

Mental Health Assistance Allocation Plan (s.1011.62(16)(a) and (b), F.S.)

The District through its Single School Culture initiatives has been a leader in the state in establishing student assistance teams and utilizing them as part of the Multi-Tiered Systems of Support. From those teams created in the 1980's, agreements were forged with local community agencies to provide on campus assistance for drug and alcohol abuse, alternative- to- suspension opportunities and grief counseling. These teams and relationships led to a successful Safe Schools/Health Student Grant funded by the US Departments of Education, Justice and Health and Human Services. School Based Teams were formed and in 2003 were mandated for all district schools. Over the last 15 years School Based Teams (SBT) have evolved into a strong state model for problem-solving and intervention design in assisting students, families, and teachers. School Based Team continues to be the single point of access for identifying, assisting, and referring students with academic, behavioral, social, and emotional concerns. The teams are the mechanism for student assessment and they form the foundation of the tiered levels of Response to Intervention required by legislation to ensure equitable and effective interventions for all students.

Over the past five years, several advocacy groups and events have determined mental/behavioral health needs and gaps and have made related recommendations for Palm Beach County. The components of the School District of Palm Beach County's (SDPBC) Mental Health Assistance Allocation Plan align with and/or are inclusive of recommendations made by the Southeast Florida Behavioral Health Network; the School Health Advisory Council; #OK2TALK; Action Alliance; The Palm Beach County Youth Master Plan; and, Becoming a Trauma Sensitive Community Action Team. The Birth to 22 Collective Impact Initiative, an alliance of community partners that engages other existing coalitions, networks and youth serving organizations the Plan's development as well as reviewed the plan directly and provided feedback and recommendations. Finally, a School Board Workshop was conducted on June 6,

2018 to solicit input.

Part I: Collaborative partnerships with community providers and agencies.

1. Describe procedures for referring students to school based mental health intervention, community based mental health providers for treatment, to include substance abuse treatment.

Referral for school based mental health intervention or community based mental health providers is initiated with an Initial Referral Form for one of two operational Problem Solving Teams we have on our campuses. School Based Team (SBT) can convene for any student on the school campus. For students who are eligible for and receive services in Exceptional Student Education, the referral must be sent to the Child Study Team (CST). Currently, school center staff members (i.e. administrators, teachers, school counselors, school psychologists etc.) complete the Referral Form although parents and other stakeholders can also make a referral. All school center staff including bus drivers, paraprofessionals, food services workers, afterschool paraprofessionals, custodial and other support staff will receive training in the referral process for the 2019 School Year. As a result, these staff will also be given the opportunity to refer students to School Based Team (SBT) or Child Study Team (CST), if they suspect a student is in need, by alerting a designated contact at the school who will complete the Initial Referral Form on their behalf, thus, initiating a problem solving team meeting. This ensures that all adults who come in contact with students are able to refer students who they have observed as possibly needing mental/behavioral health intervention. In addition, early warning indicators serve as an alert system for students who may be in need of services. Students who exhibit early warning signs are automatically referred to the problem solving team. This acts as an additional identification system in the event a student in need is not identified and referred by school-based personnel.

The problem solving team Lead at the school receives and reviews each referral. The Lead then schedules a meeting of the problem solving team to discuss the concerns outlined in the Referral Form. If the problem solving team determines that immediate intervention is necessary, depending on the severity of the situation, the following may occur: (1) the school's Crisis Response Team, including School Counselors and School Psychologists, will intervene; (2) the newly formed Mental Health Support Team will be dispatched to the school to provide additional direct support or, (3) the county's Mobile Crisis Unit will be contacted to provide emergency intervention, de-escalation, screening and/or assessment.

SBT and CST are comprised of a multidisciplinary groups of professionals who meet regularly to develop plans of action for students who may be in need of additional services/interventions, beyond core supports. During the 2019 School Year, standard qualifications will be established for the SBT Lead and CST Lead to ensure consistency at the school level. These problem solving teams bring together several professionals from additional disciplines to determine what works for students. Team membership is often fluid and depends on each individual case. Regular members of the SBT include, but are not limited to: school administrators; SBT leaders; classroom teachers; school counselors; school psychologists; Exceptional Student Education staff; speech and language pathologists; 504 designees; Multicultural staff; community agency representatives; and, parents.

The team's primary responsibility is to address the academic, behavioral, and social-emotional barriers to an individual students learning. Key functions of the problem solving team include: using a formal problem solving process; analyzing student referral and baseline data; identifying student strengths and areas in need of improvement; developing intervention plans, including expected outcomes; monitoring student progress toward expected goals; collaborating with

community agencies when necessary (Behavioral Health Agreements); and, communicating regularly with parents about their child's progress.

If through the problem solving process, it is determined that school based mental health interventions or community based interventions are necessary, the team completes the Initial Mental Health Referral and documents in the Student Information System. The initial referral will document the reason for referral and all suggested and implemented school based interventions. If it is recommended that the referral be sent to a community agency they will document the intervention.

Part II: Coordinating mental health services with a student's primary care provider and other mental health providers, including procedures for information sharing.

2. Describe a process to coordinate mental health services with a student's primary care provider or other mental health providers (data sharing).

School board approved Behavioral Health Agreement providers are required to share information with primary care providers if authorization has been given by parents/guardians. This process will be documented in the Student Information System. All school based interventions are documented and school-based mental health professional (new position) will provide information to the primary care physician. District data sharing agreements allow for community agencies and the school district to share data regarding all mental health referrals. An adolescent collaboration team has been created to share information among the school district, school police, the sheriff's office behavioral unit and mental health facilities. This collaboration allows all parties to be informed to assist with the appropriate treatment and follow-up for students.

Part III: Delivering evidence-based mental health services.***3. Describe awareness/prevention efforts that address mental health or substance abuse issues.***

The District currently has the following awareness/prevention efforts in place that address mental health issues:

Awareness Efforts

Youth Mental Health First Aid: Project AWARE provides training in Youth Mental Health First Aid (YMHFA) to teachers and other School District personnel, parents and caregivers, law enforcement, faith-based leaders, community agency staff, and policy makers. Individuals are trained to become “First Aiders” by completing YMHFA courses facilitated by a cadre of trained instructors that include District, non-profit, and government personnel. The project is a partnership between the District and local behavioral health and advocacy groups.

