mental Health Clinician	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Mental Health Clinician	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional School-based Mental Health Providers not funded by the Mental Health Allocation		
School Social Workers	23 School Social Workers	23 FLDOE certified
School Psychologists	29 School Psychologists	29 FLDOE certified
School Counselors	148 School Counselors at all three levels.	148 FLDOE certified
School Nurses	12 RN 's 44 LPNs 30 Clinic Assistants [CNAs]	84 FLDOE certified

AWARENESS/PREVENTION/INTERVENTION EFFORTS

It is our belief that school mental health services are essential to creating and sustaining safe schools. Increased access to mental health services and supports in schools is vital to improving the physical and psychological safety of our students and schools, as well as academic performance and problem-solving skills. School mental health supports that encompass social–emotional learning, mental wellness, resilience, and positive connections between students and adults are essential to creating a school culture in which students feel safe and empowered to report safety concerns, which is proven to be among the most effective school safety strategies. Additionally, in the aftermath of a crisis, school-employed mental health professionals provide supports that facilitate a return to normalcy, are sustainable, and can help to identify and work with students with more intense or ongoing needs.

Providing a continuum of school mental health services is critical to effectively addressing the breadth of students’ needs. Comprehensive mental health services are most effective when provided through a multi-tiered system of supports (MTSS). MTSS encompasses the continuum of need, enabling schools to promote mental wellness for all students, identify and address problems before they escalate or become chronic, and provide increasingly intensive, data-driven services for individual students, as needed.

Volusia County Schools employs universal strategies for all students, followed by interventions to assist selected students who face particular risks, and finally a tier with treatment interventions for those with the greatest needs. An advantage of this tiered approach is that schools and teachers can support students with varying needs and also create classroom and whole-school environments that support the learning of all children. The ultimate aim is to promote student wellbeing, prevent the development or worsening of mental health problems, and improve the effectiveness of education.

Volusia County Schools has developed a comprehensive approach to addressing the mental health, social-emotional, and behavioral needs of our students by employing school based mental health programs. The school based mental health programs that are employed by Volusia County Schools focus on all students with some targeting students at high risk of mental health problems. For most of the programs the content is provided to the students in specific, daily or weekly sessions over a period of weeks or over the entire school year. For some of the programs, the intervention is incorporated into the existing school curriculum and daily activities and support is ongoing. Classroom teachers, student services professionals, school social workers, and school psychologists are all trained to provide the school based mental health programs to our students. Below is a list of programs that are currently being implemented within Volusia County Schools:

CHAMPS - *CHAMPS* assists classroom teachers to design (or fine tune) an early intervention plan that promotes positive social, emotional, and behavioral classroom management that will overtly teach students how to behave responsibly.

Check & Connect – Comprehensive early intervention designed to enhance student engagement at school and with learning for marginalized, disengaged students in grades K-

12, through relationship building, problem solving and capacity building, and persistence (SEL). A goal of *Check & Connect* is to foster school completion with academic and social competence.

Coping Cats - Used by School Psychologists and School Social Workers for Counseling as a Related Service with ESE students. It is a cognitive-behavioral therapy intervention that helps children recognize and analyze anxious feelings and develop strategies to cope with anxiety-provoking situations - potentially from a traumatic/violent event.

I Can Problem Solve - I Can Problem Solve (ICPS) is a universal, early-intervention, school-based program designed to enhance the interpersonal cognitive processes and problem-solving skills of children in preschool through grade 6.

Positive Behavior Intervention & Supports - PBIS is based on understanding why problem behaviors occur. This early-intervention approach to behavior can occur on a school-wide level, in a specific setting, classroom, or with an individual student. PBIS is the application of evidence-based strategies and systems to assist schools to increase academic performance, increase safety, decrease problem behavior, increase social, emotional awareness, and establish positive school cultures.

Restorative Practices - A restorative school is one which takes a restorative approach to resolving conflict and preventing harm. It assists students dealing with trauma and violence. Restorative approaches enable those who have been harmed to convey the impact of the harm to those responsible, and for those responsible to acknowledge this impact and take steps to put it right. Restorative approaches refer to a range of methods and strategies which can be used both to prevent relationship-damaging incidents from happening and to resolve them if they do happen.

RULER Approach to Social-Emotional Learning - RULER is an acronym that stands for Recognizing, Understanding, Labeling, Expressing and Regulating emotions. The program grounds teachers, staff, students, and families in the Anchors of Emotional Intelligence. The fundamental RULER tools enhance individuals' ability to understand and regulate their own emotions and to consider and empathize with how others are feeling. The Anchors also foster the kind of healthy emotional climate essential to personal growth.

Sanford Harmony – A program with a series of innovative social, emotional, and behavioral lessons that focus on increasing relationship-building and teaching strategies designed to strengthen understanding and communication between children. The goal of Harmony is to create inclusive classroom communities where teaching takes priority over resolving personality conflicts or issues among students.

Second Step - Research-based, sequenced curriculum focusing on essential life and learning skills, anger management, conflict resolution and self-regulation (SEL). Media-rich content engages students and reinforces positive behavior and fully scripted lessons are easy to integrate into the day.

Social Skills Improvement System (SSIS) - The Social Skills Improvement System addresses the need for an evidence-based, multi-tiered assessment and intervention system to help you help students develop, improve, and maintain important social skills (SEL).

CHAMPS: SOS! - This training is recommended for general education and ESE teachers who have received previous CHAMPS classroom management training but would like additional strategies to address one or more specific student behavior challenges. This behavior training addresses tier 2 and tier 3 behavior challenges. Participants will be guided through a process of identifying, clarifying, and narrowing the scope of one or more classroom management challenge. Participants will design an intervention plan using the following action steps: 1) discuss function of behavior; 2) select a replacement behavior for an identified behavior challenge; 3) design a teaching plan; 4) arrange the environment to facilitate success; 5) develop responses for desired and undesired behavior; and 6) write a behavior goal. Participants will obtain and improve professional knowledge and competencies related to facilitating a highly structured, individualized classroom environment with consistent approaches to student behavior management. Participants will: 1) know how to follow a step-by-step process for analyzing behavioral or motivational problems; 2) understand that behaviors can serve a variety of functions; 3) develop an intervention plan based on data collection.

Informal Circles: Circles can be done by teachers quickly as a way to have students check in, check out, or deal with classroom tension in a quick and informal, early-intervention manner. It also can be used in academic ways to evaluate understanding of concepts.

Formal Circles: This can be conducted after major offenses (i.e. trauma/violence) have been committed and the student(s) has had to miss school. Formal circles should include school-based stakeholders as well as the offender and his/her support group and the offended with his/her support group. Ideally, they will meet together but that may not always be prudent.

Say Something: Say Something is an early-intervention education and awareness program that provides tools and practices to:

- Recognize the signs & signals of a potential threat – especially in social media
- Teach and instill in participants how to take action
- Drive awareness and reinforce the need to Say Something

Suite 360: Mental Health Education: The Suite 360 program consists of age appropriate and differentiated lessons for each grade level 6-12. These lessons will cover the specific topics that have been identified by the Florida Department of Education to be addressed through developmentally appropriate instruction and skill building the following topics:

- (a) Recognition of signs and symptoms of mental health disorders;
- (b) Prevention of mental health disorders;
- (c) Mental health awareness and assistance;

- (d) How to reduce the stigma around mental health disorders;
- (e) Awareness of resources, including local school and community resources;
- (f) The process for accessing treatment;
- (g) Strategies to develop healthy coping techniques;
- (h) Strategies to support a peer, friend, or family member with a mental health disorder;
- (i) Prevention of suicide;
- (j) Prevention of the abuse of and addiction to alcohol, nicotine, and drugs.

Students will have access to mental/emotional health education curriculum materials which include videos, infographics, images, and media clips. Each lesson will be accompanied by a resource guide with links and text/phone numbers to national and local resources. Lessons will also contain explicit instructions on how to HELP (Help, Empathize, Listen, Plan) or ACT (Apply coping strategies; Consider your options for help; Talk to trusted adult).

WhyTry - The WhyTry program uses a unique multisensory approach that allows students to see, hear, and experience the concepts being taught. Visual analogies give students achievable steps to gaining life skills, develop resilience in academic and real-world settings and improve individual emotional health. For the hands-on learner, the program uses activities with relevant tie-ins, to reinforce social emotional principles in an engaging way. For visual learners, it uses relevant videos to spark classroom discussion, and take advantage of art and writing activities. Additionally, WhyTry uses music to make information relatable to the students in a format that is relatable.

Volusia County Schools established a Mental Health Collaboration Team. Members of this team work to identify research-based programs that are proactive and responsive to meeting the diverse needs of our district. The Mental Health Collaboration team works to support these initiatives through strategic implementation strategies.

Students that are in need of additional support through Tier 2 and Tier 3 Interventions are often referred to student services professionals and/or community mental health agencies for additional support. These referrals can be completed by a parent, teacher, administrator, or student services professional. Students can also be referred to a Tier 2 or Tier 3 intervention based on attendance data, concern of harm data, discipline data and other anecdotal data that supports the need for additional support.

Below is a chart that outlines the universal system of supports at the Tier 1, Tier 2 and Tier 3 level. Volusia County Schools is committed to ensuring that all students receive support through our integrated student services model.

Identify specific student needs and deliver individualized intervention:			
Elementary VCS District Supported Practices	Suggested Intervention Provider	Secondary VCS District Supported Practices	Suggested Intervention Provider
Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams
I Can Problem Solve	Counselor	RULER Approach to SEL	School-based Team
Coping Cats - ESE	Counselor School Psychologist School Social Worker	Check & Connect Mentoring Program	School-based trained personnel
RULER Approach to SEL	School-based Team/Teachers	Social Skills Improvement System (ESE)	ESE Teacher Behavior Specialist
Counseling (small group using evidence/research-based interventions)	School Counselor MH Counselors	Counseling (small group using evidence/research-based interventions)	School Counselor MH Counselor
<i>Evidence/Research-based interventions from the following sources:</i>		<i>Evidence/Research-based interventions from the following sources:</i>	
Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management	Teacher	Tough Kids Toolbox (6-8) Teacher’s Encyclopedia of Behavior Management	Teacher
www.pbisworld.com www.interventioncentral.com	Teacher	www.pbisworld.com www.interventioncentral.com	Teacher
Why Try	Teacher	Why Try	Teacher
Mental Health Response and Intervention Teams	Counselor/School Based Administrator	Mental Health Response and Intervention Teams	Counselor/School Based Administrator
Restorative Practice Formal Conference	School Based Administrators Deans of Student Rel School Counselors	Restorative Practice Formal Conference	School Based Administrators Deans of Student Rel School Counselors
Identify students & implement structured interventions for SEL:			
Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams
Second Step	Counselor	Restorative Practices Circles	DSR/SEL TOA/Admin/Teacher
I Can Problem Solve	Counselor	Student Success Skills	Counselor
Student Success Skills	Counselor	SEL TOA Small Group	SEL TOA’s
Restorative Practices Circles	Teacher		
Evidence/Research-based interventions from the following sources:	Teacher	Evidence/Research-based interventions from the following sources:	Teacher
Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management	Teacher	Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management	Teacher
CHAMPS: SOS!	Teacher	CHAMPS: SOS!	Teacher

Tier 3: Specialized Supports for a Few Students

Tier 2: Targeted Supports for Some Students

	Mental Health Response and Intervention Teams	Counselor/School Based Administrator	Mental Health Response and Intervention Teams	Counselor/School Based Administrator
	www.pbisworld.com www.interventioncentral.com	Teacher	www.pbisworld.com www.interventioncentral.com	Teacher
	Why Try	Teacher	Why Try	Teacher
Tier 1: Core Universal Structure for all Students	Build school-wide systems and structures:			
	School-wide Positive Behavior Intervention and Supports (PBIS)	School-based Team	School-wide Positive Behavior Intervention and Supports (PBIS)	School-based Team
	Say Something	Sandy Hook Consultant Team	Say Something	Sandy Hook Consultant Team
	Adopt proactive & classroom management strategies:			
	CHAMPS	Teacher	CHAMPS	Teacher
	Implement best practices for student engagement/SEL:			
	RULER Approach to SEL	School-based Team	Restorative Practices	School-based Team
	Sanford Harmony	Counselor/Teacher	Second Step	Counselor
	Restorative Practices	School Based Teams	Restorative Practices	School Based Teams

COMMUNITY PARTNERSHIPS

Community collaboration is critical to providing the full continuum of mental health services. Meeting the full continuum of student needs is also dependent on collaboration between schools and community mental health providers. Typically, community providers offer supplementary or intensive services that go beyond school capacities. An MTSS approach facilitates effective collaboration while ensuring that services provided in school are appropriate to the learning context and those that are provided after school hours are appropriately linked to and supported in the school setting. Partnerships are most effective when coordinated by school-employed mental health professionals, are defined by clear memoranda of understanding, and reinforce an appreciation for the unique contribution each group makes to creating more seamless and comprehensive service delivery. This not only reduces gaps, redundancy, and conflict, it also reduces stress on families and supports their roles as primary caregivers and decision-makers regarding their child’s development.

