UF Lab School Mental Health Assistance Allocation Plan 2019 - 2020



Developmental Research School *at the University of Florida*

Evidence-Based Mental Health Services:

P. K. Yonge Developmental Research School is a K-12 school serving approximately 1,155 students from 31 cities including Gainesville. P.K. Yonge's Mental Health awareness and crisis prevention effort varies across this wide distribution of students' ages and emotional development. Tier 1 social-emotional and mental health supports for elementary classrooms include students engaging in the Caring School Community curriculum and participating in Daily Morning Meetings that address social-emotional skills. Additionally, a component of our language arts curriculum developed by the Center for the Collaborative Classroom, has a strong social-emotional component. Grade-level data including teacher observations of child interactions, attendance, discipline referrals, and achievement scores are reviewed several times throughout the year. These data are utilized to inform school policy and infrastructure decisions, teacher resources, and environmental enhancements to foster a system of positive behavioral supports.

In 6th Grade, we have implemented an Advisory component to address the social and emotional well-being of our students. Weekly sessions support their acclimation to the middle school environment, help reduce bullying and social isolation, and support students' mental health. Through the weekly Advisory meetings faculty are positioned to identify students who need more direct support during this critical year of transition. Student wellbeing is monitored through reviewing teacher observations of student interactions, motivation, engagement, and work completion. Additionally, data on attendance, discipline referrals, and achievement progress are tracked. Grade-level data inform classroom strategies and any additional systems-level initiatives that may be needed (e.g., student mentoring).

In grades 7-12, we track student involvement in extracurricular activities, such as clubs, athletics, and visual/performing arts, with the goal of each student being engaged in at least one activity that provides a niche space for them at P.K. Yonge. Additionally, secondary students in grades 6-12 receive classroom guidance lessons from school counselors who push into English Language Arts and Social Studies classrooms. These lessons encompass such topics as stress management, conflict mediation, social media use, bullying/cyberbullying, and goal-setting. Tier I data reviews for grades 7-12 include teacher observations of student connectedness to the school, credit tracking, attendance, discipline referrals, and achievement scores.

P.K. Yonge's goal for Tier 1 is to assure the core program is meeting the social-emotional, behavioral, and mental health needs of at least 85% of students, much like the academic-

side of our MTSS model. Identification of individual student needs for Tiers II and III includes approximately 10% and 5% respectively.

Our Student and Family Services Team (SFS) consists of a Director of Student and Family Services, the Principal, K-12 School Counselors, Elementary and Secondary Behavioral Support Specialists, School Psychologists, the School Nurse, and the School Resource Officer. The SFS Team meets weekly to discuss systems of support and students of concern.

Each year we conduct a student survey to determine student perceptions related to safety, substance abuse and mental health needs. The survey is adapted from the U.S. Department of Education, National Center for Education Statistics' School Climate Survey with selection of items tailored to the unique needs of P. K. Yonge. Domains include Acceptance of Diversity, Interpersonal Communication and Relationships, School Belonging and Connectedness, and School Safety. Quantitative analyses are derived from Likert scale item ratings and qualitative analyses identify prevalent themes from open-ended questions. This data is analyzed by our UF Psychologist and shared with the Student and Family Services Team. We then determine action steps to address areas of need and concern. The most recent data indicate the majority of P. K. Yonge students have high personal regard for teachers; feel supported by friends and teachers; feel connected to the school through sports, the performing arts center or club affiliation; and feel safe in the school knowing they have a teacher, counselor, or administrator they can go to for social-emotional supports. Data from 2018 also identified needs for greater bully prevention and awareness as well as a need to foster more supportive teacher-student interactions among middle school cohorts. Additionally, significant mental health stressors were reported from several individuals in high school. In response, the school added an additional school counselor at the secondary level beginning with the 2018-19 school year funded by the Mental Health Allocation. We observed improvement in the data by the end of the school year to support the decision to maintain the additional school counselor with the Mental Health Allocation for 2019-20. Teachers will be provided with strategies for both identifying and supporting students experiencing mental health distress through the ongoing mentorship of the Learning Community Leaders and other professional development supports initiated by the SFS team and administration and by advantaging the newly available Youth Mental Health First Aid Training.

At a more micro level, students of concern are discussed at grade level Student Success Team meetings, which take place twice each semester. At this meeting, students' academic performance, attendance, and social-emotional status are discussed; plans to address individual student needs are constructed to include ongoing monitoring as one of the action steps. Parents are often included in the construction of action plans. Students who need Tier 2 social emotional support are referred to one of our four full-time or our part-time school counselor. Students receive differentiated counseling, both individual and small group, based on their needs. Progress is monitored, families are engaged in the process when struggles persist, and the counselors also connect parents/guardians to community resources for additional supports. Issues with discipline and/or attendance are addressed by our behavior support personnel.

