

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

### Focus on delivering evidence-based mental health services through a multi-tiered system of supports

- Classroom teachers deliver evidence-based mental and substance abuse prevention curriculum as part of Tier 1 at least weekly. Lesson plans are provided in each program used and effectiveness is determined through analyzing discipline data. The following evidenced-based programs are used: *Positive Behavior Intervention Supports, Safer Smarter Schools, Second Step, Overcoming Obstacles, and Project Wisdom*. Teachers participate in standardized professional development which provides evidenced-based strategies for trauma informed care.
- All schools will implement two programs through Sandy Hook Promise, Say Something and Start With Hello. Every student will receive lessons in each program via a school based trainer and SAVE Promise Clubs will be formed at each school. The purpose of these programs is to teach students how to identify, intervene and get help for individuals before they hurt themselves or others, and to combat social isolation. This is an additional level of Tier 1 support. In addition to the district's screeners previously identified, these programs offer another layer of early identification of students at-risk for mental health and substance abuse disorders, but also suicidal ideation.
- All classroom teachers in grades K-12 have calm down boxes that are accessed by any student who needs a break or needs a physical tool to help maintain that student in the learning environment. Items contained in the calm down boxes are evidence based tools that support emotional regulation, attention, and problem solving skills. This is an additional level of Tier 1 support.
- All teachers in grades K-3 have three book sets by Julia Cook that support socialemotional-behavioral development. They have the mental health set, executive functioning set, and behavior set for a total of 16 books. This is an additional level of Tier 1 support that can also be delivered in small groups or individually as an extra layer at the Tier 2 and Tier 3 levels.
- School Counselors deliver standard, evidence-based treatment protocols of small group counseling or Check-in Check-out for support of targeted students at the Tier 2 level. Support at this level occurs at least weekly and may be as often as daily. These services are documented through school counselor schedules with data collected in the form of likert scales, data chat logs, and reductions in office discipline referrals. This data is analyzed to assess intervention effectiveness and necessary next steps.
- School Counselors, School Social Workers, and School Psychologists deliver evidencebased interventions and services based on individual needs. These services occur oneon-one at the Tier 3 level and often incorporate cognitive behavioral strategies. In addition, the following evidence based programs are used: *Zones of Regulation, Why Try, Strong Kids* and *Mind Up*. These services are documented in detailed Functional



Behavior Assessments which include a Behavioral Intervention Plan specifically tailored to each individual student's need. These plans are written

holistically to include a school, home and community agency component. Data is collected in the form of likert scales, time-based interval recordings with peer comparisons, reports of frequency and duration, scatter plots, and office discipline reports. These services also include development of student behavioral contracts, consultative services with teachers focused on communication and restorative practices, and referrals to outside agencies.

- Head Start is funding additional calm down boxes and Julia Cook book sets to support early intervention efforts for pre-kindergarten students. Head Start is also hiring a school social worker specifically to work with pre-kindergarten students and families atrisk for, or already impacted by, mental health, behavioral and/or substance abuse disorders.
- Multiple professional development offerings will be available for staff on the topics of warning signs and evidence-based classroom strategies to support students impacted by trauma and/or chronic stress.
- All district staff are in the process of receiving training in Mental Health First Aid.

# Supports that addresses mental health needs assessment, diagnosis, intervention, treatment, and recovery

Multiple data points are used to identify students with potential mental health needs. A behavioral referral checklist is used to screen students across all schools. The Student Risk Screening Scale: Internalizing/Externalizing (SSRS-IE) is piloted at three schools in the district with expansion into more schools for the 2019-2020 school year. Problem-behavior questionnaires, parent-teacher-student motivation interviews, and motivational assessment scales are also used. Outside agencies provide screening assessments for some intensive students. Diagnosis is reached through a collaborative effort of school-based and external community specialists. This may include outside mental health and family support personnel. Treatment includes services provided on an individual level and involve multi-agency entities through authorized releases of information. Recovery includes transitional plans from Tier 3 to Tier 2 with consultation and data monitoring between tiers.

# Evidence-based mental health services for students with one or more co-occuring mental health or substance abuse diagnosis ad students at risk of diagnosis.

• Mental Health Services and interventions are delivered at least weekly for students at Tier 2 and daily for our most intensive students at Tier 3. These evidenced-based interventions are described in the first section and include coordination with outside agencies. Project Success counselors are in our schools via a partnership with the Guidance Care Center, our local community mental health agency, and their sole purpose is to support students who are at-risk of or already engaged in illegal substance use.



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

• Two additional school social workers were hired last school year to expand school social work services across the district. This reduced the student to staff ratios of already

employed school counselors and school psychologists allowing for more students with mental health needs to be served.

Title and Number of Positions		Credentials
School Psychologists	6	Master's plus Specialist Degree
Behavioral Specialist	.5	Master's Degree
Behavioral Specialist	1	Master's plus BCaBA
School Counselors	20	Master's Degree
School Social Workers	4	Master's Degree
Total	29.5	Master's Degree Plus

• The district employs the following mental health service providers:

Identifies number and credentials of mental health services providers contracted by the district.

Title and Number of Positions	Credentials
Behavior Analyst and Consultant for ESE (1) **This position is funded with ESE Federal Funds, not via the Mental Health allocation	Ph.D.