Volusia County Schools has an agreement with 5 community agencies to provide school-based behavioral mental health services for students who are at risk of emotional and behavioral challenges. Currently, Volusia County Schools has an agreement with the following entities:

- **Halifax Behavioral Services (HBS)**
- **Devereux Services**
- **Chrysalis Health**
- **Adapt Behavioral Services**
- **Children’s Home Society of Florida**

In addition, Volusia County Schools has a partnership with SMA Healthcare to provide substance abuse services for students at risk.

Volusia County Schools has had a long-standing partnership with two of our community agencies, HBS and Devereux, since 2000. The school-based mental health services that are provided by our community agencies include a broad spectrum of assessment, prevention, intervention, postvention, counseling, consultation, and referral activity services. These services are essential to the stability of our district's ability to ensure a safe and healthy learning environment for all students. They promote student's academic success and their social and emotional needs.

Services are currently in all public schools throughout our district (excluding charter schools that opt out of the VCS Mental Health plan). Students are referred by student services personnel, school-based administrators or parents and are seen by registered interns or licensed mental health therapists weekly. In addition, our community mental health partnerships provide support to our separate class/EBD units, Title 1 schools, full-service and comprehensive schools, low performing schools, schools with high discipline referrals and schools with high concern of harm intervention.

The Volusia County Schools' Mental Health Response and Intervention Teams will work closely with community-based mental health partners to link families to services and help support the individual needs of our students. Students that are identified as being "moderate to high risk" through mental health and behavioral assessments and evaluations, will be referred to outside agencies and primary care providers for additional support. In addition, our Mental Health Response and Intervention Teams will work in conjunction with our providers to ensure that the strategies and resources recommended by our community providers are implemented in the school setting.

The Mental Health Response and Intervention Teams will serve as a bridge between community mental health and the education setting.

The referral process for our community agencies differs depending on the agency. Volusia County Schools has a district contact, Coordinator of School Social Work, that assists in ensuring our students' needs are addressed in a timely and adequate way. In emergency situations, the Coordinator of School Social Work is able to swiftly navigate the system and ensure that students' needs are addressed immediately. Below outlines the referral process for each of our community mental health agencies.

The Volusia County School district continues to meet with the mental health community providers to review the mental health plan and elicit input and recommendations.

Adapt:

Referral process is as follows:

- School personnel identifies a student in need of mental health services.

- School personnel completes a referral form with pertinent information- name, DOB, address, parent name, contact address/phone #, insurance information and description of problem behavior/concerns.
- Completed referral form is sent to Adapt Behavioral Services- fax 386-675-6490 or email ormond@adapt-fl.com.
- The Referral Coordinator will send a confirmation email stating the referral was received within one business day.
- The individual referred will begin counseling services within 30 days of the initial referral.

Children's Home Society:

Referral process is as follows:

- Complete the CHS referral form (anyone can complete the referral: teacher, parent, counselor, student, etc.)
- Email the form to CHSCLINICAL_NCO@chsfl.org
- Once insurance is verified, CHS will assign a counselor.
- The counselor will contact the family and offer an appointment within 5 business days.
- Counseling services for the family will start within 2 weeks to 30 days from initial contact.
- Making the initial appointment can sometimes be challenging. If the counselor has trouble contacting the family, they will reach out to the person that made the referral.
- Sometimes starting that initial appointment is scary for families, so the person who made the referral is encouraged to reach out to CHS to help coordinate the first appointment.
- The counselor will make at least 3 attempts to schedule with the client or family as well as contact the referral source before ending their attempts to contact.
- If a referred individual is not quite ready for the services upon the initial referral, they are always welcome to start services at another time when they are more ready, just simply complete another referral and we will reach out to the client again!

Chrysalis Health Referral Process

Referral process is as follows:

- Complete the referral form and fax to 954-587-0080 or email to referrals@chrysalishealth.com
- Referrals can also be called in at 954-587-1008 and choose 4 at the prompts

- Once the referral is received, the intake department will contact you within 48 hours to advise if the client is eligible for services. If they have reached the guardian and set an appointment, they will advise you of the date and time of the initial assessment at that time.
- The initial assessment and start of services will begin no more than 30 days from the initial contact. Generally, the services will begin in under 2 weeks from the initial referral.
- If they haven't been able to reach them, they will make 3 calls over a 3-day period and on the 4th day they will advise you that they haven't heard from them and will send out a letter requesting that the guardian contact us.
- At this point the referral is considered not viable and closed. However, if the client or guardian contacts us from the letter, we open them back up and set up an initial assessment and advise you that they will be assessed.

Devereux:

Referral process is as follows:

- The school counselor identifies a student for services
- They contact the parent/guardian to discuss services and ask permission to refer for counseling services
- School Counselor, parent or school-based administrator completes the referral form and either email/fax the referral to Devereux
- An office staff member verifies the insurance by running the Medicaid through the system. If emailed-they will respond to the email and notify the school counselor that the insurance is active or inactive. Either way, the referral is logged in our referral book.
- At least once per week, the Clinical Coordinator at Devereux reviews the referral book and assigns referrals to counselors. Referrals are assigned based on caseloads, assigned areas and assigned schools.
- Once a referral is assigned, counselors are asked to call a family within 72 business hours to discuss setting up an intake for services. In the event a family is not reached on the first call, a counselor will call again within a day or two. After two failed attempts, a letter is sent to the mailing address on the referral. Counselors are also encouraged to contact the school counselor to inform them of the barrier, as they can often assist with establishing communication. In the letter, there is a timeframe provided to respond, if that timeframe expires, we close out the referral.

- Once the family has been reached, services will begin as soon as possible, with a possible wait time of no longer than 30 days from initial referral.

Halifax Behavioral Services

Referral process is as follows:

- Referral is given to screening department.
- Screener confirms demographics and interest in services.
- Screener gives the referral to the department supervisor.
- Department supervisor assigns to a program therapist, or if there is a wait list for that school, they are placed on the waiting list.
- If the program therapist is accepting referrals, the referral is given to the insurance department.
- Insurance department verifies benefits.
- Insurance department gives the completed referral to the assigned program therapist.
- Assigned program therapist contacts guardian to set up an intake appointment.
- A referral must be assigned and services initiated within 30 days of the referral from the school based provider.

SMA Healthcare

Referral process is as follows:

- The school counselor identifies a student for further substance use evaluation and/or services.
- School counselor completes a referral form with pertinent information in the SSS feature in Focus.
- The VCS Counselor on Assignment receives an alert when the Substance Use Referral is submitted.
- The VCS Counselor on Assignment emails the referral information to one of the two SMA Substance Use Counselors.
- The Substance Abuse Counselors are able to provide substance use screenings and immediate referrals to counseling services, as well as provide substance use counseling when appropriate.

ADDITIONAL CONTRACTS OF SERVICES WITH COMMUNITY PARTNERS

In addition to our community partners providing evaluations and counseling services for students identified as being “moderate to high risk,” we have contracted with 3 of our agencies to deliver other support services.

- **Adapt Behavioral-**

We have contracted with Adapt Behavioral to provide small groups within our Alternative Education sites - Riverview Learning Center and Highbanks Learning Center. The students attending school at these sites will be participating in a small group curriculum titled Sense of Self Model (SOS) that will be facilitated by a licensed clinician through Adapt Behavioral on a weekly basis throughout the school year.

- **SMA Healthcare-**

We have contracted with SMA Healthcare to utilize two identified Substance Abuse Counselors that are each based on one of our campuses on the East and West sides of our county. The Substance Abuse Counselors are able to provide substance use screenings and immediate referrals to counseling services as well as provide substance use counseling when appropriate.

- **Halifax Behavioral Services-**

We have contracted with Halifax Behavioral Services to utilize two Care Coordinators who are instrumental in identifying and tracking students. Once a student has been identified as high risk and has been admitted to our local receiving facility, Halifax Health - Child & Adolescent Behavioral Inpatient Services, the Care Coordinator will be able to follow up on the student to provide additional resources and provide follow up information to identified school personnel who will help develop a re-entry plan for the student’s return to campus.

MENTAL HEALTH SCREENING AND TRACKING

Parents and school-based staff often identify students in distress through a natural screening soon after the onset of a problem identified through their daily interactions. This type of screening can be helpful in initiating supportive accommodations that can be incorporated into regular school and home practice. By assessing the response of these students to such interventions, it can be determined whether more specialized and intensive intervention is warranted to help overcome the issue. Our student services personnel work collaboratively to address the mental health, social emotional and behavioral needs of our students that are identified through natural screenings. Students are evaluated, and a personalized well-being plan is drafted to address the unique needs of the student.

In contrast to natural screening, formal screenings, are used to identify students who are exhibiting mental health or behavioral problems or who may be “at risk”. These types of screening procedures provide a preliminary indication that something may be wrong and

further action is warranted. Volusia County Schools screens all elementary students for behavioral and mental health concerns via the elementary report cards. This screening enables the district to collect data by classroom, school, grade level and district for the following indicators:

1. Student possesses work/study skills needed to learn
2. Student demonstrates appropriate social interactions with peers and adults
3. Student demonstrates appropriate self-control and appropriate responses to classroom and school situations.

More importantly than collecting data, this system enables school based mental health professionals and district leaders to determine areas in which individual students, classrooms, grade levels or schools would benefit from targeted evidence-based interventions related to the areas measured. Early Warning Systems are also used as a screening measure.

To identify secondary students in need of interventions, the district utilizes an Early Warning System (EWS) which contains the state required indicators in addition to other indicators identified by the district and the Project 10 Graduation Report. The district's MTSS website contains evidence-based interventions linked to the EWS indicators.

Through the use of the MTSS system, students are identified to receive interventions to meet their specific needs. In Tier 1, students receive social emotional wellness and mental health education. In Tier 2, students who do not respond to Tier 1 interventions are identified and provided additional support through student services (i.e. school counseling, school social workers, school psychologists, social emotional learning small groups). Students who need more intensive services, as evidenced by a lack of response to Tier 2 interventions, are provided with Tier 3 interventions. When a student is identified as needing mental health intervention, the student is assessed by a district mental health clinician. The mental health clinician assesses the needs of the student, and with school-based administration, determines the level of care and support interventions. For students with one or more co-occurring substance abuse diagnoses and/or are at high risk of such diagnoses, a VCS mental health clinician will utilize their diagnosis and coordinate with the student's primary mental health care provider and with other mental health providers involved in the student's care.

Brief-solution focused therapy and cognitive/behavioral therapy (along with other evidence-based mental health therapy interventions) will be used to support identify goals for treatment, interventions and treatment for recovery. Students work with the VCS mental health clinician during the initial session to determine goals and individualized treatment and discharge plan.

Volusia County Schools will continue with utilizing our Social Emotional Wellness platform inside FOCUS to track mental health concerns and link students to resources both within the school and community setting. The Social Emotional Wellness system also

provides a layer of awareness at the school level of individual and district mental health trends.

In addition to the screening and Social Emotional Wellness platform, VCS has undergone a restructuring of our Student Services Department to better align ourselves with the needs of our students and families. Within the transition, we evaluated the roles and responsibilities of our school-based student services personnel. Expectations and guidelines were set up to establish the appropriate use of our school-based personnel to not be utilized for coverage of special areas or testing and reiterating a need for their time to be designated for providing direct services to students. Counseling Specialists were identified for K-5 and 6-12 to help support the school-based student services personnel in maintaining their focus on direct student services.

STAFF & STUDENT TRAINING

Volusia County Schools believes in the importance of training our students, faculty and staff in identifying mental health concerns, behavioral concerns and issues that need additional support and resources.

As of May 2019, over 2,400 Volusia County School employees have been trained in **Youth Mental Health First Aid**. We will continue in the 2020-2021 school year training remaining staff members in Volusia County Schools. The course provides educators ways to early identify 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, trauma, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders. Volusia County Schools incorporates this requirement into our Security Audits to ensure compliance. The expectation is that all staff members will have completed the Youth Mental Health First Aid Training by August of 2024. Volusia County Schools will utilize every opportunity to ensure that all staff are trained in Youth Mental Health First Aid.

Additionally, Volusia County Schools has trained 6,680 school-based staff in the **Kognito Florida School Personnel Mental Health Awareness** training. This supplemental training provides individuals techniques/skills to recognize early warning signs of distress and how to connect those in need with support.

During the 2019/2020 school year, Volusia County Schools completed the Sandy Hook Promise “Say Something” training to our students and staff. **Say Something** informs and educates staff members and students about observable warning signs (written, spoken, photographed, video) that are often present in behavior that could lead to someone hurting themselves or others, as well as educates individuals on how to safely and anonymously report potential threats (early identification). Volusia County Schools will continue to use the tools provided by Say Something to promote and reinforce student safety.

Volusia County Schools continues to utilize the Sandy Hook Promise’s **Safety and Intervention** (SAI), to train school-based teams. This workshop teaches adults in the

schools how to identify, assess and respond to threats of violence or at-risk behavior BEFORE a tragedy takes place. SAI not only addresses the threat itself but also helps identify and treat the underlying problem in that youth's life that led to him/her making the threat.