Student Mental Health and Wellness Conference: Each year, the District hosts a Mental Health and Wellness conference in collaboration with community agencies and partners. The annual conference is a free, full-day professional development event aimed at providing attendees with valuable information on social/emotional learning, mental health and wellness, aligning behavioral and social/emotional services to meet the needs of students, and District and community resources. Past keynote messages have included a focus on mental health awareness through film and art by youth and discussing the impact trauma exposure has on students. District employees and community members are invited to attend the conference.

Ongoing professional development: Professional development includes training on topics including, but not limited to, crisis prevention and de-escalation, suicide prevention, non-suicidal self-injury, common mental health concerns in school-aged children, adverse childhood experiences, resilience, early warning indicators, and community agency referrals.

PREPaRE 1 and 2: School psychologists as well as other District staff have completed the PREPaRE 1 training module. The first module addresses crisis prevention and preparedness through a comprehensive school safety plan developed for school mental health providers, administrators, security professionals, educators, and other school staff. The majority of School Psychologists have completed the PREPaRE 1 and 2 training modules (nine School Psychologists are certified to trainer status). The second module, PREPaRE 2, is a more extensive training program designed for school-based mental health professionals and other crisis intervention team members in order to provide physical and psychological safety to all students and staff, psychological triage, trauma and risk assessment, stabilization, and referral as needed. The PREPaRE curriculum has been developed by the National Association of School Psychologists (NASP) as part of NASP's decade-long leadership in providing evidence-based resources and consultation related to school crisis prevention and response. PREPaRE training helps schools improve and strengthen their school safety, crisis management plans, and emergency response.

Prevention Efforts

Social and Emotional Learning (SEL) Programs Advisory Council Approved Program Matrix: The mission of the SEL Programs Advisory Council is to systematically and objectively review proposed programs, presentations, and practices that support student social and emotional development and approve those that meet the Council's criteria. A matrix of approved mental health awareness and prevention programs (e.g. Adolescent Depression Awareness Program, Sandy Hook Promise, Breaking the Silence, Erika's Lighthouse, NAMI, PBSAC) is made available to all schools with the use of the programs at the discretion of the school principal. Matrix of approved programs is found in Appendix A.

Comprehensive school counseling programs: It is the mission of School Counselors to foster academic achievement, college and career readiness, and social/emotional development for all students through direct counseling services and collaboration with teachers, administrators, parents and community. The programs are evidence-based and data driven. They are designed to use Early Warning indicators to develop core (universal, prevention), supplemental (responsive to social emotional/mental health needs of students, small group), and intensive (responsive to the social emotional/mental health/crisis oriented needs of students through brief individual counseling) ongoing supports for students.

Alternative-to-Suspension Program, ATOD (Alcohol, Tobacco, and Other Drugs: ATOD provides two options for middle and high school students suspended for alcohol, tobacco, or other drugs in lieu of the traditional out-of-school suspension format.

Palm Beach County Substance Awareness Coalition: The District has a long standing collaborative relationship with the Coalition to implement various prevention programs. The Coalition coordinates activities, provides information, and organizes public awareness campaigns to steer youths and adults away from harmful substances.

Agencies with Behavioral Health Agreements: The District has Behavioral Health Agreements with 31 agencies that comprehensively provide a variety of mental health and/or counseling services for children and their families in schools. The matrix of agencies is found in Appendix B. These agencies currently cover mental health and substance abuse treatment utilizing evidence based practices which could include: Wraparound, Trauma Informed Care, and Cognitive Behavioral Therapy.

The Department of Safe Schools also supervises the district wide implementation of a number of prevention initiatives: Positive Behavior Support, Bullying prevention programs, Safe

School Ambassadors, and Restorative Justice.

Part IV: Supports that address mental health needs (assessment, diagnosis, intervention, treatment and recovery).

4A. Describe the mental health screening and assessment procedures for determining which students need mental health intervention and treatment.

The problem solving team is responsible for screening referred students through the use of a problem solving framework. As an initial step in the framework, the problem solving team defines the problem and develops an assessment plan to target the identified problem. The plan identifies methods for measuring the specific behavior, social/emotional concern, or skill deficit identified as the concern. Early Warning indicators are used as a tool to indicate areas of concern that require attention and possible intervention. The Early Warning System is a comprehensive system that includes multiple sources of student information and includes multiple data points to provide a more comprehensive understanding of student's performance in different areas of functioning.

The problem solving team may identify the need for school-based intervention to take place. These interventions include progress monitoring of small group and/or individual behavioral/counseling services from a variety of school-based mental health providers to include but not limited to, school counselors, school psychologists, family counselors, school-based mental health professionals (new position).

Ultimately, if a student is referred to community-based intervention services, they are then assessed by community agency trained providers. Assessments utilized by the provider identified in the Mental Health Agreement are considered best practice tools in the field of behavioral/mental health to determine diagnosis and needs and monitor progress in services. Assessment information is used to: develop treatment plans in conjunction with the child and

family; determine if additional referrals for other services are necessary; and, indicate when goals have been met through standardized measurement of outcomes, guiding the discharge planning process.

4B. Describe the procedures for coordination and support for students who receive intensive community mental health services.

The Mental Health Assistance Allocation Plan management team, including a Manager and Specialist are responsible for coordination and monitoring student mental health referrals, in coordination with problem solving team Leads. Through data sharing agreements, school based agencies receiving referrals will update the Student Information System. Access will be limited to the fields that are appropriate to the mental health referral. These will include fields for date referral was received, date parent consented to service, date of student assessment, intervention start and end date, and treatment plan. As the point of contact for the community agency providers, the management team ensures referred students are accessing services and help to remove any barriers that may hinder treatment.

The problem solving team Leads also schedule follow up meetings to review student progress or additional supports/interventions that may be needed. The Mental Health Assistance Allocation Plan management team, will also provide support for students who received intensive community mental health services, by collaborating alongside The Multiagency Network for Students with and at-risk of Emotional Behavioral Disabilities (SEDNET), school psychologists, and other mental health specialized staff within the Exceptional Student Education Department.

Part V: Evidence based mental health services for students with one or more occurring mental health or substance abuse diagnosis and students at risk of such diagnosis.

5A. Describe process for identifying and delivering evidence based mental health and substance abuse interventions.