Students who require Tier 3 social emotional support are referred to our school psychologist and our school psychology post doc. Issues with discipline and/or attendance are handled by our behavior support personnel. For serious discipline issues, the School Resource Officer and/or other members of the University Police Department may be engaged with a student.

Both the counseling and school psychology personnel track weekly screening, assessment, and mental health services provided. These data are reported to the SFS team monthly. Additionally, the SFS meets weekly to review progress updates for high risk students across grades K-12.

Supports that Address Mental Health Needs (assessment, diagnosis, intervention, treatment, and recovery):

Every effort is made to provide same-day screening in response to urgent needs and/or provide mental health crisis intervention. If students have left the school when a referral is noted, efforts are made to contact parents/guardians immediately. Non-emergency referrals for mental health screening are assessed within 15 days of referral. School-based mental health services are initiated within 15 days of identification and assessment. Community-based mental health service referrals with urgent needs are made within the same day and law enforcement assistance may be initiated to facilitate this process. Non-emergency community referrals are communicated to parents and the school follows up within 30 days to assist parents with the process. The school does not have outside contracted mental health providers as services are readily available at the school site. These policies are noted in the school's service provision protocols and monitored weekly by the Student and Family Services team.

Students who are referred for Tier 2 and/or Tier 3 counseling and/or school psychology services are assessed using normed instruments appropriate to the issues being experienced by the student. At Tier 2, assessments may include screening for social skills, motivation, and/or common child/adolescent emotional needs (e.g., test anxiety, self-regulation, frustration tolerance). These results will inform behavioral goals. Subsequently, counseling and behavior interventions will target skills needs (e.g., building stress coping mechanisms, fostering self-reliance and self-efficacy, and generating problem-solving

strategies). Progress is monitored and utilized to inform intervention duration and modifications as needed.

At Tier 3 assessments may include behavioral observations as well as mental health omnibus measures. Additionally, extended Tier 3 services without adequate progress may prompt referrals for special education eligibility and thus may include mental health diagnostic rating scales (e.g., anxiety, depression, oppositional defiant disorder) and/or behavioral measures. These data will guide intervention decisions which may include behavioral contracts with positive reinforcement plans, check-in/check-out procedures, assigning adult mentors, and counseling therapies (e.g., Brief Solution Focused Therapy, Mindfulness, Cognitive-Behavioral Therapy, Exposure-Response Prevention Therapy). Progress is monitored utilizing a range of mental health measures and outcome data will inform the duration and intensity of interventions as well as any modifications.

Students who are experiencing severe crisis may be transported to crisis centers for intensive intervention. In this case, we seek to obtain a Consent to Share with outside treatment providers so that we remain as informed as possible of student needs and interventions. Upon a student's return to school, we conduct a Re-Entry Meeting, in which we develop action steps for the student's transition back into school and scaffolding support moving forward.

Evidence-Based Mental Health Services for Students with One or More Co-Occurring Mental Health or Substance Abuse Diagnoses and Students at Risk for Such Diagnosis:

Significant mental health needs that may include substance abuse, comorbidities, psychopharmacology, medically-fragile status, and/or criminality require a multi-faceted and often multi-agency approach to comprehensive service delivery. In these instances, Student and Family Services will collaborate with multiple in-school and outside providers to design an individualized support plan for the student. The school obtains consent to collaborate with outside care providers regarding excused absences for treatment, counseling strategies and/or targeted behavioral interventions. When student needs include substance abuse considerations, school personnel collaborate with outside care providers to address social-emotional supports and also monitor drug screenings. Medication needs may be coordinated between the student's primary physician or psychiatrist and the school nurse. P. K. Yonge has established procedures for monitoring criminal acts and court proceedings when youth have pending or adjudicated circumstances. In addition, the school has procedures for addressing student needs if they are at risk for neglect or abuse and removed from custodial care. Finally, transitional hospital and home bound services can be implemented as needed. Collaborating with families on intervention decisions are always an important consideration given their

insights on the student's needs and the desire to extend intervention to home applications.