THREAT ASSESSMENT TEAMS

A threat assessment team shall include persons with expertise in counseling, instruction, school administration, and law enforcement. The threat assessment teams shall identify members of 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.

The goal of the threat assessment process is to keep schools safe and to help students in crisis overcome the underlying sources of their anger, hopelessness, or despair and to assess them to determine the most appropriate level of response. Effective threat assessment procedures provide school professionals with useful information about a student's risks and personal resources.

Upon a preliminary determination that a student poses a threat of violence or physical harm to himself or herself or others using the Threat Assessment Form in the SSS feature in Focus as a guide, the school shall immediately attempt to notify the student's parent or legal guardian. Nothing shall preclude school district personnel from acting immediately to address a threat. If the threat is deemed substantive, the Threat Assessment Team shall immediately notify the district's Mental Health Team. In addition, law enforcement shall be called to consult as part of the school's Threat Assessment Team. The Director of Safety and Security for Volusia County Schools or the Coordinator of Emergency Services and School Safety for Volusia County Schools, must be subsequently notified in the event of a substantive threat to inform them of the threat and the action steps taken. The school-based Threat Assessment team's administrator shall then report its determination to the Superintendent or his or her designee. The Threat Assessment Form must be completed, regardless of the level of threat (no threat, transient, or substantive), detailing the threat as well as action steps taken to ensure the safety of the student making the threat, and/or the safety of others in the school community.

If an immediate mental health or substance abuse crisis is suspected, school personnel shall follow the procedures outlined in this manual to engage mental health crisis resources. Mental 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. In the event of a substance abuse crisis, schools shall comply with the VCS medical policies and procedures. Documentation of substance use crises shall be completed in the SSS feature in Focus, as well as in any other areas of Focus, if appropriate, such as the student's disciplinary record, etc. In addition, a Substance Use Referral should be completed for continuity of care in the SSS feature in Focus.

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. As students are transferred to a new school within the district, school counselors and administrators should review the SSS Platform to determine what social emotional supports are needed.

The threat of targeted school violence brings unique challenges to all members of the impacted school, as well as to the school district. Central among these challenges is the need to 1) assess the level of the threat; 2) ensure that steps are taken to address the safety of students and faculty; 3) effectively communicate and collaborate with parents, media and law enforcement and within school district departments; and 4) devise a plan for re-entry. Through the use of the Threat Assessment Team, procedures are developed to ensure a seamless process when addressing threats towards self, others or school board employees.

Types of Threats

A threat is an expression of intent to do harm or act out violently against someone or something. It may be spoken, written, or symbolic. Threats can be expressed directly or indirectly to the victim or to others, and threats may be explicit or implied. Threats sometimes, but rarely, involve guns or explosive devices. Many students who make a threat will never carry it out. Conversely, others who pose a real danger may not make an explicit threat. Threats may be communicated to the intended victim or related to a third party. A threat to harm others can be transient (i.e., expression of anger or frustration that can be quickly or easily resolved) or substantive (i.e., serious intent to harm others that involves a detailed plan and means):

Examples of Transient Threats:

- Non-genuine expression
- Non-enduring intent to harm
- Temporary feelings of anger
- Tactic in argument
- Intended as joke or figure of speech
- Resolved on scene or in office (time-limited)
- Ends with apology, retraction, or clarification

Examples of Substantive Threats:

- Specific and plausible details such as a specific victim, time, place, and method
- Repeated over time or conveyed to differing individuals
- Involves planning, substantial thought, or preparatory steps
- Recruitment or involvement of accomplices
- Invitation for an audience to observe threat being carried out
- Physical evidence of intent to carry out threat (e.g., lists, drawings, written plan)

Who is a member of a School Threat Assessment Team?

Florida Statute 1006.07(7), defines the members of the School Threat Assessment Team as:

- All school-based administrators
- School Counselors
- School Resource Deputy/Officer/Guardian
- An appointed teacher or TOA
- School Social Workers (when applicable)
- School Psychologists (when applicable)

What are the roles of the Threat Assessment Team?

The Threat Assessment Team functions similarly to the school-based Crisis Response Team and contains many of the same mental health team members. The team consists of the Principal, other school-based administrators, the School Counselor(s), the School Psychologist, the School Social Worker, and the School Resource Deputy/Officer/Guardian. In addition, a teacher serves as a member of the Threat Assessment Team. The Threat Assessment Team is involved in the initial assessment process and works collaboratively to determine the level of risk for each individual student and situation and seeks additional supports for the student.

DETERMINATION OF RISK

In all incidents of reported or suspected threats to self or others, it is critical and mandated to perform a threat assessment. Threat assessment is a process to evaluate the level of risk to the school or to a specific individual(s). The Threat Assessment team will work in coordination to determine the level of risk. The “risk level” will determine how the Threat Assessment Team will respond to the threat and what interventions and course of action will ensue for the student.

Threats can be classified into one of four categories (i.e., direct, indirect, veiled or conditional).

Specific, plausible details are a critical factor in evaluating a threat. Details can include the identity of the victim or victims; the reason for making the threat; the means, weapon and method by which it is to be carried out; the date, time and place where the threatened act will occur; and concrete information about plans or preparations that have already been made. Based on the initial threat assessment, the school Principal, in conjunction with the mental health professional at the school, classifies the situation as a Substantive or Transient Threat.

Not a Threat

Might be an expression of anger that merits attention.

Obtain a detailed account of the threat, usually by interviewing the person who made the threat, the intended victim, and other witnesses. Write the exact content of the threat and key observations by each party. Consider the circumstances in which the threat was made and the student's intentions.

Transient Threat

There is little evidence of a potential for violence, but a pattern exists of veiled threats against others with the purpose of causing emotional distress. The school-based Threat Assessment Team, in conjunction with the student's parent(s)/guardian(s), will determine if the student can remain safely at school for the remainder of the school day. However, if the Threat Assessment Team and parent(s)/guardian(s) deem that it may be unsafe for the student to remain at school, the student will be transferred to the parent's/guardian's care upon signing the Parent Acknowledgement Form and the Mutual Exchange of Information Form found in the Supplements section of the Threat Assessment Form in the SSS feature in Focus. Upon completion of the forms, the parent(s)/guardian(s) are encouraged to have their child medically evaluated.

- a. Threat is vague and indirect.
- b. Information contained within the threat is inconsistent, implausible or lacks detail.
- c. Threat lacks realism.
- d. Content of the threat suggests person is unlikely to carry it out.

Serious Substantive Threat

Substantial threat exists, but there is no evidence that violence is imminent or that the individual has the means to carry out the threat. Examples of this are threatening to hit, fight, or beat up another individual. Further assessment and close monitoring are essential and will probably include removal from the school setting with a re-entry process in place. Implementation of a restraining or administrative order (No Trespassing) to stay away from certain individuals or sites upon return to the school may also be necessary.

- a. Threat is more direct and more concrete than a low risk threat.
- b. Wording in the threat suggests that the individual has given thought to how the act will be carried out.
- c. There may be a general indication of a possible place and time (though these signs still fall well short of a detailed plan).
- d. There is no strong indication that the individual has taken preparatory steps, although there may be some veiled reference or ambiguous or inconclusive evidence pointing to that possibility – an allusion to a book or movie that shows the planning of a violent act or a vague general statement about the availability of weapons.
- e. There may be a specific statement seeking to convey that the threat is not empty: "I'm serious!" or "I really mean this!"

Additionally, substantive threats can be a student who may exhibit imminent danger to self or others with the means and focus to carry out violence.

Very Serious Substantive Threat

A very serious substantial threat exists when there is evidence that violence is imminent or that the individual has the means to carry out the threat. Examples of this would be an individual threatening to kill, rape, or cause very serious injury with a weapon.

It is essential to take steps to isolate the individual(s). Law enforcement must be involved to conduct an investigation for evidence of planning and preparation, and/or criminal activity. Additional steps include screening student for mental health services and counseling and referring the student as needed for services. Develop safety plan that reduces risk and addresses student needs. Plan should include review of Individual Educational Plan if already receiving special education services and further assessment if a possible disability exists.

Example statement: *“At eight o’clock tomorrow morning, I intend to shoot the Principal. That is when he is in the office by himself. I have a 9 mm gun. Believe me; I know what I am doing. I am sick and tired of the way he runs this school.”* This threat is direct; specific as to the victim, motivation, weapon, time, and place; and indicated that the student knows his target’s schedule and has made preparations to act on the threat.

In some cases, the distinction between the levels of threat may not be as obvious and there will be overlap between the categories. Generally, obtaining additional information about the threat and student history helps clarify any confusion. What is important is that schools be able to recognize and act on the most serious threats and then address all other threats appropriately and in a standardized and timely fashion.

What is Volusia County Schools’ process for assessing threat?

When a targeted threat of violence occurs at a school site, the threat assessment process is to include the following components:

1. *Threat Assessment Form*

This form is an interview guide completed by members of the Threat Assessment Team. This process must occur in collaboration. The team should utilize the “Threat Assessment Form” in the SSS Platform of Focus. The assessment serves to obtain information from the student regarding specifics of the situation, steps to carry out the threat, access to weapons, and problems in the student’s life that led to the threat/incident.

2. *Determine Level of Threat*

Through the Threat Assessment process, the Threat Assessment Team will work collaboratively to determine the level of threat:

- **Not a Threat**
- **Transient Threat**
- **Serious Substantive Threat**
- **Very Serious Substantive Threat**

Upon a preliminary determination that a student poses a threat of violence or physical harm to himself or herself or others using the Threat Assessment Form in the SSS feature in Focus as a guide, the school shall immediately attempt to notify the student's parent or legal guardian. Nothing shall preclude school district personnel from acting immediately to address a threat.

If the threat is deemed transient, the school-based Threat Assessment Team, in conjunction with the student's parent(s)/guardian(s), will determine if the student can remain safely at school for the remainder of the school day. However, if the Threat Assessment Team and parent/guardian deem that it may be unsafe for the student to remain at school, the student will be transferred to the parent's/guardian's care upon signing the Parent Acknowledgement Form and the Mutual Exchange of Information Form found in the supplements section of the Threat Assessment Form in the SSS feature in Focus. Upon completion of the forms, the parent(s)/guardian(s) are encouraged to have their child medically evaluated.

If the threat is deemed substantive, the Threat Assessment Team shall immediately notify the district's Mental Health Team. In addition, law enforcement shall be called to consult as part of the school's Threat Assessment Team. The Director of Safety and Security for Volusia County Schools the Coordinator of Emergency Services and School Safety for Volusia County Schools, must be subsequently notified in the event of a substantive threat to inform them of the threat and the action steps taken. The school-based Threat Assessment team's administrator shall then report its determination to the Superintendent or his or her designee. The Threat Assessment Form must be completed, regardless of the level of threat (no threat, transient, or substantive), detailing the threat as well as action steps taken to ensure the safety of the student making the threat, and/or the safety of others in the school community.

3. *Determine Level of Response*

Through the Threat Assessment process, the Threat Assessment Team will work collaboratively to determine the level of response and action steps needed. This information will be documented in the Threat Assessment.

Regardless of the determined level of threat to self and/or others, any student who is or may be in need of mental health supports can access follow up supports. Any VCS staff member who has access to the SSS feature in Focus can submit a Mental Health Referral. A Mental Health Clinician from the VCS Mental Health Team will contact the student's parent(s)/guardian(s) to explore available counseling options for the student.

4. *Mental Health Evaluation* (when applicable)

A member of the district Mental Health Team will provide an assessment if the Threat Assessment Team determines that the level of threat is severe. This may result in a Baker Act.

5. *Baker Act* (when applicable)

The District Mental Health Team will determine if the student meets the criteria for a Baker Act. If a determination to Baker Act is made, the licensed mental health provider will complete the Baker Act paperwork. They will work with the school to contact law enforcement to initiate transportation of the student.

Baker Acts

Section 394.462, Florida Statute provides that an involuntary examination may be initiated by a mental health counselor by executing a certificate stating that he or she has examined the person within the preceding 48 hours, finding that the person appears to meet the criteria for involuntary examination, and stating the observations upon which that conclusion is based.

The parent/guardian should first be given the opportunity to initiate a voluntary examination. In the event the parent/guardian does not authorize voluntary examination (or cannot be reached and the student is in imminent danger), the mental health counselor shall nonetheless initiate the involuntary examination.

The school Principal or designee shall immediately notify the parent of a student who is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination pursuant to Section 394.463. The Principal or designee may delay notification for no more than 24 hours after the student is removed if the Principal or designee deems the delay to be in the student's best interest and if a report has been submitted to the central abuse hotline, pursuant to Section 39.201, Florida Statutes, based upon knowledge or suspicion of abuse, abandonment, or neglect.

Threat Response Procedures Specific to Suicidal Threats

School-based mental health professionals are increasingly faced with alarming numbers of students who are depressed, may engage in self-injurious behaviors (e.g., cutting), and who may be suicidal. It is critical to assess suicidal risk in order to increase the likelihood of matching the student with needed interventions and supports.