All current Behavioral Health Agreement providers are required to provide descriptions of the evidence-based practices that they will provide prior to the approval of their agreements. Those that choose to bid to provide additional services through the Mental Health Allocation Plan will be required to describe, in detail, their evidence-based practices which will be included as one of the scored rubric items for bid review.

The School District of Palm Beach County has specific guidelines established for the review of supplemental resources utilized in the District. Administrative Directive 5.131 - Health Education Programs and Services: Screening of Community Resources clearly indicates that all prevention materials should be reviewed by an Advisory Council to ensure that they are evidence based. The District currently has in place a Social and Emotional Learning (SEL) Programs Advisory Council for this purpose.

The mission of the SEL Programs Advisory Council is to systematically and objectively review proposed programs, presentations, and practices. The Council meets quarterly to review initiatives related to SEL, personal safety, substance use, mental health, and violence prevention. The Council is committed to valuable contributions from all stakeholders; strong relationships between District staff, community representatives, and parents; meaningful collaboration and consultation; and careful proposal reviews.

As a reviewer of programs, practices, and presentations for school and student use, the Council works with program developers or sponsors to determine if the proposed program, presentation, or practice satisfactorily answers three questions: (1) Does it work; (2) Is it ready

for replication; and, (3) Does it fit? The Council requires evidence of effectiveness, readiness for replication, and fit and the developer or sponsor is responsible for providing this information. This information is necessary to determine whether or not program, practice, or presentation is appropriate for use in the District.

A six factor rubric is used to assess new programs, practices, or presentations. Each factor is scored on a scale of 5 (High) to 1 (Low). Rubric scores, along with content area expert input, guide the Council's decision to approve or not approve a program, presentation, or practice. Programs that have a cost will be referred to the Purchasing Department for Vendor Information. Programs that involve the establishment of an ongoing therapeutic relationship will be referred to the Behavioral Health Agreement process. Schools can then choose to implement these vetted and listed mental health awareness and prevention programs. The list of approved programs is made available to all schools with the use of the programs at the discretion of the school principal, in consultation with the problem solving process.

5B. Describe how services will be delivered within a multi-tiered system of supports (universal/prevention, targeted, and intensive).

The District currently provides services through a multi-tiered system of supports. Tier 1 includes core/universal prevention. All students referred to the problem solving team(s) have already received core instructional services. Based on the problem solving team recommendations, students are referred for supplemental or intensive services. Supplemental interventions include targeted supports such as small group sessions, skills training, and/or social emotional interventions. Intensive interventions include services that are offered on an individual basis, and may include a comprehensive individualized behavior intervention plan. Currently, individual intensive services are provided by the mental health professionals on the school campus and the agencies that have School Board approved Behavioral Health Agreements.

Through the Mental Health Assistance allocation, the SDPBC will expand supplemental and intensive interventions through a bid that will be open to the current Behavioral Health Agreement providers as well as other community providers. Community agencies who currently do not have a Behavioral Health Agreement with the School District are eligible to bid on providing school based mental health services as outlined in this plan. If said agency is approved through the bid process, then this provider must complete and be eligible for a behavioral health agreement with the School District. The bid will solicit agencies to be co-located at some of the District's highest need schools. The schools will be determined through an analysis of student data and an asset inventory. Appropriate placement will ensure that these intensive services are filling current service gaps. These agencies will provide direct services and/or serve as case managers. Wraparound, an evidence-based, holistic approach to address the needs of the youth and families can be utilized by the community agencies in the network.

In addition, two Crisis Response Teams will be created with the allocation. The teams will be comprised of credentialed and skilled staff that are both flexible and proactive in responding to students that demonstrate significant persistent or acute disruption on a school campus. Their role is to observe, assess, intervene and plan for individual students with significant behaviors or signs of social/emotional and/or mental health concerns. Purposes include gathering further information and developing an action plan inclusive of strategies for future prevention and intervention. When recommended by staff, students are referred for appropriate levels of supplemental or intensive intervention. These services may include a range of interventions, such as: check-in check-out, counseling services, and referral to a Behavioral Health Agreement agency for more intensive services. Following the support from Crisis Teams, students will remain on the caseload of the Support Team for monitoring of interventions. This monitoring will continue until school and community supports are aligned with the student's

needs and identified desired outcomes are evident.

Part VI: Program Implementation and Outcomes (s. 1011.62 (16)(d), F.S.)

6A. Describe how you will document how many students are referred for services and how many students receive school based and community services.

The Mental Health Assistance Allocation Plan management team are responsible for monitoring student mental health referrals, in coordination with problem solving team Leads. The SIS will warehouse all referral, treatment, and treatment exit data to document how many students are referred, assessed, and receive services, as well as the type of service and their exit rates.

6B. Describe other outcome data that will be used to evaluate effectiveness of services (e.g. Early Warning Systems indicators, YRSBS data, school climate and student engagement data).

Multiple sources of data will be used to evaluate the effectiveness of services provided, including the Early Warning System indicators, targeted progress monitoring data of interventions through the problem solving team, school climate and YRSBS survey results. If the problem solving team determines the need, formalized assessment tools may be utilized for individual students. The Behavioral Health Agreement agency will analyze and evaluate the effectiveness of the intervention or treatment, and link the results to the Early Warning System indicators.

6C. Identify number and credentials of mental health service providers employed by the district.

Title	Number	Minimum Qualifications
Elementary School Counselors	105	Master's degree with a graduate major in guidance and counseling or counselor education which includes three (3) semester hours in a supervised counseling practicum in an elementary or secondary school; OR Master's degree with thirty (30) semester hours of graduate credit in guidance and counseling, to include the areas specified in Administrative Rule 6A.4.0181.
Middle School Counselors	75	
High School Counselors	123	
ESOL Certified School Counselor	78	Master's degree
School Psychologists	91 (K-12 school-based) 10 (Child-Find)	Master's degree; Certification: FLDOE School Psychologist
Family Counselor	21	Bachelor's degree in Counseling, Guidance, Social Work, Psychology, or Marriage and Family Therapy. (Master's degree or License-eligibility preferred)
School Nurses	232 RN's and 26 LPN's	
Social Service Facilitator	5	Bachelor's degree in social work or related area.

6D. Identify number and credentials of mental health service providers contracted by the district.

