



# STUDENT LEADERSHIP ACADEMY

## Mental Health Plan 2020-2021

### Part I: Youth Mental Health Awareness Training Plan and Projected Budget

#### Section A: YMHFA Training Plan

<b>1. What is the percentage of employees currently trained and certified in YMHFA (Youth Mental Health First Aid)?</b>
There are 100% of employees trained and certified as of 6/17/21
<b>2. Explain the training goals for the upcoming 2021-2022 school year.</b>
Any new staff members will be trained by 09/01/2021. SLA currently has one teacher position that has not been filled.
<b>3. In addition, the annual goal for the 2021-2022 school year is to train:</b>
100% of employees by 09/01/2021
<b>4. Explain the training goal for the next 3-5 years.</b>
We have one trained, certified YMHFA Trainer on staff who will continue to provide training for new hires before the first day of school or within the first month of hire date.
<b>5. What is the procedure for training new personnel to the district?</b>
Our school psychologist, Dr. Kim LaCivita, is a fully trained trainer for both in person and remote YMHFA courses. She will train any new hires annually, within the first month of hire date.
<b>6. Explain how the district will utilize the following three YMHFA programs:</b>
<b>Youth Mental Health First Aid (YMHFA):</b> New staff will receive this training before the first day of school or within the first month of hire date.
<b>YMHFA Recertification:</b> All staff will receive recertification as required by the state.
<b>Kognito At Risk Modules:</b> We do not use this service as we use YMHFA.



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***Section B: YMHFA Projected Budget***

<b>Categories</b>	<b>Detailed description, number of activities within each category</b>	<b>Cost per/each</b>	<b>Total projected budget by category</b>
<b>Stipends</b>	Not Applicable	\$0.00	\$0.00
<b>Materials</b>	YMHFA Manuals	Online (Free)	Online (Free)
<b>National Council YMHFA Training</b>	Provided by the state free of charge for the train the trainer session.	Free	Free
<b>Kognito Modules</b>	Not applicable	\$0	\$0
<b>Total 2021-2022 Budget: \$0.00</b>			

**Part II. Mental Health Allocation Plan s.1011.62 (16), F.S.**

***Section A: MHAA Plan Assurances***

**The district assures:**

- ✓ 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 or incentives.
- ✓ Maximizing the use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants).
- ✓ Collaboration with FDOE to disseminate mental health information and resources to students and families.
- ✓ The district website includes local contacts, information and resources for mental health services for students and families.



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

### **A school board policy or procedure has been established for:**

- ✓ Students referred for a mental health screening assessed within 15 calendar days of referral.
- ✓ School-based mental health services initiated within 15 calendar days of identification and assessment.
- ✓ Community-based mental health services initiated within 30 calendar days of referral coordinating mental health services with a student's primary mental health care provider and other mental health providers involved in student care.
- ✓ Assisting a mental health services provider or a behavioral health provider as described in s. [1011.62](#), F.S., respectively, or a school resource officer or school safety officer who has completed mental health crisis intervention training in attempting to verbally de-escalate a student's crisis situation before initiating an involuntary examination pursuant to s. [394.463](#), F.S. Procedures include must include strategies to de-escalate a crisis situation for a student with a developmental disability as that term is defined in s. 393.063, F.S.
- ✓ The requirement that in a student crisis situation, the school or law enforcement personnel must make a reasonable attempt to contact a mental health professional who may initiate an involuntary examination pursuant to s. [394.463](#), F.S., unless the child poses an imminent danger to self or others before initiating an involuntary examination pursuant to s. [394.463](#), F.S. Such contact may be in person or using telehealth, as defined in s. [456.47](#), F.S. The mental health professional may be available to the school district either by aging entity, one or more local community behavioral health providers, or the local mobile response team, or be a direct or contracted school district employee.