Like the goals of threat response when violence toward others is at stake, the goal of responding to students at risk of harming themselves include: ensure student safety, assess and respond to the level of risk, determine needed services, and ensure appropriate care.

- ***Supervise the student:*** Under no circumstances should the student be allowed to leave the school or be alone (even in the restroom) until the assessment and plan has been generated.

- **Link the Student with a Student Services Professional:** Potentially suicidal students should be immediately brought to the attention of a student services professional. This is typically a School Psychologist, School Counselor or School Social Worker.
- **Collaborate with administration, Threat Assessment Team, and/or the district Mental Health Team:** Many potentially difficult decisions must be made and consulting with other professionals is reassuring and prudent.
- **Suicide-proof the environment:** Ensure that the means to attempt suicide have been removed from the student or made inaccessible.
- **Utilize law enforcement when appropriate:** If a student resists, becomes combative, attempts to flee, or is in imminent danger, law enforcement should be contacted immediately.
- **Prepare a re-entry plan:** All students returning from Baker Act shall have a re-entry meeting with parents, school, and community mental health personnel.

The following procedure is to be followed in the event of a threat of suicide:

1. **Threat Assessment Form**

To be completed by the Threat Assessment Team in the student's SSS feature in Focus. In addition, contact the district mental health team immediately when the threat is deemed substantive.

2. **Assessing Level of Threat**

The Threat Assessment Team will work in collaboration to determine the appropriate level of risk. If the threat is deemed transient, the school-based Threat Assessment Team, in conjunction with the student's parent(s)/guardian(s), will determine if the student can remain safely at school for the remainder of the school day. However, if the Threat Assessment Team and parent/guardian deem that it may be unsafe for the student to remain at school, the student will be transferred to the parent's/guardian's care upon signing the Parent Acknowledgement Form and the Mutual Exchange of Information Form found in the Supplements section of the Threat Assessment Form in the SSS feature in Focus. Upon completion of the forms, the parent(s)/guardian(s) are encouraged to have their child medically evaluated.

If the risk is deemed substantive, the district Mental Health Team will be deployed to provide a Mental Health Assessment and determine if the student meets the Baker Act criteria. The Mental Health Team shall also be contacted if the Threat Assessment Team requires assistance from a Mental Health Clinician determining the level of threat posed by a student. All efforts should be made by the Threat Assessment Team to communicate with the parent/guardian to involve the parent/guardian in the assessment process.

3. **Mental Health Evaluation** (when appropriate)

Upon a preliminary determination that a student poses a threat of violence or physical harm to himself or herself or others using the Threat Assessment Form in the SSS feature

in Focus as a guide, the school shall immediately attempt to notify the student's parent or legal guardian. Nothing shall preclude school district personnel from acting immediately to address a threat. If the threat is deemed substantive, the Threat Assessment Team shall immediately notify the district's Mental Health Team. In addition, law enforcement shall be called to consult as part of the school's Threat Assessment Team. The Director of Safety and Security for Volusia County Schools or the Coordinator of Emergency Services and School Safety for Volusia County Schools, must be subsequently notified in the event of a substantive threat to inform them of the threat and the action steps taken. The school-based Threat Assessment team's administrator shall then report its determination to the Superintendent or his or her designee. The Threat Assessment Form must be completed, regardless of the level of threat (no threat, transient, or substantive), detailing the threat as well as action steps taken to ensure the safety of the student making the threat, and/or the safety of others in the school community.

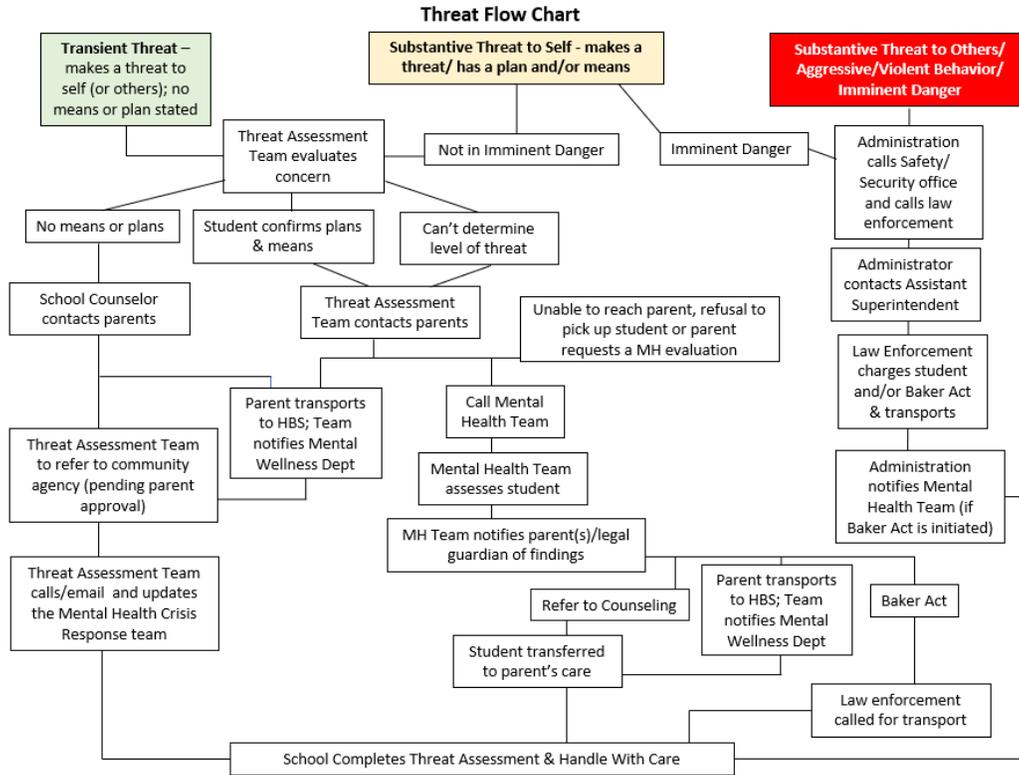
4. *Baker Act* (when appropriate)

The District Mental Health Team will determine if the student meets the criteria for a Baker Act. If a determination to Baker Act is made, the licensed mental health provider will complete the Baker Act paperwork. They will work with the school to contact law enforcement to initiate transportation of the student.

Throughout the steps of the assessment process, the principal is responsible for ensuring that all of the aforementioned steps have been completed.

In summary, central to the assessment of the threat level is the consideration of the following factors:

1. To what degree is the threat information credible?
2. To what degree is the threat information corroborated?
3. To what degree is the threat specific and/or imminent?
4. How grave are the potential consequences of the threat?
5. What do we know about the student's past or present circumstances that may contribute to this situation?



In the 2020-2021 school year, Volusia County Schools will continue its Threat Assessment process through our FOCUS system. The Threat Assessment System provides a series of questions that indicate the need for further evaluation and action. Based on the response of the Threat Assessment, the Mental Health team may be initiated for an immediate evaluation. The mental health response and intervention teams will have the ability to initiate Baker Acts, coordinate mental health services with the student’s primary care provider and other mental health providers, and facilitate the use of information sharing between providers and schools. The Mental Health Response and Intervention Teams will provide immediate on-site crisis management through assessment, de-escalation, consultation and referral with post crisis follow up to assure linkage with recommended services.

Students that are identified through the Threat Assessment process as a substantive threat will follow the same guidelines as addressed above.

Mental Health Response and Intervention Teams

Volusia County Schools’ five Mental Health Response and Intervention Teams will consist of a combination of Licensed Mental Health Counselors, Licensed Clinical Social Workers, Certified Addiction Professionals and School Psychologists.

The primary goal of these teams will be to provide identified at-risk students with direct mental health assistance in the form of mental health and substance abuse services. The

goal is to develop a personalized plan of care by identifying areas of support needed and the appropriate research-based mental health interventions.

Interventions that will be utilized are:

- **Coping Cats**
- **Second Step**
- **I Can Problem Solve**
- **Sanford Harmony**
- **RULER**
- **Small Group Counseling**
- **Individual Counseling**
- **Cognitive Behavioral Therapy (CBT)**
- **Solution Focused Therapy**
- **Brief Solution Focused Interventions (BSFI)**
- **Check and Connect**
- **Social Skills Improvement Skills (SSIS)**
- **Brief Strategic Family Therapy (BSFT)**
- **Creating Lasting Family Connections**
- **Life Skills Training (LST)**
- **Connecting to Community Resources**

Students will be identified through several formats: Family Referral, Self-Referral, Behavioral and Mental Health Screenings, Threat Assessment Team referrals, Counselor Referrals, and outside agencies.

Students that are considered a high risk may be referred for additional screenings and interventions to our community mental health agencies in which we currently have MOU's with or in which families identify as being their chosen vendor for services.

In addition, the Mental Health Response and Intervention Teams will coordinate services with primary care providers and other mental health agencies and professionals. The care coordination plans will ensure that the needs of our students are being addressed both in the school and within the community. Teams will work collaboratively to address issues of medication management, appointment follow-ups, individual care plans, and recovery and transition plans.

The Mental Health Response and Intervention Teams will also provide support for families in need of services by conducting family therapy sessions, strengthening family connections, and linking families to services within the community.

Mental Health Intervention Teams will allow Volusia County Schools to add an additional layer of support for students that are exhibiting “mental health distress.” These teams will provide appropriate interventions, strategies, and resources to help deescalate a situation and assist the student into moving back into behaviors that are more positive.

Mental Health Response and Intervention Teams are intended to:

- Relieve the immediate distress of individuals experiencing a crisis situation
- Reduce the risk of individuals in a crisis situation doing harm to themselves or others
- Promote timely access to appropriate services for those who require ongoing mental health or co-occurring mental health and substance abuse services
- Conduct threat assessments when the initial threat assessment at the school indicated high lethality
- Connect students and families to mental health services
- Coordinate Plans of Care (POC)
- Provide routine interventions to eliminate unacceptable behavior; and
- Provide mental health assessments, treatment, and recovery services to students with one or more mental health or co-occurring substance use diagnosis and the student is at high risk.
- Provide Youth Mental Health Training to all staff as outlined in statute.
- Provide crisis counseling in the event of a death or tragic situation.
- Conduct evening workshops for parents and students.
- Provide small group and individual counseling sessions using evidence-based interventions.
- Monitor Concern of Harms and work in conjunction with student services staff members.
- Assist with reintegration and transition for students going to or coming from an outside agency.
- Team members will carry a caseload of students needing intensive mental health counseling and/or substance abuse evidence-based interventions on a consistent basis.
- Coordinate re-entry and transition plans for students returning to a traditional school setting from an outside mental health facility/program.

How can Mental Health Response and Intervention Teams assist?

A Mental Health Response and Intervention Team can provide an assessment by a licensed mental health professional to determine the most appropriate level of care. While some individuals may require an evaluation at an emergency receiving facility, others may be able to have their needs met through outpatient appointments with a community behavioral health provider in their area. Mental Health Response and Intervention engagement may be

less traumatic for the individual. It often results in linkage to community services that provide the most appropriate level of care.

Mental Health Response and Intervention Teams will be able to provide direct, targeted, and effective mental health services to meet the individual and unique needs of an identified student. In addition, their role will be to ensure that families are linked with community mental health providers to secure the necessary interventions to meet the mental health needs of each individual situation.

Mental Health Response and Intervention Teams will provide Tier 2 evidence-based interventions for students who are exhibiting mental health concerns, substance abuse concerns, or have been identified as being “at risk”.

Students that are identified as high-risk needing Tier 3 interventions will be referred to and linked with community mental health agencies and providers to help meet the individual mental health needs of these students.

How will Mental Health Response and Intervention Teams collaborate with Multiagency Networks?

The Multiagency network for students with emotional and behavioral disabilities (SEDNET) works with education, mental health, child welfare, juvenile justice professionals, along with other agencies and families to provide children with mental illness or emotional and behavioral problems and their families with access to the services and supports they need to succeed. Volusia County Schools, in partnership with SEDNET, will work collaboratively to strengthen the support of mental health resources needed to address the specific and individual needs of our students.

Mental Health Response and Intervention Teams, in partnership with SEDNET, will support students in Volusia County by expanding school-based mental health services. SEDNET and the Mental Health Response and Intervention Teams will work to improve coordination of services, develop local response systems, and increase parent and youth involvement in local systems of care. The goal of this collaborative partnership will be to facilitate student and family access to effective services and programs that meet the mental, behavioral, and social emotional needs of our school system.

Mental Health Response and Intervention Teams

The Mental Health Response and Intervention Teams will be strategically placed throughout the district to ensure timely responses to student concerns. Teams will be deployed based on the location of the school. All schools will be serviced during the academic school year, although a smaller team will be available during the summer months. The following team members will be employed for 12 months: two Substance Abuse Professionals, two HBS Services Coordinators, and two Mental Health Specialists. Additional licensed mental health staff members can be activated in the event of a crisis.

Charter School Independent Submission

Ivy Hawn Charter School has elected to submit a plan independent from the Volusia County School District's Mental Health Assistance Allocation plan. Ivy Hawn has provided their own plan for submission and signed documentation indicating their desire to outline their plan independently.