Evidence-based mental health services for high-risk individuals vary depending on the diagnoses and confounding personal circumstances. Generally, psychoeducation, relaxation training and cognitive-behavioral therapies (CBT) are effective in addressing internalizing disorders (e.g., anxiety, depression). However, for some specific internalizing disorders (e.g., separation anxiety disorder, phobias, social anxiety, test anxiety) adding exposure therapy and/or successive approximations may be particularly helpful. For obsessive-compulsive disorder, exposure may be considered first-line treatment and relaxation training may be counterproductive. For depression, including behavioral activation technique can also improve results when coupled with CBT. For externalizing disorders behavioral modification strategies and CBT can be an effective treatment for specific needs (e.g., anger management, oppositional/defiance). When more aggressive externalizing symptoms present, family therapy is often recommended. For younger children, Parent-Child Interactive Therapy may be especially helpful. Brief solutionfocused therapy is noted to be effective in improving motivation, especially with minority students. Regardless of the mental health intervention, generalization of the skills beyond the therapy session is a goal and may often be facilitated through behavioral modification techniques. Additionally, as the research on evidence-based interventions (EVI) is continuously emerging it is important that the school's direct service providers remain current on the literature. Fortunately, P. K. Yonge has a consistent history of promoting continuing education training and there are a number of national clearinghouse resources for EVIs (e.g., SAMHSA, What Works Clearinghouse, Promising Practices Network, Social Programs that Work).

Collaborative Partnerships with Community Providers and Agencies:

As a Developmental Research School, we partner with the School Psychology and School Counseling programs at the University of Florida to develop support systems for assessing, diagnosing, intervening and treating the mental health needs of our students.

Additionally, we work to build and maintain relationships with our two primary mental health crisis facilities, Meridian Behavioral Healthcare and UF Health at Vista. We have toured the facilities and met with doctors and other providers so that we are informed about the facility procedures and protocols. We seek to obtain Consent to Share documentation so that we can support a continuation of services after a student has undergone mental health intervention and treatment by these providers. Additionally, the school maintains a list of community mental health resources for children and adolescents available to families (see Appendix).

The University of Florida Police Department (UPD) collaborates with P.K. Yonge on issues involving students at risk. We provide regular updates on students of concern after our weekly Student and Family Services meetings. The UPD has supported us with multiple investigations, imposing trespass orders, and removing weapons from a student's home, for example, as well as providing extra security for special events or when students were feeling especially vulnerable (e.g., after the Parkland tragedy). Our School Resource Officer, an employee of UPD, has an office on our campus, and serves as the liaison between P.K. Yonge and UPD.

In an effort to better serve our students and families, we created a resource list of community service providers. We make this available to families who may need help from outside agencies.

Process for Coordinating Mental Health Services with a Student's Primary Care Provider and Other Mental Health Providers, Including Procedures for Information Sharing:

P. K. Yonge has created a written set of policies and procedures for collaborating with local mental health providers and child agencies. These guidelines include Consent-to-Share information forms, parental notice documentation, emergency procedures, confidentially requirements, and quick reference contact information.

Number of Students Screened/Assessed, Number of Students Referred for Services, and Number of Students Receiving Services/Assistance (School-Based and Community):

During the 2018-19 school year 195 students were screen for mental health services and 121 were referred for counseling; 140 students received long term counseling/therapy services during the school year. P.K. Yonge's counselors and school psychology team typically provide the needed direct services for identified students. Of the 195 that were referred for and received screenings (academic and/or behavioral observations), approximately 30 received in-depth evaluations that included mental health components. Each school year 25-40 students will present with more than one mental health diagnoses that is chronic.

Number and Credentials of Mental Health Services Providers Employed by the District:

P. K. Yonge employs a licensed Psychologist who also is a nationally certified School Psychologist:
Diana Joyce-Beaulieu, Ph.D., NCSP
Psychologist PY6872, Scholar
UF School Psychology Practica Program Coordinator With the Mental Health Assistance Allocation we are maintaining positions added during the 2018-2019 school year including one part-time mental health counselor intern (M.A.; licensure application submitted); a full-time, certified school psychologist completing postdoc training with a specialization in mental health counseling (#1172435; NSCP licensure application submitted); and one additional full-time secondary counselor. In addition, a newly hired UF Assistant Professor in School Psychology will be joining the team to assist with analysis of school mental health screening data to support program planning and improvements at Tiers 2 and 3. (School Psychology Ratio 1:330)

P.K. Yonge's full-time school counseling team includes Becca Antellis (serving primarily grades K-5; K-12 Counselor Certification #1322626; Mental Health License #IMH15245), Sue Ireland (serving primarily grades 6-8; K-12 Counselor Certification#939791), Sara Theiss (serving primarily grades 9-11; K-12 Counselor Certification #851266), and Mollie Bryen (serving primarily 12th grade; K-12 Counselor Certification #1303238). The increase of 1.0 FTE in available school counselors from the Mental Health Allocation is distributed across these four counselors as they provide a combination of screening for mental health services, Tier 2 counseling support, social-emotional counseling, and academic counseling as well as classroom-based mental health awareness lessons for students. (Counselor Ratio 1:288)