### **Specifically state how SLA will assure the following:**

#### **1. Students referred for a mental health screening are assessed within 15 days of referral**

All student referrals for screening come from the recommendation of school based SWST, including parent-based referrals, community-based referrals, and administrative-based referrals. Upon referral and recommendation for screening, the SWST facilitator works with the school psychologist or LMHC to ensure assessment for screening takes place within 15 days of referral; All referral and screening activity are documented in our student information system (SIS).

#### **2. School-based mental health services are initiated within 15 days of identification and assessment**

All student referrals for screening come from the recommendation of school based SWST, including parent-based referrals, community-based referrals, and administrative-based referrals.



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School referrals are then shared with our school psychologist for screening and assessment. All services for school-based mental health services are initiated within 15 days of identification and assessment; Activity is recorded in our SIS system.

### **3. Community-based mental health services for students are initiated within 30 days of referral**

All student referrals for screening come from the recommendation of school based SWST, including parent-based referrals, community-based referrals, and administrative-based referrals. When a need for community-based mental health services are determined, the school psychologist is responsible for ensuring initiation of services within 30 days of referral. Documentation is maintained in the SWST notes and maintained by the SWST facilitator.

#### **Describe process for coordinating mental health services with a student’s primary mental health care provider and other mental health providers involved in the student’s care.**

SLA follows district policy and asks all enrolling families to indicate if their student has any mental health concerns or conditions. The information is reviewed by administration and the school psychologist, who reach out to the family to further understand student need. Based on the information received, the SWST team determines needs of the student and works with all applicable parties to monitor the student and create, implement, and monitor interventions when necessary.

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

Per Sarasota County School “When a charter school wants to access the proportionate share of the mental health grant allocation, the school is required to use the FL DOE template and complete the required components of the plan. Upon completion of the plan, the charter school must submit the plan to the Executive Director of Pupil Support Services for review. Each charter school mental health plan will be submitted to FL DOE along with the school district plan. The Pupil Support Services Department works collaboratively with the Sarasota County School Choice Department to ensure that charter schools are invited to participate in all professional learning opportunities. The mental health checklist was completed for charter school submitting a mental health plan.”

Each charter school makes their own individual plans; there is no coordination or sharing of services or providers with the district.

#### ***Section B: Planned Outcomes***

**Identify one or two measurable outcomes for your charter school’s plan to achieve through the 2021-2022 evidence-based mental health program:**



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<b>Identify strategies to:</b>	
<b>Improve the early identification of social, emotional or behavioral problems or substance abuse disorders;</b>	<ul style="list-style-type: none"> <li>• Fortify app to allow all students and teachers to report concerns.</li> <li>• Observations</li> <li>• Parent/Teacher Conferences</li> <li>• YMHFA Training - Teaching staff to identify signs</li> <li>• Teacher, staff, parent, student, and community member referrals to SWST</li> <li>• Crisis Text Line</li> <li>• Small Group or Individual Counseling</li> </ul>
<b>Improve the provision of early intervention services:</b>	<ul style="list-style-type: none"> <li>• Fortify app to allow all students and teachers to report concerns.</li> <li>• School-based School Psychologist</li> <li>• Contracted LCSW</li> <li>• Counseling for at-risk students</li> <li>• Intake on parent registration form of mental health concerns</li> </ul>
<b>Assist students dealing with trauma and violence: trauma informed care:</b>	<ul style="list-style-type: none"> <li>• Help children manage their feelings by teaching and modeling effective coping strategies</li> <li>• Answer children's questions related to the traumatic event(s) in honest, developmentally appropriate language and terms</li> <li>• Create clear and concrete safety plans with the child</li> <li>• Engage them in activities that stimulate the mind and body</li> <li>• Maintain usual routines</li> <li>• Watch for changes in behaviors and report to a SWST for monitoring/intervention</li> <li>• Allow children to tell the story of the trauma they experienced, as they see it</li> <li>• Respond calmly and compassionately, but without displaying shock or judgment</li> <li>• Set boundaries and limits with consistency and patience</li> <li>• Give them choices to regain a sense of control</li> <li>• Provide children who are acting out with opportunities to redirect their energy in a helpful way such as giving them additional responsibilities or leadership roles</li> <li>• Refer family to community resources for support and positive parenting strategies</li> </ul>
<b>School-based professionals can assist students dealing with trauma and violence by:</b>	<ul style="list-style-type: none"> <li>• Follow the school's reporting procedures if there is suspected abuse.</li> <li>• If the child is not eligible for special education, consider making individualized accommodations to academic work until the trauma has been sufficiently addressed (might consider including these in a 504 plan).</li> </ul>