Substance Abuse Professional

Volusia County Schools will contract with SMA Healthcare to provide two Substance Abuse Professionals to support all five teams and provide screenings and interventions for students that identify as having a substance abuse problem. For students identified as being a moderate or high risk of substance abuse, a referral to SMA Healthcare may be solicited. The Substance Abuse Professionals will be an employee of SMA Healthcare but will work in conjunction with the Mental Health Teams and will be housed within Volusia County Schools. This employee will be a 12-month employee and will continue to provide services throughout the summer.

District Mental Health Specialists

The two Mental Health Specialists will coordinate, supervise, and evaluate the Mental Health Response and Intervention Teams and provide district support and direction. In addition, these specialists are the point of contact that organize and facilitate/manage the Crisis Intervention and Threat Assessment Procedures and Response. The two Mental Health Specialists will work in conjunction with the district's Security Specialists. Specialists will evaluate mental health compliance during district security audits. The specialists will facilitate and monitor faculty and staff completion of the state mandated Youth Mental Health First Aid training and other district mental health trainings. The Mental Health Specialists will monitor/disaggregate/report district-wide mental health data. Both Mental Health Specialists assess students for Threat Assessment. Specialists will participate in the District Student Placement Committee (DSPC). The specialist will work as a liaison between the community mental health agencies for students needing mental health support. Specialists create promotional material and develop district Mental Health Forms; organize community mental health informational events; facilitate bi-weekly mental health staffing. The specialists annually revise the district mental health plan, threat assessment procedure, crisis manual and security audits. The Mental Health Specialists are 12-month employees who will continue to coordinate services throughout the school year and summer.

Counselor on Assignment (COA)

The Counselor on Assignment (COA) with the VCS Mental Health Teams answers phone calls from school-based Threat Assessment Teams when students are in crisis. The COA helps determine if a Mental Health Clinician should be dispatched to conduct an emergency screening, depending on the presenting concern. The COA receives the Mental Health Referrals that are submitted via the SSS feature in Focus by school-based staff and assigns the referrals to the Mental Health Clinicians for follow up. The COA also assists school-based staff on navigating the SSS feature in Focus and assists schools with trouble shooting issues within the SSS feature as possible. The COA receives and reviews Substantive Threat alerts and follows up with school-based Threat Assessment Teams when necessary regarding any items that are incomplete or require correction on forms in the SSS feature in Focus (i.e. Threat Assessment Form, Mental Health Referral, etc.), or regarding any

incomplete procedures, based on VCS Threat Assessment and Response Procedures. The COA assists the VCS Mental Health Specialists as needed with any tasks or mental health initiatives to help support our schools and students. The COA also works closely with two HBS Care Coordinators. The COA communicates the HBS discharge and follow up information shared by the HBS Care Coordinators with appropriate school-based staff in order to facilitate the re-entry meeting process upon students' return to school following a Baker Act. The COA also communicates routinely with HBS Care Coordinators to make them aware of students who are being transported to HBS for voluntary and involuntary screenings. The COA receives Substance Use Referral alerts submitted through the SSS feature in Focus and assigns the referrals to two SMA Counselors for follow up. The COA logs all Mental Health Clinician dispatches to assess students, Mental Health Referrals, and Substance Use Referrals. The COA tracks the use of Crisis Intervention Teams in the case of a student or faculty/staff death. The COA creates data charts quarterly, or as needed, to help inform and guide decision-making to address student mental health needs, as well as any necessary changes to the VCS Mental Health Teams as mental health trends and needs change within the district's schools and geographic areas within the district.

HBS Service Coordinators

Volusia County Schools will contract with Halifax Behavioral Services for two Services Coordinators. The two Service Coordinators identify and screen potential program participants and develop and facilitate a service delivery plan. They will monitor the implementation of the individualized service delivery plan up to 6 weeks after identified services commence with Halifax Behavioral Health to ensure continuity of care. These individuals assist in providing a valuable link between the school district and Halifax Behavioral Services. The Services Coordinator is an employee of Halifax Health but works in conjunction with the Mental Health Teams and is housed within Volusia County Schools. These individuals are 12-month employees and continue to offer services throughout the summer.

COORDINATION OF SERVICES

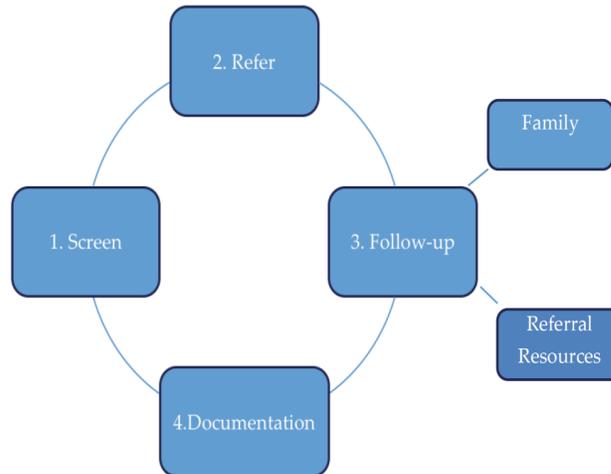
Volusia County Schools knows that students and families can benefit from access to a broad range of developmentally appropriate and family supportive, community-based services. As such, it is critical that there be an effective and sustainable process to ensure families are appropriately referred and can access such needed resources.

A primary goal of the Mental Health Response and Intervention Team is to ensure that mental health services are provided in coordination with the student's primary physician or other mental health provider. The Mental Health Response and Intervention Team will ensure the seamless coordination of these services by following the Care Coordination Process. The Care Coordinator Plan is a part of a tool kit that will be developed to assist in the coordination of services between the school system and medical providers.

The Mental Health Response and Intervention Team ensures that immediate access to mental health evaluations are available if students present with a concern. School-based mental health services are initiated in under 15 days after initial contact and assessment.

Those needing higher level supports from community-based providers have referrals completed within 24 hours and are followed up on by a member of the Mental Health Response and Intervention Team to guarantee the student is receiving services within 30 days.

Care Coordination Process



Volusia County Schools in coordination with Mental Health Agencies, SEDNET and Community Partnerships will develop strategies to promote inter-systemic collaboration.

The overall intent is to utilize a centralized Community Resource/Case Management Database software to increase the connectivity between community providers and youth and families in need, increasing the effectiveness and proper use of community resources.

The Mental Health Specialist for the district will ensure that the collaboration and sharing of information for students in need of additional support is accomplished. A mutual exchange of information will be completed between both parties with “treatment team” meetings with various mental health providers, community agencies and Primary Care Physicians to discuss individual cases. The Mental Health Specialists will serve as the point of contact for students that are transitioning back to Volusia County Schools from various treatment facilities.

In addition, Volusia County Schools will contract with Halifax Behavioral Services (HBS) to secure two Service Coordinators. With Halifax Behavioral being one of our primary referral sites and the Baker Act Receiving facility for adolescents, we believe having two Service Coordinators will allow for more effective transition care plans. These professionals will also work to assist with the coordination of services between HBS and Volusia County Schools.

Volusia County schools will meet yearly to review the plan and address any issues or concerns. Revisions to the plan may be made based on input from community providers and team members and requires the Superintendent’s approval.

RE-ENTRY MEETINGS

The goal of the re-entry process is to support the student's ability to be successful in school when he/she returns to school following a period of exclusionary discipline (suspension and/or DJJ issues) or returning from a Baker Act.

Through the process, the administrator, school counselor and other meeting attendees work collaboratively to complete a re-entry plan. The re-entry plan should be reasonable and achievable. The school is responsible for initiating a re-entry meeting. Schools are encouraged to reach out to district staff for additional support (e.g. the district Mental Health team, district ESE teams and or the district Safety and Security team)

When should a Re-Entry Meeting Occur?

- When a student has been Baker Acted
- When the student is returning from DJJ or an Alternative site
- When the student has been suspended for 10 or more days
- When the student makes a threat to harm others

Who should participate in the Re-Entry Meetings?

- Administrator(s)
- School Counselor(s)
- Parent(s)/Student
- ESE Representation (when appropriate)
- School Social Worker (when appropriate)
- School Psychologist (when appropriate)
- Mental Health Team Members (when appropriate)
- Safety and Security Specialist (when appropriate)
- Assistant Superintendents (when appropriate)

The purpose of the re-entry meeting is to develop a plan to re-engage the student in a school program tailored to the student's individual circumstances.

School staff should initiate the re-entry conference and make every effort to invite the parents/guardians to participate. If the student is an ESE student, a member of the ESE department should attend the meeting. A re-entry meeting should occur no later than **three days** before the student's reentry or enrollment.

Re-entry meeting participants should take into account:

- The circumstances related to the student's suspension or expulsion,
- The student's prior academic and discipline history,
- If the student has an IEP or 504 plan, the re-entry team should review the IEP, 504, and/or if applicable the Behavior Intervention Plan (*Note: Only an IEP Team/504 Team, through an IEP/504 Meeting, can make changes to a student's goals, services, accommodations and/or placement*),
- The severity of the disciplinary incident that led to the student's exclusion, and
- Mental Health concerns related to the individual student.

The goals of the re-entry meeting are to:

- Address the individual academic, behavioral and mental health needs of the student,
- Identify point-person to support student,
- Develop a specific crisis and safety plan,
- Set a clear plan for addressing long-term absence and missed work, and allow for adjustments in classwork/homework upon return,
- Implement daily/weekly check-ins with the student,
- Establish a procedure for communication to provide regular feedback to parents/guardians on student’s adjustment back to school. A follow-up meeting should always be scheduled to address additional supports needed and progress, and
- Provide family with information regarding outside services.

The purpose of the re-entry plan is to:

- Discuss the services available to the student to support their re-entry process,
- Define what the student is required to do before returning to school, and
- Identify supportive interventions that will be in place when the student returns to school.

Re-entry plans are completed on the SSS Platform of FOCUS.

**Threat Response to Suicide and/or Harm to Self or Others
Re-Entry Meeting**

Student Name: DANIEL F WOODWARD Student ID: 1884702 Gender: M
Grade: 08 Campus: DEMONSTRATION SCHOOL SECONDARY - 0444 DOB: 02/28/2007
Parent: Primary Exceptionality: NA Phone:
Email: TVIYP@vcs2go.net Address: NA

Date of School Re-Entry Meeting: IEP or 504 Plan Reviewed:

Safety or Mental Health Concern Overview:

Discharge Plan if Hospitalized

Medications Prescribed:

Plan Recommendations:

Outside Agency Services in place:

Agency (A) Name: Agency (A) Phone:

Agency (A) Service:

Agency (B) Name: Agency (B) Phone:

Agency (B) Service:

Referrals Made at the Meeting:

HANDLE WITH CARE

A recent national survey of the incidence and prevalence of children’s exposure to violence and trauma revealed that 60% of American children have been exposed to violence, crime or abuse. Forty percent were direct victims of two or more violent acts. Prolonged exposure to violence and trauma can seriously undermine children’s ability to focus, behave appropriately, and learn in school. It often leads to school failure, truancy, suspension or expulsion, dropping out, or involvement in the juvenile justice system.

A “Handle with Care” (HWC) alert is tailored to reflect the needs and issues affecting students throughout Volusia County Schools. The below reasons may trigger a HWC alert:

- Exposed to a traumatic event
- Involved in an incident of bullying and/or harassment
- Have a Re-Entry Plan
- Have had a mental health assessment
- Need additional support for various reasons

This symbol will allow for teachers and staff to understand and respond to trauma in a positive manner. HWC promotes school-community partnerships aimed at ensuring that students who are exposed to trauma in their home, school or community receive appropriate interventions to help them achieve academically at their highest levels despite whatever traumatic circumstances they may have endured. The goal of HWC is to help students to succeed in school. Regardless of the source of trauma, the common thread for effective intervention is the school. Research now shows that trauma can undermine children’s ability to learn, form relationships, and function appropriately in the classroom.

HWC alerts can be triggered automatically through an initiated event in the Social/Emotional Wellness platform or may be activated by identified staff members. Schools are encouraged to review their HWC alerts on a monthly basis to determine students that need additional support.

The screenshot displays the 'Handle With Care' section of the Social/Emotional Wellness platform. At the top, the user is identified as Amy Hall, DEMONSTRATION SCHOOL SECONDARY - 0444, with a user ID of DANIEL FLASH WOODWARD. The interface includes navigation tabs for Enrollment, Schedule, Requests, Grades, Gradebook, Absences, Activities, Referrals, Test History, and Audit Trail. The main content area shows an 'Active Handle With Care Event' for student WOODWARD, DANIEL (1884702) on 05/05/2019. The explanation provided is 'Subject of Bullying'. Below this, a 'Handle With Care Log' table lists a report from Amy Hall on 05/05/2019 with the explanation 'Dog Died'. The interface also features 'Counselor Notes' and 'Export' options.