The District currently has Behavioral Health Agreements with 31 community agencies. These agencies all have a managing entity. In order to be School Board approved agencies must provide: two references related to client's increased school performance; earned accreditation through a recognized accrediting institution; existing procedure(s) for clinical supervision; ability to serve students in underserved areas as defined by the District; evidence-based practices in which services are driven by outcome data and ongoing progress monitoring; and, insurance coverage meeting district requirements.

Staff Credential	Number of staff
Bachelors (Prevention)	9
CAP	2
Case Manager (Bachelors)	12
Doctoral Psychology Interns	4
Doctoral Psychology Practicum Interns	8
Licensed Marriage and Family Therapist	7
Licensed Mental Health Counselor	70
Licensed Psychologist	4
Licensed Social Worker	39
Marriage and Family Therapist	6
Masters in Counseling	19
Masters in Counseling Practicum	12
Masters in Human Services Interns	2
Masters in Social Work Practicum	2
Masters Mental Health Counseling	15
MCAP	1
Mental Health Counselor	21
Mobile Crisis Team Specialist	1
MSW (not licensed)	130
PhD	1
Post Masters Resident	2
Prevention Coordinator	3
Prevention Specialist	3
Psychiatrist	7
Registered Mental Health Counselor Intern	18
Targeted Case Manager	10

Part VII: Expenditures (s. 1011.62 (16), F.S.)***7A. Document 90 percent of expenditures allocated to direct mental health services or coordination of such services with primary care and mental health providers.***

The mental health allocation for the District is a total of \$3,861,000. Ninety percent of this allocation is equal to \$3,474,900. As demonstrated in the attached budget, \$1,156,247 is allocated to salaries of the new Crisis Response Teams. For budgetary purposes the average salary and benefits was used to estimate cost. The remainder of this portion of the budget equal to \$2,318,653 will be allocated and utilized for direct mental health services and the coordination of such services with primary care and mental health providers.

Additional personnel positions are necessary to ensure programmatic and fiscal oversight as well plan implementation fidelity. The remaining dollars, \$386,100 or 10 percent of the allocation, will be used to fund a team of three which will include administrative positions (Manager, Specialist) as well as a Budget Analyst to ensure billing is accurate. Remaining dollars from this part of the allocation will allow for professional development and related activities.

7B. Includes assurances that MHA does not supplant other funding sources OR increase salaries or provide staff bonuses.

The services funded through the Mental Health Allocation will not supplant any other funding and is being used solely to provide supplemental services that are in addition to what is already being provided. Further, the budget does not provide any current personnel with an increase in salaries or a bonus.

7C. Describe how district will maximize use of other sources of funding to provide school based mental health services, where appropriate (e.g. Medicaid reimbursement, 3rd party payment grants).

All agencies who are awarded a bid for services will be required to execute records in such a manner to be acceptable to Medicaid for eligible students. They must bill Medicaid and/or other available funding sources as the first payor for evaluation and services for eligible students. In order to allow the District to monitor the frequency of agencies billing Medicaid, or other available funding sources, monthly invoices the agencies provide for services will be required to contain a breakdown of hours billed to Medicaid and hours billed to the District.

APPENDIX A: Matrix of Programs Approved By Social Emotional Advisory Council

SOCIAL AND EMOTIONAL LEARNING		
Agency/Project Name	Grade Levels/Cost	Description
Angling for a Healthy Future (FL Fishing Academy)	K-12 No cost	The Florida Fishing Academy (FFA) is a nonprofit, 501(c)(3) organization formed in 2006 for the purpose of empowering at-risk youth with positive life skills, alternatives to destructive or antisocial behavior, and a sense of responsibility for shaping the world around them. FFA uses fishing as a vehicle for delivering these lessons, weaving effective life, environmental and social skills into a youth-oriented, hands-on sports angling curriculum.
Anti-Virus Middle School Character Education	7th grade Health Costs for the workbooks	The Character Education Program will be taught in one class period a week which focuses on developing positive life character skills. The program utilizes seven character principles which team students how to become a positive citizen.
Association for Community Counseling: Children Using Sand Trays	K-5 No cost	(ONLY Freedom Shores EI.) Sandtray therapy is an intervention to allow the processing of life experiences. A safe environment is provided is that is both “free and protected” where imagination is encouraged, behavior is rehearsed and obstacles are identified and resolved. Children with behavioral issues learn to improve behavior and communication skills. Expressive therapies are used in which work is done on a symbolic, non-verbal level in tune with the child’s emotional state. Emotional, Behavioral and Disabled students are guided through a therapeutic process that aims at self- awareness, growth and development, leading to better adjustment in the classroom.
Luke’s Story	K-5 Cost	Through humane education, Luke’s Story fosters compassion and kindness through animal care.
Lizzie Sider Bully Prevention Program: Nobody has the power to ruin your day	K-8 No cost	Lizzie Sider continues with her National Bully Prevention Campaign, including conducting her Bully Prevention Assembly at elementary and middle schools across the country. Lizzie has performed this assembly at more than 350 schools throughout the country in front of more than 150,000 students, including more than 100 schools in Florida. Also, now available, is Lizzie’s 35 minute bully prevention video, professionally produced, that closely tracks the content of her live assembly. During this 30-40 minute assembly, Lizzie talks about her own story of being teased and ridiculed in elementary school, what it felt like, and how she tried to deal with it. She will talk about the importance of everyone standing up to stop bullying and what it is like to be a teenager and pursuing a professional music career, to be on TV and radio, and to be interviewed for newspapers and magazines. Lizzie will sing some songs, including her debut single, “Butterfly,” which has over one million views on YouTube. She will also provide discussion questions about bullying to teachers to follow up in the classrooms.
Mothers Against Drunk Driving (MADD) Power of Parents Power of Youth	9-12	The Power of Parents program provides opportunities for parents to learn communication skills, tips on effects of alcohol and brain development, how to reach to tough questions. It is an underage drinking prevention initiative. The Power of Youth program is designed to empower teens to take a stand regarding underage drinking and riding in a car with someone who has been drinking. It is an underage drinking prevention initiative.
Mentoring thru Life Experiences	6-12 Cost	The focus of this project works with students on how to map out their future careers. Mr. Ornstein provides an opportunity for students to learn from his past experience as an executive.