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	<ul style="list-style-type: none"><li>• School staff utilizing strategies learned through “Trauma Informed Care” training</li></ul>
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Student Leadership Academy (SLA) strives to support our students and families through many different modes of support, including Tier I and Tier II Response to Intervention strategies (RTI) and a multi-tiered system of support (MTSS). Students of concern are referred to the School-wide Support Team (SWST), which meets monthly to discuss students of concern and develop/implement academic and social-emotions interventions. The RTI process and interventions are managed by the student services department. In addition to managing SWST and RTI, SLA’s student services department oversees the social emotional learning (SEL) curriculum ensuring that lessons focus on character building while also addressing mental health topics like self-harm, suicidal ideation, adolescent depression, negative and positive coping strategies, expressing feelings, and knowing who your resources are for help. We also collaborate with local organizations and bring in representatives to speak to our students about internet safety, bullying, dating violence, and positive relationships.

Additionally, we have contracted with licensed clinical social workers for students who are demonstrating a need for more intensive interventions and need a treatment plan that is managed by mental health professionals. Students who are referred for mental health services participate in a mental health comprehensive intake process, including parental/family involvement and participation, and coordination with physicians, psychiatrists, and other medical providers, when necessary.

### ***Section C: Program Implementation***

Mental health screenings and assessments will take place when there is a report of self-injury, suicidal ideation, and/or potential threat. Other scenarios include a student at risk of harming others, experiencing severe anger, depression, and/or emotional disturbance/crisis. Once a student of concern is identified by a staff member or teacher using the YMHFA training protocol and procedure, the school psychologist will screen the student by using an assessment worksheet. A parent is immediately contacted and a ‘duty to inform’ letter is completed with specific details of the incident and sent to the parent/guardian. If the scenario is considered “low risk,” a safety plan is completed with the student and school psychologist. If the scenario is moderate to high risk, the police department is contacted. The police officer will determine whether the student needs to be placed under the Baker Act. If the student is placed under the Baker Act, the parent/guardian is notified of the events after the police assessment and determination.

In compliance with the Marjorie Stoneham Douglas High School Public Safety Act, SLA has created a threat assessment team that will employ evaluations, assessments, and treatment for students that may be at risk or pose a threat to others. Individualized intervention, as part of the mental health treatment plan, created by the school psychologist or contracted LCSW (Telement), will be employed following an evaluation within 24 hours of the threat. If the evaluation does not occur the day of the possible threat report, the student will be removed from the school until the evaluation takes place, within the 24-hour deadline. Law enforcement will be contacted, as appropriate.

The mental health evaluation and treatment plan will be placed in the student’s education file and sent to the student’s primary care provider and/or mental health provider if they have one. If the student does not have a mental health provider, counseling services, as outlined in the mental health treatment plan, will be provided, at the school, with no cost for the family by the school psychologist. If more intense therapy is required, mental health services will be provided by a LCSW (licensed social social worker) via Telement.



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There are many ways to identify those students in need of mental health interventions are being identified quickly and serviced appropriately. The SWST team will meet with 5th grade counselors to discuss “at-risk” students from the elementary school who require targeted services when they enter our middle school. During the school year, at-risk students are referred to SWST by teachers, administrators, peers, parents, and concerned community members. SWST will utilize several different evaluation tools to better understand the needs of referred students. Examples of these instruments include and may not be limited to: Comprehensive Health Assessment Tool (CHAT), Connor’s Rating Scales, the Behavioral Assessment Scale for Children (BASC), and the Adaptive Behavior Assessment System (ABAS). Results of these screenings are shared as part of the SWST planning and discussions.