OUTCOME DATA REVIEWS

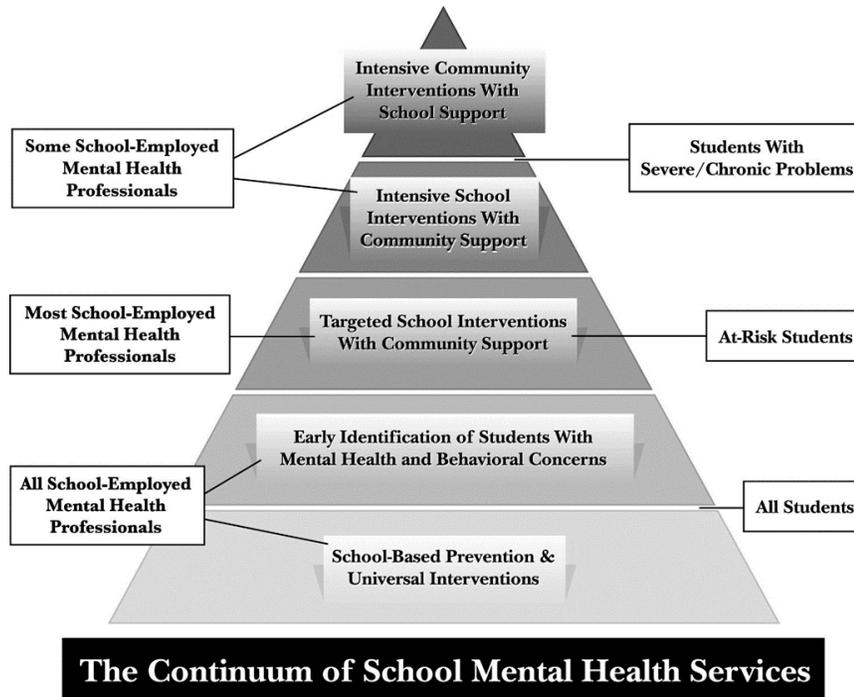
On a monthly basis the school-based Mental Health Collaboration committee will review outcome data to evaluate the effectiveness of services. In addition to quarterly reviews, an end of year review and revision of staff allocations based on school or student mental health assistance needs will be conducted and compared to the previous school year. This will assist the team in planning and program evaluation. The below data will be analyzed for trends, areas of concern and evidence of effectiveness.

- Threat Assessment Data
- Baker Act Data
- Discipline Referrals
- Bullying Incidents
- Attendance Data
- School Climate Data
- Youth Risk Behavioral Survey Data
- Early Warning System Indicators
- Graduation Assurance Data
- Referral Data to Community Agencies and outcome data
- Mental Health Referral Data
- Number of Students Screened, Assessed and Referred and Outcome Data

Volusia County Schools will utilize the Social Emotional Wellness feature inside of Focus to track referrals, assessment data and outcome data in addition to anecdotal notes. By using the Social Emotional Wellness feature, we will be able to accurately track and monitor student referrals and progress.

CONCLUSION

Through this model, Volusia County Schools will be able to address the varying needs of our students by implementing a continuum of school mental health services. By building a partnership with our community mental health agencies and specialists, utilizing our school-based mental health providers and implementing a proactive, evidence-based mental health prevention, awareness and intervention program, Volusia County Schools believes that it will be able to efficiently and effectively help our students be successful, not only academically, but socially and emotionally as well.



The Mental Health Assistance Allocation does not supplant other funding sources, increase salaries or provide staff bonuses. The money allocated will be used to expand direct mental health and/or substance abuse services to our students, train educators in responding to mental health issues; connect children, youth, and families with appropriate behavioral health services, and provide for the coordination of such services with primary care and mental health providers.

GUIDING QUESTIONS

A. Mental Health Assistance Allocation Plan

Describe the delivery of evidence-based mental health assessment, diagnosis, intervention, treatment and recovery through a multi-tiered system of supports.

Volusia County Schools' plan includes Mental Health Response and Intervention Teams that consist of licensed and registered mental health clinicians, Mental Health Providers, two Certified Addictions Professionals, two HBS Service Coordinators, two Mental Health Specialists and a Counselor on assignment (COA).

The primary goal of these teams is to provide direct mental health assistance and link identified students in need of mental health and substance abuse services to community resources and services.

Students will be identified through several formats: Family Referral, Self-Referral, Behavioral and Mental Health Screenings, Threat Assessment Team Referrals, Teacher Referrals, and Outside Agencies.

In addition, the Mental Health Response and Intervention Teams will coordinate services with primary care providers and other mental health agencies and professionals. The care coordination plans will ensure

that the needs of our students are being addressed both in the school and within the community. Teams will work collaboratively to address issues of medication management, appointment follow-ups, individual care plans, and recovery and transition plans.

The Mental Health Response and Intervention Teams will also provide support for families in need of services by strengthening family connections and linking families to services within the community.

For students at moderate or high risk, the team will link students and families to services within the community to include private providers, community mental health agencies and primary care physicians.

For students at low risk, but in need of additional support, evidence-based mental health services will be provided to students. Volusia County Schools will utilize the following process when identifying evidence-based mental health and substance abuse interventions:

1. Review data and individual student needs
2. Access EBI via National Center for Intensive Interventions
3. Tier Interventions based on need and accessible resources
4. Ensure team is trained in evidence-based services and monitored for fidelity.

Interventions that Volusia County Schools may utilize are (but are not limited to):

- Coping Cats
- Second Step
- I Can Problem Solve
- Sanford Harmony
- RULER
- Small Group Counseling
- Individual Counseling
- Cognitive Behavioral Therapy (CBT)
- Solution Focused Therapy
- Brief Solution Focused Interventions (BSFI)
- Check and Connect
- Social Skills Improvement Skills (SSIS)
- Brief Strategic Family Therapy (BSFT)
- Creating Lasting Family Connections
- Life Skills Training (LST)
- WhyTry

State how the plan will focus on evidence-based mental health services for students with one or more co-occurring mental health or substance abuse diagnoses and students at high risk of such diagnoses.

Volusia County Schools offers a myriad of services, evidence/research-based interventions and programs that meet the social emotional needs of our students within a multitiered systems of support. The below chart outlines the evidence-based mental health services that will be offered in VCS, which will include the implementation of Mental Health Response and Intervention Teams as a condition of the Mental Health Assistance Allocation.

Identify specific student needs and deliver individualized intervention:					
Tier 3: Specialized Supports for a Few Students	Elementary VCS District Supported Practices	Suggested Intervention Provider	Secondary VCS District Supported Practices	Suggested Intervention Provider	
	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams	
	I Can Problem Solve	Counselor	RULER Approach to SEL	School-based Team	
	Coping Cats - ESE	Counselor, School Psychologist, School Social Worker	Check & Connect Mentoring Program	School-based trained personnel	
	RULER Approach to SEL	School-based Team/Teachers	Social Skills Improvement System (ESE)	ESE Teacher Behavior Specialist	
	Counseling (small group using evidence/research-based interventions)	School Counselor MH Counselors	Counseling (small group using evidence/research-based interventions)	School Counselor MH Counselor	
	<i>Evidence/Research-based interventions from the following sources:</i>		<i>Evidence/Research-based interventions from the following sources:</i>		
	Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management	Teacher	Tough Kids Toolbox (6-8) Teacher’s Encyclopedia of Behavior Management	Teacher	
	www.pbisworld.com www.interventioncentral.com	Teacher	www.pbisworld.com www.interventioncentral.com	Teacher	
	Mental Health Response and Intervention Teams	Counselor/School Based Administrator	Mental Health Response and Intervention Teams	Counselor/School Based Administrator	
	Restorative Practice Formal Conference	School Based Administrators Deans of Student Rel School Counselors	Restorative Practice Formal Conference	School Based Administrators Deans of Student Rel School Counselors	
	Identify students & implement structured interventions for SEL:				
	Tier 2: Targeted Supports for Some Students	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams	Referral to Outside Mental Health Agencies (Devereux, Adapt, HBS, Chrysalis and Children’s Home Society)	Referrals made by School Based Teams and Mental Health Intervention Teams
Second Step		Counselor	Restorative Practices Circles	DSR/SEL TOA/Admin/Teacher	
I Can Problem Solve		Counselor	Student Success Skills	Counselor	
Student Success Skills		Counselor	SEL TOA Small Group	SEL TOAs	
Restorative Practices Circles		Teacher			
Evidence/Research-based interventions from the following sources:		Teacher	Evidence/Research-based interventions from the following sources:	Teacher	
Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management		Teacher	Tough Kids Toolbox Teacher’s Encyclopedia of Behavior Management	Teacher	
CHAMPS: SOS!		Teacher	CHAMPS: SOS!	Teacher	
Mental Health Response and Intervention Teams		Counselor/School Based Administrator	Mental Health Response and Intervention Teams	Counselor/School Based Administrator	

	www.pbisworld.com www.interventioncentral.com	Teacher	www.pbisworld.com www.interventioncentral.com	Teacher
Tier 1: Core Universal Structure for all Students	Build school-wide systems and structures:			
	School-wide Positive Behavior Intervention and Supports (PBIS)	School-based Team	School-wide Positive Behavior Intervention and Supports (PBIS)	School-based Team
	Say Something	Sandy Hook Consultant Team	Say Something	Sandy Hook Consultant Team
	Adopt proactive & classroom management strategies:			
	CHAMPS	Teacher	CHAMPS	Teacher
	Implement best practices for student engagement/SEL:			
	RULER Approach to SEL	School-based Team	Restorative Practices	School-based Team
	Sanford Harmony	Counselor/Teacher	Second Step	Counselor
	Restorative Practices	School Based Teams	Restorative Practices	School Based Teams

Through the use of the MTSS system, students are identified to receive interventions to meet their specific needs. During Tier 1, students receive social emotional wellness and mental health education. In Tier 2, students who do not respond to Tier 1 interventions are identified and provided additional support through student services (i.e. school counseling, school social workers, school psychologists, social emotional learning small groups). Students who need more intensive services, as evidenced by a lack of response to Tier 2 interventions, are provided with Tier 3 interventions. When a student is identified as needing mental health intervention, the student is assessed by a district mental health clinician. The mental health clinician assesses the needs of the student, and with school-based administration, determines the level of care and support interventions. For students with one or more co-occurring substance abuse diagnoses and/or are at high risk of such diagnoses, a VCS mental health clinician will utilize their diagnosis and coordinate with the student’s primary mental health care provider and with other mental health providers involved in the student’s care.

Brief-solution focused therapy and cognitive/behavioral therapy (along with other evidence-based mental health therapy interventions) will be used to support identify goals for treatment, interventions and treatment for recovery. Students work with the VCS mental health clinician during the initial session to determine goals and individualized treatment and discharge plan.

Volusia County Schools contracts with SMA Healthcare to provide two Certified Addiction Substance Abuse Professionals to support the teams and provide screenings and interventions for students that identify as having a substance abuse problem. For students identified as being a moderate or high risk of substance abuse, a referral to SMA Healthcare may be solicited. The Substance Abuse Professionals will be an employee of SMA Healthcare but will work in conjunction with the Mental Health Teams and will be housed within Volusia County Schools. This employee will be a 12-month employee and will continue to provide services throughout the summer.

Describe the process for coordinating mental health services for students at charter schools that are part of the school district’s plan.

Services are currently in all charter schools throughout our district (excluding charter schools that opt out of the VCS Mental Health plan). Students are referred by student services personnel, school-based administrators, or parents and are seen by a registered intern or licensed mental health therapist, weekly. Volusia County Schools delivers the Youth Mental Health First Aid and Kognito training for all

charter school faculty and staff. Additionally, VCS provides the five-hour mental health education for grades 6-12, the one-hour substance abuse education and the one-hour human trafficking education to grades K-12, for charter schools to administer.

Include direct employment of school-based mental health services providers (i.e., school psychologists, school social workers, school counselors and other licensed mental health professionals) to reduce staff to-student ratios and meet student mental health assistance needs.

Volusia County Schools believes in the importance of an integrated student services approach to addressing the needs of our students. School-employed mental health professionals are trained to address mental health, social-emotional and behavioral needs. School counselors, school psychologists, school social-workers, and behavioral specialists provide the vast majority of school-based mental health services. They are specially trained in school system functioning and learning, as well as how students' behavior and mental health impacts their ability to be successful in school.

The Mental Health plan includes Mental Health Response and Intervention Teams that consists of licensed and registered mental health clinicians, two Mental Health Specialists and a Counselor on Assignment (COA). The job duties of these individuals will be to work specifically and exclusively with our students in need of mental health and substance abuse support. The addition of these job roles will aid our Mental Health Specialists by allowing targeted interventions for our students in need (Tier 2).

Volusia County Schools currently employs the following school-employed mental health providers:

Title	Description	Number of Mental Health Providers
School Social Workers	23 School Social Workers	23
School Psychologists	27 School Psychologists	27
School Counselors	148 School Counselors at all three levels.	148
School Nurses	10 RN's 43 LPN's 28 Clinic Assistants [CNAs] 3 CMA	84
Mental Health	7 Mental Health Counselors 5 School Social Workers 2 School Psychologist 2 Substance Abuse Counselors 2 Care Coordinators 2 District Mental Health Specialists 1 Counselor on Assignment	21
Total		303

With the additional school-based mental health services staff projected for the 2020-2021 school year, VCS will have a staff to-student ratio of 1:190.