Principle Life Youth Development/ Mindset of a teen	6-12 School Cost	<u>The Mindset of a Teen</u> is a hopeful energetic book that every teen will just want to continue to read and read. As students and teens read the <u>Mindset of a Teen</u> , they will realize the value and importance of having a worthy foundation of Moral Character development, which will lead to making better life choices in order to have a rich and fulfilled life. Through group, collaboration with peers, and the teacher teens will better understand dysfunctional situations that impede good sound decisions making about life issues. <u>The Mindset of a Teen Curriculum</u> is also infused with the Common Core Standards in Reading, Language Arts, and Writing. Students learn how to create a comparative analysis and synthesize information to make better life choices that will lead them to success.
Reframe (Urban Youth Impact)	9-12	Reframe is designed to empower students, ages 15-22 with the opportunity to acquire the life and job skills that are necessary for career success. In addition, Reframe assists students in post-secondary planning and provides them with job and internship opportunities.
Sanford Harmony	Pre-K- 6 No Cost	The program teaches kids how to build healthy relationships through the use of books, games, activities, and meetings. The goal is to provide professional development and resources to support schools that encourage diversity, inclusion, empathy, critical thinking, problem solving, communication, and peer relationships.
The Little Blue Dog	K-12 No cost for Title 1 schools	The Little Blue Dog provides hands on humane education programs for students. The author uses her children’s books, partnership with local shelters, and certified therapy dogs to teach topics related to animal kindness.
The Talking Jar Series Inc.	K-12 No cost	Muffins for Mom and Donuts for Dad, How to talk about different topics with Parents, Teachers and Students. Conversation includes how to communicate safely and playing Talking Jars. Munchies for Mom’s and Desserts for Dad’s focuses on how to communicate within the family in a positive environment that builds self-confidence and character.
Traits the Book	6-8, 9-12 Cost	Traits the Book and accompanying teacher guide are a training tools for individuals to assess their character traits. Comments: Traits is approved as a supplemental resource in grades 6-12 with the following requirements: The book and teacher guide may be used only after school administration has approved it for use.
Centervention Personalized Learning Games	K-5 Free pilot up to 25 students	Evidence based online game to assess and improve social and emotional skills using six assessment scenarios and 30 skill building scenarios. Counselors receive reports which can be used for individual or group sessions.
Save the Music Save Me	6-10 No cost	A theatrical production which focuses on the gift inside each student which is greater than the negativity surrounding them.
Student Success Skills Ready to Learn (K-1) Ready for Success (2- 3) Student Success Skills (4-12)	K-12 \$75-150	Student Success Skills is a K-12 evidence-based model that helps students develop key cognitive, social and self-management skills. The SSS K-12 programs have 20 outcome research studies published in leading professional journals and several others currently underway. SSS is one of nine programs taking top honors in CASEL's Guide to Effective Social and Emotional Programs-Middle and High School Edition (http://www.casel.org/middle-and-high-school-edition-casel-guide). SSS and RTL are also in the SElect category for CASEL’s Elementary Guide to Effective Social and Emotional Programs. SSS is an evidenced-based intervention which has been featured in the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-based Programs and Practices (http://nrepp.samhsa.gov/01_landing.aspx). SSS has also been highlighted by the American School Counselor Association (ASCA) as an empirically supported program that supports the value of school counseling

		(https://www.schoolcounselor.org/asca/media/asca/Careers-Roles/Effectiveness).
PERSONAL SAFETY (PS)		
Hope for Freedom	6-12 Girls No cost	Hope for Freedom offers a one hour safety/awareness presentation for girls in middle/high school on domestic minor sex trafficking. The program is interactive and includes a PowerPoint presentation with the definitions and safety warnings, along with two educational videos; “Amy’s Choice produced by the national Center for Missing and Exploited Children (NCMEC) and “Chosen” produced by Shared Hope international. Participants will receive a copy of the Real-World Safety pledge and a bookmarker.
Human Trafficking: An In-Depth Guide for Middle and High School Students	6-12 No cost	In collaboration with POAST (Partner Organizations Against Sex Trafficking), this is a 45-minute in-class presentation that can be extended to accommodate block scheduling. It is suitable for students, parents, teachers, and staff. It will increase awareness about the dangers of sex and labor trafficking, focusing on trafficker profiles, grooming methods (including internet recruitment), indicators of trafficking victims, and information on how to report any suspected trafficking activity. It includes an interactive class discussion of healthy coping strategies to address unmet needs and desires.
Kid Safe Foundation USA	Pre K-5 Cost	The KidSafe Foundation provides personal Safety Education Seminars for Parents and Teachers as well as an 8 week KidSafe for Kids program for children ages 4 through 11. KidSafe protects children by preventing child sexual abuse, child sex trafficking and online exploitation by providing comprehensive developmentally age appropriate personal safety education. As child safety experts, educators, mental health professionals, authors, and moms, KidSafe Founders created programs teaching children life skills through fun, not fear, using role play activities, song, books, and discussion. Parent seminars can be offered through PTA as a stand-alone program. KidSafe Children’s Book series is available at www.kidsafefoundation.org .
Monique Burr Foundation Child Safety Matters Teen Safety Matters	K-5 (Child Safety Matters) 6-8 Teen Safety Matters	MBF Child Safety Matters™ is a comprehensive, research-based, prevention education program that educates and empowers children and all relevant adults with information and strategies to prevent, recognize, and respond appropriately to bullying, cyberbullying, all types of abuse, digital abuse, and other digital dangers. The MBF Child Safety Matters program was developed with schools, not for schools, to make the best use of existing resources and ensure schools have effective programs that are easy to implement. MBF Teen Safety Matters™ is a comprehensive, research-based, prevention education program that educates and empowers teens and all relevant adults with information and strategies to prevent, recognize, and respond appropriately to bullying, cyberbullying, all types of abuse, relationship abuse, sex trafficking, digital abuse, and other digital dangers. The MBF Teen Safety Matters program was developed with schools, not for schools, to make the best use of existing resources and ensure schools have effective programs that are easy to implement.
NetSmartz and KidSmartz Internet Safety National Center for Missing and Exploited Children	K-12 No cost	NetSmartz has updated their program and provides web based presentations, resources, videos, and tips to educate, engage, and empower children to be safer on and offline. In order for the District to comply with District Policy 8.123 – Technology Acceptable Use Policy for Students, staff from Library Media Services, Department of Safe Schools, IT Infrastructure and Security, and the Department of Educational Technology collaborated to provide an age-appropriate training program for all students. This training program is available to all schools and complies with the Children Internet Protection Act (CIPA), the Protecting Children in the 21st Century Act, and other protective federal and state mandates.