Data collection, monitoring, and tracking are part of the SWST process. Data collection is implemented via SWST notes, which are completed for students discussed and referred for socio emotional needs. In addition, Duty to Inform and Threat Assessments are documents in the Student Information System (SIS). Spreadsheets are maintained for students referred for Mental Health Counseling and all students receiving in-house mental health services. Any full psychological evaluations completed by the School Psychologist will be placed in the student’s cumulative file and a copy will be provided to the parent/guardian.

The School Psychologist is responsible for:

- The number of students referred to school-based mental health services.
- The number of students referred to community based mental health service providers.
- The number of students who receive school-based interventions, services, and assistance.
- The number of students who received community-based interventions, services or assistance.

**Table 1. Program Implementation**

<b>EPB and Description</b>	<b>EPB Implementation</b>	<b>Outcome Measures</b>	<b>MTSS</b>
<i>Second Step</i> Middle School Edition (Grades 6-8) bundle with Principal Toolkit	Educators reinforce social-emotional skills school-wide. Principal Toolkit uses assembly and announcement scripts, staff meeting agendas, and other tools to reinforce skills and encourage positive behavior.	Improve behavior management and social/emotional skills- Measured by teacher report and parent input. Reviewed at School Wide Support Team meetings as needed.	Tier 1
<i>Cultures of Dignity</i>	Works with parents, educators, and young people to successfully navigate the social challenges of young adulthood.	This program empowers young people to create cultures of dignity, understand their emotions, and build essential skills.	Tier 1
<i>Teaching Tolerance</i>	Bullying awareness, tolerance, making a difference, and creating a community in the classroom.	Promotes critical thinking, increase self and social awareness, change attitudes, and incites action.	Tier 1
<i>Social Decision-Making</i>	To teach children social/ decision making skills they need to be able to make sound decisions,	Improve decision making skills- Measured by teacher	Tier 1



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Curriculum (K-8th grade)	pursue healthy life choices, and avoid the serious social problems of our day such as bullying, substance abuse, violence, and academic failure.	report and parent input. Reviewed at School Wide Support Team meetings as needed.	
<i>Character Strong</i> curricula	Implemented by classroom teachers- focus on character development in order to help students cultivate social-emotional skills, their emotional intelligence, and help them develop a stronger identity and purpose in school and in the world.	Improve emotional intelligence- Measured by teacher report and parent input. Reviewed at School Wide Support Team meetings as needed.	Tier 1
Development of evidence-based prevention policies and practices and student clubs	Prevention programs - Curriculum imbedded in Operation Prevention (a comprehensive, science-based program for ages 8-18 to address substance abuse), Suicide Prevention (Youth Suicide and Self-Harm Prevention: 2017 Resource Guide), Anti-Bullying, Peer Mentor program, Digital Citizenship and school-wide Renaissance Program.	Improve social emotional skills and peer interactions- Measured by teacher report and parent input. Reviewed at School Wide Support Team meetings as needed.	Tier 1
Substance Abuse Prevention presentations	Provided by the School Guardian in conjunction with Sarasota Sheriff's Department.	Lessen student use of controlled substances- Measured by teacher report and parent input. Reviewed at School Wide Support Team meetings as needed.	Tier 1
School Psychologist Virtual Office	Students may access the virtual office with a classroom link to include social and emotional lessons	Measured by teacher report and parent input. Reviewed at School Wide Support Team meetings as needed.	Tier 2
Assessment and interpretation of behavioral data to monitor response to intervention.  Development and monitoring of individual student behavior intervention plans	Implementation by the ESE Liaison, SWST, School Psychologist and classroom teachers	Tier 2 RTI data collected by the teachers using 0-3 behavior rating sheets.	Tier 2
Suicide risk/threat assessment	School Psychologist, or other mental health professional	Safety Plan	Tier 2
Protocols for responding to bullying	Principal, Guardian, or School Psychologist	Safety Plan	Tier 2
Psychological assessment of social, emotional, and behavioral problems	School Psychologist, CARE team	Specifically designed interventions, instructional support, and/ or accommodations.	Tier 2 and 3