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

- In collaboration with the Guidance Care Center (GCC), the local community mental health agency, GCC counselors are in every school in the district. GCC counselors are then able to address the day to day mental health needs of students on their caseloads, allowing student services personnel more time to support their caseloads of students.
- Administrators limit the amount of extra duties not associated with mental health services (lunch duty, bus duty, testing coordination, etc) for student services personnel to be able to spend more direct face to face time with students who need mental health services.

# Contracts or interagency agreements with local behavioral health providers to provide behavioral health services on or off school campus

• The Monroe County School District maintains valuable partnerships with Community Providers and agencies. These include: Keybridge Counseling, the Guidance Care Center,



Wesley House Family Services, the Domestic Abuse Shelter, Children in Need of Services/Families in Need of Services, Department of Juvenile Justice, Monroe County Sheriff's Department, Key West Police Department, Florida Keys Outreach Coalition, Rural Health Network, private therapists/psychologists/psychiatrists, local pediatricians/physicians, Samuel's House/Christina's Courage, Center for Autism and Related Disabilities, Florida Diagnostic Learning and Resources System, Sednet,

University of South Florida's Positive Behavioral Support and Multi-tiered Systems of Supports projects, and Pinnacle Group. Collaboration includes information and resource sharing, coordinated treatment planning and delivery, and consultative services.

- As described above, outside agencies provide screening assessments for some intensive students. Diagnosis is reached through a collaborative effort of school-based and external community specialists. Treatment includes services provided on an individual level and involve multi-agency entities through authorized releases of information. Recovery includes transitional plans from Tier 3 to Tier 2 with the use of consultation and data monitoring between tiers.
- The district has contracts and interagency agreements with the Guidance Care Center, the local community mental health agency. The agreements stipulate on-site mental health counselors to provide support in the school setting. The agency also provides psychiatric and/or case management support to the student/family as needed.
- Schools are able to access their Mobile Response Team (MRT) for crisis intervention and support and refer the most at-risk multi-agency involved students to their Community Action Team (CAT) for complete wrap around support.

Policies and procedures that ensure all schools, including charter schools, to ensure students referred for mental health screening are assessed within 15 days of referral, school-based mental health services are initiated within 15 days of identification and assessment, and community-based mental health services for students are initiated within 30 days of referral

- A referral form and process for behavioral and/or mental health concerns is embedded in the district's MTSS process. Student services personnel review referrals for Tier 2 and/or Tier 3 support within three days of receipt of referral and a plan of action for assessment is developed with the MTSS coordinator for that specific school. That plan of action involves assessment in the form of direct observation, parent and teacher interviews, student record review, review of completed universal screeners for behavior, and/or interviews with outside services providers.
- Services are initiated via a Problem Solving Team meeting that takes place within 15 days of referral. If parents are unable to attend and to provide written permission for Tier 3 services than Tier 2 services are initiated until parental permission for additional support is received.
- Community-based mental health services are staffed within seven days of receipt of referral with an in-take usually haven taken place within that same timeline.

# Process for Coordinating Mental Health Services with a student's primary care provider and other mental health providers, including procedures for information sharing



 Services are provided on an individual level and involve multi-agency entities through authorized releases of information. This form clearly articulates the nature of information to be shared including exchange of information related to mental health treatment plans, diagnoses, medication, treatment progress notes, grades, Office Discipline Referrals, Individual Educational Plans and other information deemed to be educationally relevant. All information is shared on a need-to-know basis and used for the purposes of coordination and consistency of care between agencies.

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

- Strategies include procedures in place for identification and referral of students at-risk for social-emotional-behavior problems, calm down boxes in every classroom to support executive functioning and emotional regulation, purchase of additional social-emotional learning curriculum for all preK-3 teachers and student services personnel, and on-going professional development on topics specific to mental health, behavior, social development, and trauma/chronic stress.
- Programs throughout the district include Second Step, Project Wisdom, Overcoming Obstacles, Zones of Regulation, Why Try, Smart Start, and Mind-Up.
- A referral process is in place for students suspected of or identified with mental health disorder, suicidal ideation and/or substance abuse. Referrals are made to community-based counselors working in the school setting or to specialized teams within the community based mental health agency for which we coordinate services (mobile response team, community action team, crisis intervention).

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

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

# Identifies strategies to improve early identification of social, emotional or behavioral problems or substance abuse disorders; improve provision of early intervention services; and assist students dealing with trauma and violence

This is addressed in the first section of this plan titled "Focus on delivering evidence-based mental health services through a multi-tiered system of supports."

#### Expenditures

See "Mental Health Assistance Allocation Plan Outcome and Expenditure Report Checklist"

#### **Expenditure Assurances**

• One hundred percent of state funds are used to expand school-based mental health care; train educators and other school staff in detecting and responding to mental



health issues; and connect children, youth and families with appropriate behavioral health services

- Mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses.
- The district employs a Medicaid specialist as a means to gain funding for school-based mental health services by billing Medicaid for services administered through all qualifying staff.

#### **Program Implementation and Outcomes**

- Number and ratios of FDOE certified or licenced school-based mental health services providers employed by the district
  - School Social Workers: 4 with an average 1:1297 school social worker to student ratio
  - School Counselors: 19 with an average 1:395 school counselor to student ratio
  - School Psychologists: 6 with an average 1:1500 school psychologist to student ratio
- All school-based mental health services providers maintain an on-going log of students screened, referred, and serviced for mental/behavioral health needs; the district coordinates with the Guidance Care Center and other outside agencies to obtain number of students who receive community based interventions/support.