Identify strategies to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).

School counselors are required to provide 80% of their time to direct contact with students. Per direction from the Superintendent, school counselors shall make individual contact with each student at least twice a year. The district has allocated resources to provide additional school counselors to work directly with students. The additional school counselors will provide students with increased Tier 1 intervention.

In review of data, Volusia County Schools plan provides additional mental health counselors to identified areas with increased needs and risks. On a monthly basis the school-based Mental Health Collaboration committee will review outcome data to evaluate the effectiveness of services. In addition to quarterly reviews, an end of year review and revision of staff allocations based on school or student mental health assistance needs will be conducted and compared to the previous school year. This will assist the team in planning and program evaluation. The below data will be analyzed for trends, areas of concern and evidence of effectiveness.

- Threat Assessment Data
- Baker Act Data
- Discipline Referrals
- Bullying Incidents
- Attendance Data
- School Climate Data
- Youth Risk Behavioral Survey Data
- Early Warning System Indicators
- Graduation Assurance Data
- Referral Data to Community Agencies and outcome data
- Mental Health Referral Data
- Number of Students Screened, Assessed and Referred and Outcome Data

Volusia County Schools will utilize the Social Emotional Wellness feature inside of Focus to track referrals, assessment data and outcome data in addition to anecdotal notes. By using the Social Emotional Wellness feature, we will be able to accurately track and monitor student referrals and progress.

State how the plan will establish school board policies and procedures for all schools, including charter schools, to ensure:

The VCS Mental Health Plan ensures that the Mental Health Response and Intervention Team provides immediate access to mental health evaluations. School-based mental health services are initiated in under 15 days after initial contact and assessment. Those needing higher level supports from community-based providers have referrals completed within 24 hours and are

followed up on by a member of the Mental Health Response and Intervention Team to guarantee the student is receiving services within 30 days.

Volusia County Schools will review and revise the current school board policy to reflect the following:

1. Students referred for a mental health screening are assessed within 15 days of referral.
2. School-based mental health services are initiated within 15 days of identification and assessment.
3. Community-based mental health services are initiated within 30 days of referral.

Describes the collaborative partnerships with community providers and agencies.

Volusia County Schools has an agreement with six community agencies to provide school-based behavioral mental health services for students who are at risk of emotional and behavioral challenges. Currently, Volusia County Schools has an agreement with the following entities:

- **Halifax Behavioral Services (HBS)**
- **Devereux Services**
- **Chrysalis Health**
- **Adapt Behavioral Services**
- **Children’s Home Society of Florida**
- **SMA Healthcare**

Volusia County Schools has had a long-standing partnership with two of our community agencies, HBS and Devereux, since 2000. The school-based mental health services that are provided by our community agencies include a broad spectrum of assessment, prevention, intervention, postvention, counseling, consultation, and referral activity services. These services are essential to the stability of our district’s ability to ensure a safe and healthy learning environment for all students. They promote students’ academic success and their social and emotional needs.

Services are currently in all public and charter schools throughout our district (excluding charter schools that opt out of the VCS Mental Health plan). Students are referred by student services personnel, school-based administrators or parents and are seen by a registered intern or licensed mental health therapist weekly. In addition, our community mental health partnerships provide support to our separate class/EBD units, Title I schools, full-service and comprehensive schools, low performing schools, schools with high discipline referrals and schools with high concern of harm intervention.

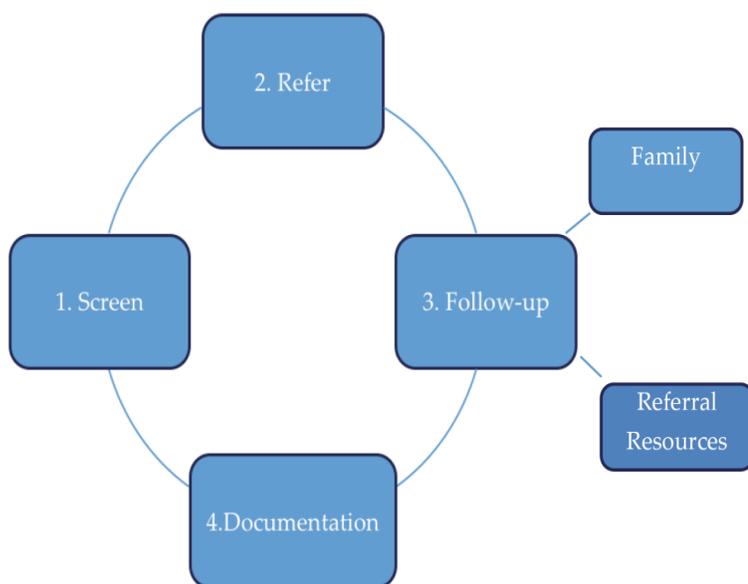
The Mental Health Response and Intervention Teams will work closely with our community mental health partners to link families to services and help support the individual needs of our students. Students that are identified as being moderate to high risk will be referred to outside agencies and primary care providers for additional support. In addition, our Mental Health Providers will work in conjunction with our providers to ensure that the strategies and resources recommended by our community providers are implemented in the school setting.

Describe the 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.

Volusia County Schools knows that students and families can benefit from access to a broad range of developmentally appropriate and family supportive, community-based services. As such, it is critical that there be an effective and sustainable process to ensure families are appropriately referred and can access such needed resources.

A primary goal of the Mental Health Response and Intervention Team is to ensure that mental health services are provided in coordination with the student’s primary physician or other mental health provider. The Mental Health Response and Intervention Team will ensure the seamless coordination of these services by following the Care Coordination Process. The Care Coordinator Plan is a part of a tool kit that will be developed to assist in the coordination of services between the school system and medical providers.

Care Coordination Process



Volusia County Schools, in coordination with Mental Health Agencies, SEDNET and Community Partnerships, will develop strategies to promote inter-systemic collaboration.

The Mental Health Specialist(s) for the district will ensure that the collaboration and sharing of information for students in need of additional support is accomplished. A mutual exchange of information will be completed between both parties via “treatment team” meetings with various mental health providers, community agencies and Primary Care Physicians to discuss individual cases. The Mental Health Specialist(s) will serve as the point of contact for students that are transitioning back to Volusia County Schools from various treatment facilities.

Volusia County Schools will contract with SMA Healthcare to provide two Certified Addiction Substance Abuse Professionals to support the teams and provide screenings and interventions for students that identify as having a substance abuse problem. For students identified as being a moderate or high risk of substance abuse, a referral to SMA Healthcare may be solicited. The Substance Abuse Professionals will be an employee of SMA Healthcare but will work in conjunction with the Mental Health Teams and will be housed within Volusia County Schools. This employee will be a 12-month employee and will continue to provide services throughout the summer.

In addition, Volusia County Schools will contract with Halifax Behavioral Services (HBS) to secure two Service Coordinators. With Halifax Behavioral being one of our primary referral sites and the Baker Act receiving facility

for adolescents, we believe having two Services Coordinators will allow for a more effective transition care plan. This professional will also work to assist with the coordination of services between HBS and Volusia County Schools.

Volusia County Schools will meet yearly to review the plan and address any issues or concerns. Revisions to the plan may be made based on input from community providers, team members and require the Superintendent's approval.

Identify strategies or programs to improve provision of early intervention services, assist with students dealing with trauma and violence; reduce the likelihood of at-risk students developing social, emotional, or behavioral problems; depression; anxiety disorders; suicidal tendencies; or substance abuse disorders.

Volusia County Schools believes in the importance of training our students, faculty, and staff in identifying mental health concerns, behavioral concerns and issues that need additional support and resources. VCS has developed a comprehensive approach to addressing the mental health, social-emotional, and behavioral needs of our students by employing school based mental health programs. The school-based mental health programs that are employed by VCS focus on all students with some targeting students at high risk of mental health problems. For most of the programs the content is provided to the students in specific, daily, or weekly sessions over a period of weeks or over the entire school year. For some of the programs, the intervention is incorporated into the existing school curriculum and daily activities and support is ongoing. Classroom teachers, student services professionals, school social workers, and school psychologists are all trained to provide the school based mental health programs to our students

As of May 2019, over 2,400 Volusia County School employees have been trained in **Youth Mental Health First Aid**. We will continue in the 2020-2021 school year training remaining staff members in Volusia County Schools. The course provides educators ways to early identify 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, trauma, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders. Volusia County Schools incorporates this requirement into our Security Audits to ensure compliance. The expectation is that all staff members will have completed the Youth Mental Health First Aid Training by August of 2024. Volusia County Schools will utilize every opportunity to ensure that all staff are trained in Youth Mental Health First Aid.

Additionally, Volusia County Schools has trained 6,680 school-based staff in the **Kognito Florida School Personnel Mental Health Awareness** training. This supplemental training provides individuals techniques/skills to recognize early warning signs of distress and how to connect those in need with support.

During the 2019/2020 school year, Volusia County Schools completed the Sandy Hook Promise "Say Something" training to our students and staff. **Say Something** informs and educates staff members and students about observable warning signs (written, spoken, photographed, in video) that are often present in behavior that could lead to someone hurting themselves or others as well as educates individuals on how to safely and anonymously report potential threats (early identification). Volusia County Schools will continue to use the tools provided by Say Something to promote and reinforce student safety.

Volusia County Schools continues to utilize the Sandy Hook Promise's **Safety and Intervention** (SAI), to train school-based teams. SAI teaches adults in the schools how to identify, assess and respond to threats of violence or at-risk behavior BEFORE a tragedy takes place. SAI not only addresses the threat itself but also helps identify and treat the underlying problem in that youth's life that led to him/her making the threat.

Below is a list of programs that are currently being implemented within Volusia County Schools:

CHAMPS - *CHAMPS* assists classroom teachers to design (or fine tune) an early intervention plan that promotes positive social, emotional, and behavioral classroom management that will overtly teach students how to behave responsibly.

Check & Connect – Comprehensive early intervention designed to enhance student engagement at school and with learning for marginalized, disengaged students in grades K-12, through relationship building, problem solving and capacity building, and persistence (SEL). A goal of *Check & Connect* is to foster school completion with academic and social competence.

Coping Cats - Used by School Psychologists and School Social Workers for Counseling as a Related Service with ESE students. It is a cognitive-behavioral therapy intervention that helps children recognize and analyze anxious feelings and develop strategies to cope with anxiety-provoking situations- potentially from a traumatic/violent event.

I Can Problem Solve - I Can Problem Solve (ICPS) is a universal, early-intervention, school-based program designed to enhance the interpersonal cognitive processes and problem-solving skills of children in preschool through grade 6.

Positive Behavior Intervention & Supports - PBIS is based on understanding why problem behaviors occur. This early-intervention approach to behavior can occur on a school-wide level, in a specific setting, classroom, or with an individual student. PBIS is the application of evidence-based strategies and systems to assist schools to increase academic performance, increase safety, decrease problem behavior, increase social, emotional awareness, and establish positive school cultures.

Restorative Practices - A restorative school is one which takes a restorative approach to resolving conflict and preventing harm. It assists students dealing with trauma and violence. Restorative approaches enable those who have been harmed to convey the impact of the harm to those responsible, and for those responsible to acknowledge this impact and take steps to put it right. Restorative approaches refer to a range of methods and strategies which can be used both to prevent relationship-damaging incidents from happening and to resolve them if they do happen.

RULER Approach to Social-Emotional Learning - RULER is an acronym that stands for Recognizing, Understanding, Labeling, Expressing and Regulating emotions. The program grounds teachers, staff, students, and families in the Anchors of Emotional Intelligence. The fundamental RULER tools enhance individuals' ability to understand and regulate their own emotions and to consider and empathize with how others are feeling. The Anchors also foster the kind of healthy emotional climate essential to personal growth.

Sanford Harmony – A program with a series of innovative social, emotional, and behavioral lessons that focus on increasing relationship-building and teaching strategies designed to strengthen understanding and communication between children. The goal of Harmony is to create inclusive classroom communities, where teaching takes priority over resolving personality conflicts or issues among students.

Second Step - Research-based, sequenced curriculum focusing on essential life and learning skills, anger management, conflict resolution and self-regulation (SEL). Media-rich content engages students and reinforces positive behavior and fully scripted lessons are easy to integrate into the day.

Social Skills Improvement System (SSIS) - The Social Skills Improvement System addresses the need for an evidence-based, multi-tiered assessment and intervention system to help you help students develop, improve, and maintain important social skills (SEL).

CHAMPS: SOS! - This training is recommended for general education and ESE teachers that have received previous CHAMPS classroom management training but would like additional strategies to address one or more specific student behavior challenges. This behavior training addresses tier 2 and tier 3 behavior challenges.

Participants will be guided through a process of identifying, clarifying, and narrowing the scope of one or more classroom management challenges. Participants will design an intervention plan using the following action steps: 1) discuss function of behavior; 2) select a replacement behavior for an identified behavior challenge; 3) design a teaching plan; 4) arrange the environment to facilitate success; 5) develop responses for desired and undesired behavior; and 6) write a behavior goal. Participants will obtain and improve professional knowledge and competencies related to facilitating a highly structured, individualized classroom environment with consistent approaches to student behavior management. Participants will: 1) know how to follow a step-by-step process for analyzing behavioral or motivational problems; 2) understand that behaviors can serve a variety of functions; 3) develop an intervention plan based on data collection.