Sandy Hook Promise	2 nd -12 th No Cost	Program trainers work with youth and adults to Know the Signs by learning how to identify, intervene, and get help for at-risk individuals BEFORE they hurt themselves or others. This program utilizes 4 programs, two for youth and two for adults.
SUBSTANCE ABUSE (SA)		
Palm Beach County Substance Awareness Coalition (PBCSAC)	K-12 No cost	<p>The PBCSAC has created an accessible resource for Palm Beach County school partners to provide evidence based substance prevention curricula. Facilitation, training and consulting approved by the Safe and Drug Free School (SDFS) Advisory Council for inclusion on the approved vendor/provider list.</p> <p>The PBCSAC has created ready access to resources and partners that will allow schools around the district to request these services without cost and other barriers to access. This includes evidence-based materials and resources as well as the trained and expert staff of the coalition to act as consulting professionals or direct facilitators upon request.</p> <p>Example of activities: Provide curricula to existing programs to focus on substance prevention (alcohol, tobacco and other drugs), in-school assemble and group presentations, provide latest data and trends in substance use for inclusion in lesson planning, continued coordination, and access to quality programs and partners from across the prevention field.</p> <p>Outcome: A more visible and accessible PBCSAC presence for a broader section of the School District of Palm Beach County to support their on-going efforts in prevention and positive community norming strategies.</p>
Over the Counter Medicine Safety Program Palm Beach County Substance Awareness Coalition (PBCSAC)	5-8 No cost	The Over the Counter Medicine Safety Program raises awareness about the safe use of OTC Medicine and provide resources to better equip educators, school nurses, and families with knowledge about OTC medicines and responsiveness.
Living Skills in the Schools CRC Foundation	K-12 No cost	Living Skills in the Schools aims to raise awareness and provide drug prevention and educational programs for students and parents. It also aims to strengthen protective factors and increase the bonds between peers, school staff, and parents.
MENTAL HEALTH (MH)		
Adolescent Depression Awareness Program (ADAP)	9-12 No Cost	The Adolescent Depression Awareness Program (ADAP) educates school based professionals, high school students, and parents about the illness of depression. Through a student curriculum, a training program for health and school-based professionals, and presentations for parents and communities, ADAP delivers the core message that depression and bipolar disorder are treatable medical illnesses and that concerned individuals should seek help.
Boca Raton’s Promise: Breaking the Silence (BtS): Teaching the Next Generation about Mental Illness (4 th /5 th)	4-12 Cost Varies	Breaking the Silence (BTS) are lesson plans for upper elementary, middle, and high school classes that teach about mental illness. Innovative stories, games, activities, and posters teach the warning signs, promote early treatment and de-stigmatize mental illnesses. BTS meets National Health Education standards and promotes non-violence, character education, and tolerance. BTS can be integrated into a school-based health curriculum, as well as reading, science, and language curricula. Teacher training is provided.

Boca Raton’s Promise: More than Sad/ Red Flags	4-12 Cost Varies	Red Flags and More than Sad are culturally relevant videos and curricula that address adolescent depression and suicide and have been added to the curriculum for secondary students. More Than Sad is a program of the American Foundation for Suicide Prevention that provides education about factors that put youth at risk for suicide, in particular depression and other mental disorders.
Boca Raton’s Promise: FRIENDS	4-12 Cost	Material and services are determined by school staff in consultation with FRIENDS coordinator. The school selects an instructor/advisor (HS) for FRIENDS who identifies several artistic expressions (photography, drawing, song, skits/drama, etc.) for each semester. Students are referred to FRIENDS by counselor and school staff for 60-90 minute weekly sessions. Several models and forms are made available for instructors. Instructors are encouraged to structure FRIENDS individually.
Coalition to Support Grieving Students (New York Life Foundation)	K-12 No Cost	The program disseminates bereavement resources to targeted schools of The Palm Beach School District. Ongoing material, and support are provided through: https://GrievingStudents.org . Schools may apply for the Grants for Good program for funding to support grief initiatives. School should insure compliance with the Grants and Resource Development Office.
Erika’s Lighthouse Teen Depression: Stories of Hope & Health for Middle School Students	7-8 No	Teen Depression: Stories of Hope & Health for Middle School Students. A teen depression and mental health empowerment curriculum designed for middle schools offering a “first look” at depression.
The Jason Foundation, Inc. JFK Medical Center North Campus	3-12 No cost	Bring awareness to national & local statistics learn warning signs and elevated risk factors learn how to recognize at-risk youth and ways to help, Identify support services available to students & families.
The Mental Health Association of Palm Beach County Inc.: GPS	K-12 No cost	The program targets children in kindergarten through 12 th grade who have been identified as having an emotional, behavioral, or other problem in school or in the home. It offers free behavioral health screenings, care coordination, and navigation to behavioral health resources.
Mental Health Awareness iPromise2 Campaign	9-12 No cost	The iPromise2 campaign. Designed and created by local youth, for youth, to break the stigma related to adolescent mental health conditions. This session features seven short video clips which provide educational and accurate information on mental health, mental illness, anxiety, depression and stigma.
National Alliance on Mental Illness (NAMI) of Palm Beach County	6-12 No cost	This program is a 50 minute mental health awareness program for middle and high school students. Teens learn how to recognize early warning signs or mental illness and how to reach out to a trusted adult.
Pandora’s Kids	K-12 No cost	To provide support to children ages 6-18 who have suffered the loss of a loved one. Pandora’s Kids offers free monthly events for children and families to meet, have fun, form friendships, and gain support by knowing they are not alone in their grief. Comments: Not a school-based program. Pandora’s Kids may share literature regarding their off-campus activities