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Direct therapeutic services to students (in-person or via telehealth)	Trauma focused cognitive-behavioral therapy, cognitive-behavioral therapy, behavior therapy, dialectal behavior therapy and BASC-FLEX	BASC-3/BASC BESS	Tier 3
Counseling As A Related Service as assigned on a student's IEP or 504 Plan	School Psychologist, or other mental health professional	BASC-3, Quarterly progress reports on IEP goals.	Tier 3
Suicide intervention and post-vention	School Psychologist, or other mental health professional	Safety Plan	Tier 3

**Section D: Direct Employment**

**Table 2. MHAA Plan Direct Employment**

<b>Position</b>	<b>Current Ratio as of August 1, 2021</b>	<b>2021-2022 Proposed Ratio by June 30, 2022</b>
School Psychologist	3:315	3:315

**Direct employment policy, roles and responsibilities:**

<b>Psychologist</b>	<b>SLA has one school-based psychologist to serve the school and its students in different capacities.</b>
<b>T I E R  1</b>	<ul style="list-style-type: none"> <li>• Participate in the design and implementation of behavior curricula.</li> <li>• Lead teams in designing and implementing school-wide universal screening systems and using this data to guide core instruction and to help identify students at-risk.</li> <li>• Collaborate with family members and other professionals who support students with academic and behavioral challenges.</li> <li>• Advocate for the mental health needs of all students by leading efforts to incorporate regular instruction and progress monitoring (routine checks of student proficiency during the instructional year to verify growth)</li> <li>• Classroom observations</li> </ul>
<b>T I E R  2</b>	<ul style="list-style-type: none"> <li>• Assists teachers and school teams in selecting evidence- based interventions and progress monitoring tools matched to student behavioral and mental health needs.</li> <li>• Supports regular progress monitoring and data reviews, including reviews of treatment integrity for behavior and mental health.</li> <li>• Consults with teachers and other school staff to boost understanding and interpretation of progress data to determine if students are making adequate progress and whether intervention changes are needed.</li> <li>• Leads small-group interventions to support students' social skills and mental health (NASP, 2015b)</li> </ul>



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	<ul style="list-style-type: none"> <li>• Conducts threat assessments and suicidal ideation/self-harm assessments, referrals for community services and resources.</li> </ul>
<b>T I E R  3</b>	<ul style="list-style-type: none"> <li>• Participates in functional behavior and academic assessments to customize individual plans for students’ interfering behaviors and development of appropriate behaviors and academic skills.</li> <li>• Assists school teams in selecting evidence-based interventions that align to the intensive needs of specific students.</li> <li>• Examines the systems that influence the development of individual students to support better alignment with student development and needs.</li> <li>• Provides individualized counseling and therapy for students with intensive mental health needs.</li> <li>• Collaborates with parents and school teams as part of the frequent review and interpretation of Tier 3 data to determine whether a student should be referred for a comprehensive evaluation.</li> <li>• Conduct threat assessments and suicidal ideation/self-harm assessments, referrals for community services and resources</li> </ul>

**Table 3. MHAA Plan Contracts or Interagency Agreements and Services Provided**

<b>Mental Health Provider</b>	<b>Agency</b>	<b>Services Provided</b>	<b>Funding Source</b>
Dr. Stacie Herrera	Herrera Psychology	Licensed Psychologist: Psychological services including but not limited to individual counseling, assessment, and treatment planning.	Mental Health Allocation
Courtney Lombard	Telement	LCSW: Individual Counseling (Virtual)	Mental Health Allocation
Ethan Weiss	Telement	LCSW: Individual Counseling (Virtual)	Mental Health Allocation
Lisa Singeisen	Telement	LCSW: Individual Counseling (Virtual)	Mental Health Allocation