Informal Circles: Circles can be done by teachers quickly as a way to have students check in, check out, or deal with classroom tension in a quick and informal, early-intervention manner. It also can be used in academic ways to evaluate understanding of concepts.

Formal Circles: This can be conducted after major offenses (i.e. trauma/violence) have been committed and the student(s) has had to miss school. Formal circles should include school-based stakeholders as well as the offender and his/her support group and the offended with his/her support group. Ideally, they will meet together but that may not always be prudent.

Say Something: Say Something is an early-intervention education and awareness program that provides tools and practices to:

- Recognize the signs & signals of a potential threat – especially in social media
- Teach and instill in participants how to take action
- Drive awareness and reinforce the need to Say Something

Suite 360: Mental Health Education: The Suite 360 program consists of age appropriate and differentiated lessons for each grade level 6-12. These lessons will cover the specific topics that have been identified by the Florida Department of Education to be addressed through developmentally appropriate instruction and skill building the following topics:

- (a) Recognition of signs and symptoms of mental health disorders;
- (b) Prevention of mental health disorders;
- (c) Mental health awareness and assistance;
- (d) How to reduce the stigma around mental health disorders;
- (e) Awareness of resources, including local school and community resources;
- (f) The process for accessing treatment;
- (g) Strategies to develop healthy coping techniques;
- (h) Strategies to support a peer, friend, or family member with a mental health disorder;
- (i) Prevention of suicide;
- (j) Prevention of the abuse of and addiction to alcohol, nicotine, and drugs.

Students will have access to mental/emotional health education curriculum materials which include videos, infographics, images, and media clips. Each lesson will be accompanied by a resource guide with links and text/phone numbers to national and local resources. Lessons will also contain explicit instructions on how to

HELP (Help, Empathize, Listen, Plan) or ACT (Apply coping strategies; Consider your options for help; Talk to trusted adult).

WhyTry - The WhyTry program uses a unique multisensory approach that allows students to see, hear, and experience the concepts being taught. Visual analogies give students achievable steps to gaining life skills, develop resilience in academic and real-world settings and improve individual emotional health. For the hands-on learner, the program uses activities with relevant tie-ins, to reinforce social emotional principles in an engaging way. For visual learners, it uses relevant videos to spark classroom discussion, and take advantage of art and writing activities. Additionally, WhyTry uses music to make information relatable to the students in a format that is relatable.

The mental health teams provide direct mental health assistance and link identified students in need of mental health and substance abuse services to community resources and services. Volusia County Schools contracts with SMA Healthcare to provide two Certified Addiction Substance Abuse Professionals to support the teams and provide screenings and interventions for students that identify as having a substance abuse problem. For students identified as being a moderate or high risk of substance abuse, a referral to SMA Healthcare may be solicited. Students will be identified through several formats: Family Referral, Self-Referral, Behavioral and Mental Health Screenings, Threat Assessment Team referrals, Teacher Referrals, and Outside Agencies. Upon receiving the referral, the Mental Health Response and Intervention Teams may refer eligible students to a community provider or provide group/individual therapy.

B. Expenditures

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

School-based Mental Health Providers Funded through Mental Health Allocation					
Mental Health Team Members	5 Social Workers	Licensed	Registered	FLDOE Certification	18
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Social Worker	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
	2 School Psychologists	Licensed	Registered	FLDOE Certification	
	School Psychologist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	School Psychologist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	7 Mental Health Counselors	Licensed	Registered	FLDOE Certification	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Mental Health Counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1 Counselor on Assignment	Licensed	Registered	FLDOE Certification
	Counselor on Assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	2 Mental Health Specialists	Licensed	Registered	FLDOE Certification
	Mental Health Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Mental Health Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Number and licensure of community-based mental health providers funded by the allocation.

Community-based Mental Health Providers Funded through Mental Health Allocation				
	2 Substance Abuse Counselors	Licensed	Registered	FLDOE Certification
	Substance Abuse Counselor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Substance Abuse Counselor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2 Care Coordinators	Licensed	Registered	FLDOE Certification
	Care Coordinator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Care Coordinator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2 Mental Health Counselors			
	Mental Health Clinician	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Mental Health Clinician	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

CERTIFIED SUBSTANCE ABUSE COUNSELORS - SMA-HEALTHCARE CONTRACT (2)	\$ 120,000.00
HBS SERVICE COORDINATOR - HALIFAX HEALTH CONTRACT (2)	\$ 130,000.00
ADAPT BEHAVIORAL CONTRACT	\$ 10,000.00
TOTAL: COMMUNITY CONTRACTED MENTAL HEALTH SERVICES	\$ 260,000.00

Other expenditures.

MENTAL HEALTH TEAMS (TOTAL OF 21 MENTAL HEALTH CLINICIANS)	\$ 1,320,623.00
MENTAL HEALTH SPECIALISTS (2)	\$ 180,000.00
COUNSELOR ON ASSIGNMENT (1)	\$ 67,000.00
6-12 COUNSELING SPECIALIST (1)	\$ 90,000.00
K-5 COUNSELING SPECIALIST (1)	\$ 90,000.00
NURSING SUPERVISOR (.06 FTE)	\$ 4,000.00
SCHOOL COUNSELOR (1 FTE)	\$ 56,000.00
TRAVEL/OFFICE EXPENSES	\$ 30,000.00
INFORMATIONAL PRODUCTS TO CONNECT CHILDREN, YOUTH AND FAMILIES WHO MAY EXPERIENCE BEHAVIORAL ISSUES WITH APPROPRIATE SERVICES	\$ 20,000.00
MATERIALS - PRINTING	\$ 8,000.00
PROFESSIONAL DEVELOPMENT TO TRAIN EDUCATORS AND MENTAL HEALTH CLINICIANS ON CURRENT EVIDENCED BASED STRATEGIES TO PROPERLY DETECT, ASSESS AND RESPOND TO STUDENT NEEDS.	\$ 35,000.00
MENTAL HEALTH CURRICULUM TO BE IMPLEMENTED BY MENTAL HEALTH CLINICIANS TO PROVIDE YOUTH AND CHILDREN WITH APPROPRIATE MENTAL AND BEHAVIORAL SUPPORT AND INTERVENTIONS. (I.E. MERRELL'S STRONG KIDS)	\$ 18,000.00
YOUTH MENTAL HEALTH FIRST AID BOOKS TO ASSIST EDUCATORS AND OTHER SCHOOL STAFF IN HOW TO DETECT AND RESPOND TO MENTAL HEALTH ISSUES AND CONNECT CHILDREN, YOUTH, AND FAMILIES WITH APPROPRIATE MENTAL AND BEHAVIORAL HEALTH SERVICES.	\$40,000.00
CHARTER SCHOOL ALLOCATION	\$ 34,500.00
RESILIENCY AND BEHAVIORAL EDUCATION IN ALL SECONDARY IN-SCHOOL SUSPENSION CLASSES TO PROVIDE APPROPRIATE SERVICES TO STUDENTS WHO MAY BE EXPERIENCING BEHAVIORAL HEALTH ISSUES UTILIZING CURRICULUM TARGETED TO THIS NEED (I.E., WHY TRY)	\$ 45,000.00
MENTAL HEALTH EDUCATIONAL VIDEOS TO INFORM YOUTH AND CHILDREN ON RECOGNIZING THE SIGNS AND SYMPTOMS OF MENTAL HEALTH AND CONNECTING THEM WITH APPROPRIATE RESOURCES.	\$ 100,000.00
TOTAL: OTHER EXPENDITURES	\$2,138,123.00
TOTAL: COMMUNITY CONTRACTED MENTAL HEALTH SERVICES	\$ 260,000.00
TOTAL: OTHER EXPENDITURES	\$2,138,123.00
GRAND TOTAL*	\$2,398,123.00

* includes use of the 2020-2021 allocation and roll over funds from the 2019-20 SY

Travel expenses are indicated in the budget to allow our Mental Health Clinicians to provide identified students with access to more mental health resources and support when they may not otherwise be able to seek out the necessary resources. This could be due to limitations related to transportation and/or medial insurance.

C. Expenditure Assurances

State how 100 percent of funds are used to expand school-based mental health care; train educators in responding to mental health issues; and connect children, youth, and families with appropriate behavioral health services.

The Mental Health Assistance Allocation does not supplant other funding sources, increase salaries or provide staff bonuses. The money allocated will be used to expand direct mental health and/or substance abuse services to our students, train educators in responding to mental health issues; connect children, youth, and families with appropriate behavioral health services, and provide for the coordination of such services with primary care and mental health providers. If additional funds exist after hiring the above mental health providers and contracting services with SMA Healthcare and Halifax Behavioral Services, Volusia County Schools will utilize the remaining funds to meet the mental health needs of our students as they arise.

Provide a statement that ensures the Mental Health Assistance Allocation does not supplant other funding sources, increase salaries, or provide staff bonuses.

This allocation will not supplant or provide funding to increase salaries or provide staff bonuses.

Describe how the district will maximize the use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments, and grants).

The Volusia County School District will continue to gain funding from Administrative Claiming and Medicaid reimbursement, when applicable. Medicaid reimbursement amounts should see an increase with the expansion of allowable, billable services and the expansion of students who will be eligible for billable services. VCS has applied for the SEDNET Administration grant to purchase evidence-based mental health interventions, supplies and materials.

D. Program Implementation and Programs

Identify the number and ratios of Florida Department of Education-certified or licensed school-based mental health services providers employed by the district (i.e., school psychologists, school social workers, school counselors and other mental health services providers by licensure type).

Title	Description	Number of Mental Health Providers	Provider to Student Ratio (60,876 students)	Nationally Recognized Student Ratio
School Social Workers	23 School Social Workers	23	1:2,647	NASW 1:250
School Psychologists	27 School Psychologists	27	1:2,255	NASP 1:1,000
School Counselors	148 School Counselors at all three levels.	148	1:411	ASCA 1:250
School Nurses	10 RN's 43 LPN's	84	1:725	NASN 1:750

	28 Clinic Assistants [CNAs] 3 CMA			
Mental Health	7 Mental Health Counselors 5 School Social Workers 2 School Psychologist 2 Substance Abuse Counselors 2 Care Coordinators 1 Counselor on Assignment 2 District Mental Health Specialists	21	1:2,899	IACS 1:1,000-1,500
Total		303	1:201	

Describe a system for tracking the number of students at high risk for mental health or co-occurring substance abuse disorders who received mental health screenings or assessments; the number of students referred to school-based mental health services providers; the number of students referred to community-based mental health services providers; the number of students who received school-based interventions, services or assistance; and the number of students who received community-based interventions, services or assistance.

Volusia County Schools will utilize the Social Emotional Wellness feature inside of Focus to track referrals, assessment data and outcome data, in addition to anecdotal notes. By using the Social Emotional Wellness feature, we will be able to accurately track and monitor student referrals and progress.

The Counselor on Assignment (Volusia County Schools will utilize) with the VCS Mental Health Teams answers phone calls from school-based Threat Assessment Teams when students are in crisis. The COA helps determine if a Mental Health Clinician should be dispatched to conduct an emergency screening, depending on the presenting concern. The COA receives the Mental Health Referrals that are submitted via the SSS feature in Focus by school-based staff and assigns the referrals to the Mental Health Clinicians for follow up. The COA also assists school-based staff on navigating the SSS feature in Focus and assists schools with trouble shooting issues within the SSS feature as possible. The COA receives and reviews Substantive Threat alerts and follows up with school-based Threat Assessment Teams when necessary regarding any items that are incomplete or require correction on forms in the SSS feature in Focus (i.e. Threat Assessment Form, Mental Health Referral, etc.), or regarding any incomplete procedures, based on VCS Threat Assessment and Response Procedures. The COA assists the VCS Mental Health Specialists as needed, with any tasks or mental health initiatives to help support our schools and students. The COA also works closely with two HBS Care Coordinators. The COA communicates the HBS discharge and follow up information shared by the HBS Care Coordinators with appropriate school-based staff in order to facilitate the re-entry meeting process upon students' return to school following a Baker Act. The COA also communicates routinely with HBS Care Coordinators to make them aware of students who are being transported to HBS for voluntary and involuntary screenings. The two HBS Care Coordinators will monitor the implementation of the individualized service delivery plan up to 6 weeks after identified services commence with Halifax Behavioral Health to ensure continuity of care. The COA receives Substance Use Referral alerts submitted through the SSS feature in Focus and assigns the referrals to two SMA Counselors for follow up. The COA logs all

Mental Health Clinician dispatches to assess students, Mental Health Referrals, and Substance Use Referrals. The COA creates data charts quarterly, or as needed, to help inform and guide decision-making to address student mental health needs, as well as any necessary changes to the VCS Mental Health Teams as mental health trends and needs change within the district's schools and geographic areas within the district.