Number and Credentials of Mental Health Services Providers Contracted by the District:

Not applicable. As a one-school school district, PK Yonge serves students from 31 cities (including Gainesville), P.K. Yonge employs 4 full-time and 1 part-time counselor, a psychologist, and a school psychology postdoc to provide screenings and direct services. In addition, we have easy access to readily available community crisis intervention and treatment for both insured and noninsured families. P.K. Yonge does not hire outside contractors for supplemental mental health services delivery, however, a contingency of outside providers is available locally and utilized for referrals (see Appendix).

100% of UF Lab School's mental health funding (\$) will be allocated to support direct mental health services and/or coordination of such services with primary care and mental health providers as follows:

- Continued employment of one additional full-time school counselor
- Continued employment of a part-time counselor (.50 FTE) to increase available mental health services/support
- School Psychologist postdoc (1.0 FTE) to provide Tier 3 mental health counseling for identified students
- UF Psychologist/School Psychologist in Residence (.05 FTE)

Assurances that Mental Health Assistance Allocation Does Not Supplant Other Funding Sources OR Increase Salaries or Provide Staff Bonuses:

The UF Lab School/P.K. Yonge DRS Mental Health Assistance Allocation will be used to <u>add</u> the following service providers/services to address students' needs for mental health supports: an additional 1.5 FTE school counselor; a 1.0 FTE School Psychologist postdoc, and a .05 FTE School Psychologist from the University of Florida College of Education who oversees and directs all mental health services at P.K. Yonge. No funds from the Mental Health Assistance Allocation will be used to increase salaries or provide staff bonuses.

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 Payments, Grants):

Five years ago considerable time was invested by the P.K. Yonge School Psychologist in an effort to set-up Medicaid reimbursed services, including meetings with the State commission. It was communicated to the school, that a lab school was not recognized as an independent reimbursable unit.

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1.0 FTE	Additional Secondary School Counselor	64.362
.50 FTE	Part-time Mental Health Counselor Intern	16,591
1.0 FTE	School Psychology Post Doc	41,477
.05 FTE	UF Psychologist/School Psychologist	5,348
	Professor-in-Residence	
		127,778

Appendix Part Listing of Local Referral Agencies Commonly Utilized Through PK Yonge

Community Mental Health Providers

Meridian Behavioral Health Care (insurance not required) https://www.mbhci.org/ Provide emergency intake, serve ongoing individualized counseling and medication needs, also incorporate family counseling and will coordinate with community social services

UF Health Florida Recovery Center (addictions) https://ufhealth.org/uf-health-florida-recoverycenter

Provide a range of additional rehabilitation services for psychiatric and neuropsychological needs. Treatment options include inpatient rehab, partial hospitalization program, and outpatient therapy programs

- UF Health Springhill (child/adolescent outpatient therapy) https://ufhealth.org/Springhill Offer specialized assessments for mental health disorders, counseling modalities include parent-child interaction therapy, cognitive-behavioral therapy, mindfulness training, and exposure-response prevention therapy.
- UF Health Shands Psychiatric Hospital (child/adolescent inpatient) https://ufhealth.org/shands-vista Offer emergency intake and crisis stabilization services, medication management, detox protocols, family counseling and social services interface.

Child/Adolescent Specialized Private Practice Providers

- Dr. Julie Ellis, Fundamental Therapy (child/adolescents), http://funtherapysolutions.com/ Multidisciplinary approach that includes service providers for assessment, counseling, parent-child interaction therapy, speech/language therapy, occupational therapy, and remediation of learning deficits
- Dr. Garret Evans, Haile Market Therapy & Behavioral Medicine, http://www.hailemarkettherapy.com/ Individualized and family therapy options for children and adolescents, address both internalizing (e.g., anxiety, depression, OCD) and externalizing disorders (e.g., ADHD, ODD, CD).
- Dr. Cindi Gayle, (child/adolescents), https://cindigayle.com Offer supportive counseling for identity formation, LGBTQ, spectrum, and low-incidence disabilities
- Yulia Tamayo, Milestones in the Making (preschool, early child) http://milestonesinthemaking.com/ Specialization in low-incidence disabilities, medically-fragile, developmental disorders, and comorbid learning disorders