VIOLENCE PREVENTION (VP)		
<p>Child Support Short Film Program</p>	<p>6-12 Cost-\$500.00</p>	<p>Students at middle school should be concerned about their classes, getting ready for high school, sports and extracurricular activities. This short film follows the lives of middle school students who are affected by their families’ struggles. Monica Johnson will be placed in the middle of her parents’ conflicts and competes with her younger sister for emotional support. She will be affected by their ignorance as she faces bullies at school who lash out at Monica to deal with their own family issues. This story will showcase how young girls struggle to find emotional outlets through the lens of school violence. Comments: (1) Program implementation may occur only after school administration has reviewed the film and approved it for use. (2) Program implementation should occur only in small groups or class-sized groups to allow for student monitoring and support. (3) Parent consent is required. (4) Program implementation should be done in collaboration with the school counselor, school psychologist or other support personnel.</p>
<p>Commit to Change: Aid to Victims of Domestic Abuse, Inc. (AVDA) AVDA Commit to Change for Grades K-5 AVDA Commit to Change for Grades 6-12</p>	<p>K-12 No cost</p>	<p>AVDA’s Violence Prevention educators provide age appropriate domestic and dating violence prevention curricula to meet the unique need of Palm Beach County Youth. AVDA’s curricula align with The Centers of Disease Control’s evidence-informed model to prevent intimate partner and the principals of primary prevention, implementing the most effective programming and activities with youth. The overarching goals for AVDA’s age appropriate, intensive, dating violence prevention curricula for youth include assertive communication, balanced gender norms, and developing and sustaining healthy, respectful, equitable friendships and relationships. Topics include healthy expression of feelings with specific emphasis on handling anger, building self-esteem and celebrating each other’s unique differences, how to handle bullies effectively, and personal safety in situations of abuse. Topics include understanding school, dating, and domestic violence, effective bystander intervention, building healthy relationships, and personal safety in situations of abuse.</p>
<p>Peaceful Schools International Membership and Recognition Program</p>	<p>K-12 No cost</p>	<p>Peaceful Schools International (PSI) seeks to provide connection and resources to schools throughout the world that have made a commitment to develop and maintain a culture of peace. Any school can join PSI; when a school has achieved positive action in six key areas of evaluation, it is eligible to apply for the PSI Recognition Program and is awarded a certificate of achievement.</p>
<p>PointBreak</p>	<p>6-12 Cost</p>	<p>PointBreak is an anti-bullying program that helps promote resiliency among students who then display social competence, problem solving skills, personal responsibility and a sense of purpose and future. PointBreak helps reduce campus violence as students choose conflict resolution and respect for others.</p>

SPEAKERS BUREAU SPEAKERS MAY BE INFORMATIONAL OR MOTIVATIONAL IN NATURE AND MAY NOT BE PART OF A LARGER CURRICULUM OR PROGRAM. IN MANY CASES THERE IS A COST ASSOCIATED WITH THE SPEAKER.		
Your Life Speaks (Thomas "Nathan" Harmon)	6-8, 9-12 Cost \$1,500/day	<p>"Nathan is a man who is beyond passionate about what he does. Shortly after you meet Nathan, you begin to understand that he truly believes that every person he interacts with can be impacted and that every person can have a life that screams leadership, value, and belief. Nathan believes that people don't have to settle for anything short of excellence, no matter the situation. Every person can rise above and overcome their obstacles. You may never meet another speaker who is more energetic and engaging. Nathan wasn't always so energetic and positive. Battling eating disorders, suicidal thoughts, divorced parents, and drug addictions, Nathan eventually made a decision that forever changed his entire life. School assembly topics: Attitude and Character are everything, Suicide is not an option, overcoming circumstances, Self-Harm is not a way to deal with your pain/struggles, The Bully and Insecurity, Cyber Bullying, Mission Minded over the Moment, Becoming a Leader, Drugs/Drinking & Driving"</p> <p>Comments: Your Life Speaks is approved for the Speakers Bureau with the following additional requirements: (1) The assembly presentation may occur only after school administration has approved it for use. (2) The assembly presentation should be done in collaboration with the school counselor, school psychologist or other support personnel. (3) The assembly presentation should include information for students specific to Palm Beach County resources (e.g. local 211 Helpline, 211 Chat and Text Line, school-based supports). (4) Use of social media during the presentation, even though the output is encouraging and inspirational, must be approved by school administration.</p>
PLEASE NOTE		
<p>Approval is in effect for one year. Background checks for volunteers and vendors are for three years. Schools should check clearance when scheduling a presentation.</p> <p>See http://www.palmbeachschools.org/schoolpolice/Fingerprintingandbadges.asp</p>		
8/21/17		Updated:

Appendix B: Behavioral Health Agreements

AGENCY	SERVICES CURRENTLY PROVIDED
Aid to Victims of Domestic Abuse, Inc.	Violence prevention and counseling (domestic, dating, and school)
Am Assn of Caregiving Youth	Caregiving youth project: support to youth who are taking care of ill or physically challenged family member
ASPIRA of Florida	Hispanic leadership program (mentoring, counseling, and community service); dropout prevention; and a violent prevention component
Best Foot Forward	One-on-one intervention and support for students in foster care
Big Brothers Big Sisters of PB & Martin Co.	Mentor/Mentee Program
Boys Town South Florida	In-home family services, common sense parenting, behavioral health clinical services, and care coordination
Camelot Community Care	Specialized therapeutic foster care, trauma informed care, abuse and neglect, cognitive behavioral therapy, functional family therapy, crisis management, and psychiatric services for identified clients
Center for Child Counseling	Play therapy, trauma informed cognitive behavior therapy and child and family psychotherapy
Center for Family Services	Prevention (individual and small group), child and family counseling
The Children's Healing Institute (Dick Webber)	Parent aide mentoring for families with a child < 12 years old; bereavement support groups for children 3-17 years old, and resources and support for families with premature infants in the NICU
Children's Home Society of Florida	Counseling, case management, truancy
The Chrysalis Center d/b/a Chrysalis Health	Outpatient therapy
Drug Abuse Treatment Association	Counselors provide outreach educational programs, short-term counseling, and referrals to students at risk in specific MS and HS in Palm Beach County. Provides assessment, prevention, and short-term substance abuse treatment
Families First of PBC (CCMO)	Individual, child, and family counseling; case management; and crisis management. Specialty: behavioral interventions, trauma, family therapy, and adjustment issues
Faulk Center for Counseling	Provides on-site group counseling to children and teens referred for behavioral or emotional issues: problem solving, anger management, social skills, and self-esteem for a period of 8-16 weeks.