**SLA’s Threat and Mental Health Assessment Team includes:**

- School Psychologist
- School Administrators
- School Guardian



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- Sarasota County Sheriff's Officer
- ESE Liaison & Gifted Specialist (as appropriate)
- County Health Nurse (as appropriate)

### **Our school has community partnerships with the following resources to provide free universal interventions:**

- Jewish Family and Children Services (JFCS) for individual counseling
- YMCA and CINS/FINS for individual counseling.
- Teen Court for individual and group counseling.
- SPARCC (Safe Place and Rape Crisis Center) for universal prevention of unhealthy and abusive relationships. Topics include gender roles, social media, internet safety, bullying, bystanders, upstanders, and healthy self-image is presented.
- Child Protection Center topics include gender roles, social media, internet safety, bullying, bystanders, upstanders, and healthy self-image.
- National Alliance on Mental Illness (NAMI) for mental health awareness.
- CRISIS TEXT LINE (741741) posters throughout the campus.
- Fortify app to allow all students and teachers to report concerns.

### **Our school also has community partnerships with the following agencies to provide staff with training and tools:**

- *Trauma Informed Care* professional development course offerings through the Sarasota County School District.
- School Psychologist receives training and ongoing support for *Gatekeeper Protocol* for self-harm and suicidal ideation through the Sarasota County School District.
- Sandy Hook Threat Assessment and *See Something, Say Something* training provided to School Guardian, School Psychologist, and members of the Threat Assessment Team.



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***Section E: Planned Expenditures***

**Table 4. MHAA Planned Expenditures**

<b>Allocation Expenditure Summary</b>	<b>Total</b>
Unexpended Mental Health Assistance Allocation funds from previous fiscal years:	\$0.00
SLA expenditures for mental health services provided by staff who are employees of SLA:	\$65,000.00
SLA expenditures for mental health services provided by contract-based collaborative partnerships with community-based mental health program agencies or providers:	\$10,000.00
Other expenditures (see below):	\$3,000.00
<b>Total MHAA expenditures:</b>	<b>\$78,000.00</b>

**Other expenditures explained:**

School Psychology contract services provided by:  
 Stacie M. Herrera, Psy.D.  
 Herrera Psychology, PLLC  
 Florida License #SS 1255

LCSW Telehealth (virtual therapy) contract services provided by:  
 Telement  
 2143 S. Tamiami Trail  
 Osprey, FL 34229

SEL:  
 Second Step  
 2815 Second Ave., Suite 400  
 Seattle, WA 98121

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. Allocation also provides for BASC-3, SEL curriculum, prevention materials, and contracted school psychology and behavioral services.

SLA will maintain fidelity to the Mental Health Plan and Assistance Allocation funding rules. The Mental Health Assistance Allocation does not supplant other funding sources, nor does it increase salaries or provide bonuses.

Other funding sources include, but are not limited to General Revenue finds, Title IV, Title I, and the Individuals with Disabilities Act (IDEA) grant. In addition, the school will seek out grant funding when appropriate and available. Medicaid reimbursement will be sought when available to charter schools. Grants will be pursued to purchase SEL curriculum and prevention materials.



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**School Certification**

This application certifies that the school’s Board of Directors approved the Student Leadership Academy’s 2021-2022 Mental Health Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with statutory requirements for the mental health assistance allocation in accordance with Section 1101.62 (16), F.S.

**MSID# 0102, Student Leadership Academy**

\_\_\_\_\_  
Signature of Governing Board President

\_\_\_\_\_  
Printed Name of Governing Board President

\_\_\_\_\_  
Date

**District Certification**

This application certifies that the Sarasota County School Board approved The Student Leadership Academy’s 2021-2022 Mental Health Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with statutory requirements for the mental health assistance allocation in accordance with Section 1101.62 (16), F.S.

**MSID# 0102, Student Leadership Academy**

\_\_\_\_\_  
Signature of District Superintendent

\_\_\_\_\_  
Printed Name of District Superintendent

\_\_\_\_\_  
Date