Gulfstream Goodwill Industries, Inc.	Build career plans/skills and prepare for school completion, post HS training, and productive work by providing structured and supportive relationships with trusted adult
Hanley Foundation	Project Northland, Class Action, Alcohol Literacy Challenge, ATLAS, ATHENA, Alcohol EDU, PATHS, Teen Intervene, Active Parenting Now and Teen; and, Level 1 approved programs including Kids of Promise, Toxic Mixture, Brain Drain, The Blunt Truth, Life Skills and Mental Health First Aid training
Healthy Mothers, Health Babies Coalition of PBC, Inc.	Educational presentations in support of the human growth and development curriculum; responsibilities of fathers; and, the importance of prenatal care and access to services for pregnant teens
Jerome Golden Center for Behavioral Health, Inc.	Crisis intervention services (mobile crisis team) and therapeutic services for youth and adolescents North of Southern Boulevard and in the Glades
Legacy Behavioral Health Center, Inc.	Targeted case management and comprehensive behavioral health services
Mental Health Association of PBC	Individual in-school weekly mentoring, care coordination and referrals, Mental Health First Aid training, free screening for depression, and anxiety. Helpline (561) 801-HELP (4357) for parents, youth, teachers, schools counselors, etc.
Multicultural Community Mental Health Center, Inc.	Psychiatric, psychological care, and case management (individual and family counseling in English, Spanish, and Creole)
Multilingual Psychotherapy Centers, Inc.	Individual counseling, case management, individual crisis management, and psychiatric medication management Specialty: ADHD, trauma, grief, child abuse, anger management, bipolar depression. Services in English, Spanish, Creole, French and Portuguese
PBC Sheriff's Office Alternative Intervention Services Unit	Case management/ truancy intervention services: contacting parents of truant youth; brief bio-psychosocial assessments to determine needs; case management including frequent visits to home & school, linkage to community agencies, and ongoing bio-psychosocial assessments
PBC Youth Services Dept. – Youth & Family Counseling	School-based services, including individual, group, and family therapy, assessment, and intake
Parent Child Center	Individual and family counseling case management, parenting (specialty: trauma, child welfare, anger, self-esteem, boundaries, severe mental illness)
Ruth & Norman Rales JFS	Child and Family therapy, domestic abuse, special needs, psychiatry, and financial assistance, career and employment services (case management and crisis management)

SequelCare of Florida	Outpatient therapy for children and adults, case management, psychiatric care, Baker Act follow-up, anger management, trauma, and child abuse
South County Mental Health Center, Inc.	Crisis intervention, screening, and evaluation services are provided, 24 hours a day, 7 days a week, wherever there is the need. The goal is to reduce unnecessary “Baker Act” admissions to the inpatient units
Trustbridge	Grief support for individuals and group
Urban League of Palm Beach County	Case management, mentoring, individual counseling, prevention education, also a CINS/FINS funded agency

Budget of Personnel Expenditures

Project Administration							
Personnel			FTE	Total Salary	Variable FB	Fixed FB	Total
Manager (1.0 FTE)	101,805	Responsibilities include the day-to-day management of the project which include but are not limited to: coordination, planning, and organizing of project services and activities; chairing Committees; supervising project staff; administering budget; working directly with District and school staff to ensure commitment, cooperation, and support including providing regular updates to District leadership and the School Board; collaborating with partners to develop, implement, and continuously improve the project; coordinating data collection, facilitating annual review of progress, and addressing recommendations that improve operations; and, ensuring all grant reporting is accurate and on time.	1.0	93,500	17,157	7,600	118,257
Specialist (1.0)	86,032	Assists with the implementation of the project by serving as a liaison between the schools and the District; and, assisting the Project Director in the monitoring of the fidelity of implementation and evaluation of the project.	1.0	73,009	13,397	7,600	94,006
Budget Analyst (1.0 FTE)	64,911	Maintains all budgetary records and logs for audit compliance; communicates with District's District Services and Accounting Services Offices for accurate, up-to-date financial information; reviews and monitors expenditures; orders supplies; completes budget status summary reports; and, supports the daily operations of the project including developing and preparing reports.	1.0	54,923	10,078	7,600	72,601
Personnel Total	252,748		3.0	221,432	40,632	22,800	284,864
Fringe Benefits							
Employee Benefits	46,379	Per District FY 2019 Fringe Benefit Rate Schedule for Regular Full-Time Employees: Retirement 8.7%; FICA 6.2%; Medicare 1.45%; Worker's Comp/Unemployment 2.0%= 18.35%					
Group Insurance (Health and Life)	22,800	Per District FY 2019 Fixed Rate Health and Life Insurance rate: \$7,600 per person x 3					
Fringe Benefits Total	69,179						
Crisis Response Teams							
Personnel			FTE	Total Salary	Variable FB	Fixed FB	Total
Licensed Mental Health/Behavioral Health Professional (4.0 FTE)	344,128	Provides professional mental health services; provides clinical and casework services; and, provides counseling and treatment. \$86,032 mid range salary x 4	4.0	285,652	52,417	30,400	368,469
Board Certified Behavioral Analyst (1.0 FTE)	86,032	Provides behavior-analytic services and interventions; Must hold graduate-level certification in behavior analysis.	1.0	71,413	13,104	7,600	92,117
Behavioral Intervention Associate (8.0 FTE)	371,504	Collects behavioral data for the use of Functional Behavior Assessments; assists in the implementation of individual Behavior Intervention Plans; implements crisis prevention, crisis de-escalation, crisis intervention procedures, and post-crisis strategies. \$46,438 mid range salary x 8	8.0	234,400	43,012	60,800	338,212
School Psychologist (2.0)	172,064	Conducts individual student evaluations through psychometric/ psychological assessment and student observation techniques and provide oral and written reports of findings and recommendations; provides appropriate student identification information, educational implications, and recommendations for designated exceptionalities; interprets the results of individual student evaluations to parents, teachers and administrators.	2.0	134,570	24,694	15,200	174,464
Nurse (1.0)	59,549	Assists with the assessment and diagnosis of the students being served by the Crisis Response Team; administers assessments for diagnosing appropriate multi-tiered therapeutic support and intervention; and, works in collaboration with the other members of the Crisis Response Team, primary care providers, and behavioral health agencies to provide total medical care for the students who are receiving treatment and recovery services.	1.0	59,549	10,927	7,600	78,076
Social Services Facilitator (2.0)	109,266	Participates in the Crisis Response Team interventions in order to ensure immediate access to treatment and recovery services; assists with the mental health screenings and wrap around services; and, provides short-term, informal counseling.	2.0	75,800	13,909	15,200	104,909
Personnel Total	1,142,543			861,384	158,063	136,800	1,156,247