

The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA
APPROPRIATIONS SUBCOMMITTEE ON EDUCATION
Senator Stargel, Chair
Senator Diaz, Vice Chair

MEETING DATE: Wednesday, January 23, 2019
TIME: 1:30—3:00 p.m.
PLACE: Pat Thomas Committee Room, 412 Knott Building

MEMBERS: Senator Stargel, Chair; Senator Diaz, Vice Chair; Senators Baxley, Book, Flores, Montford, Pizzo, and Simmons

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Overview of Mental Health Programs and Services in Public Schools		Discussed

Other Related Meeting Documents



Florida's Mental Health Systems of Support

Jacob Oliva, Vice Chancellor of Public Schools
Senate Appropriations Subcommittee on Education
January 23, 2019



FLORIDA DEPARTMENT OF
EDUCATION
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Prevalence of Youth Mental Health Disorders

- Approximately 46% of children under age 18 have experienced some type of trauma (Childhood Adolescent Health Measurement Initiative, 2016).
- Approximately 20% of school-age children and youth have a diagnosable mental health disorder (Center for Disease Control, 2013).
- Prevalence of serious emotional disturbance with severe impairment among children and adolescents – 10% (Williams et al., 2017).
- The majority of mental illnesses emerge in childhood, yet fewer than half of all children receive treatment.

Why School-Based Mental Health?

- Mental and psychological wellness are integral to school success.
- School mental health services are essential to creating and sustaining safe schools and supporting engaged learners.
- School-employed mental health professionals are trained to provide services in educational settings.
- Correlation between adverse childhood experiences (ACEs) and students' academic and health outcomes (absenteeism, learning, grade repetition and student engagement).

Multi-Tiered System of Support (MTSS) and System of Care

- The multi-tiered system is a continuum of supports and interventions that increase in intensity based on student need.
- School-based mental health providers (i.e., school counselors, school psychologists, school social workers) are specially trained to infuse mental health prevention and intervention in the learning process.
- System of care is a collaborative network of services and supports to help children with serious emotional disturbance be successful at home, school, and in the community.
- What does it look like when school and community services and supports work in unison?

A Comprehensive, Multifaceted, and Integrated Approach to Addressing Barriers to Learning and Promoting Healthy Development

School Resources

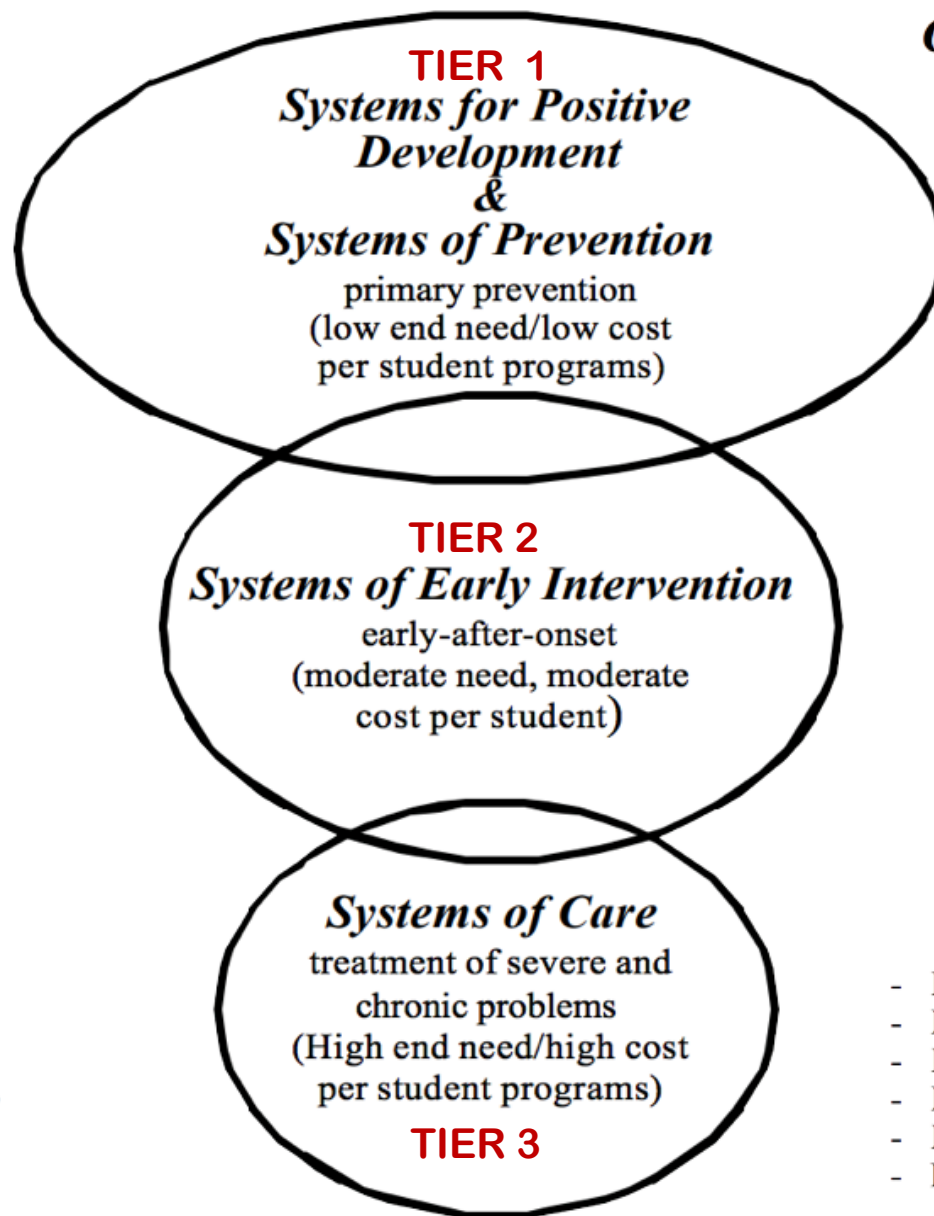
(facilities, stakeholders, programs, services)

Examples:

- Enrichment & recreation
- General health education
- Promotion of social and emotional development
- Drug and alcohol education
- Support for transitions
- Conflict resolution
- Parent involvement

- Pregnancy prevention
- Violence prevention
- Dropout prevention
- Learning/behavior accommodations
- Work programs

- Special education for learning disabilities, emotional disturbance, and other health impairments



Community Resources

(facilities, stakeholders, programs, services)

Examples:

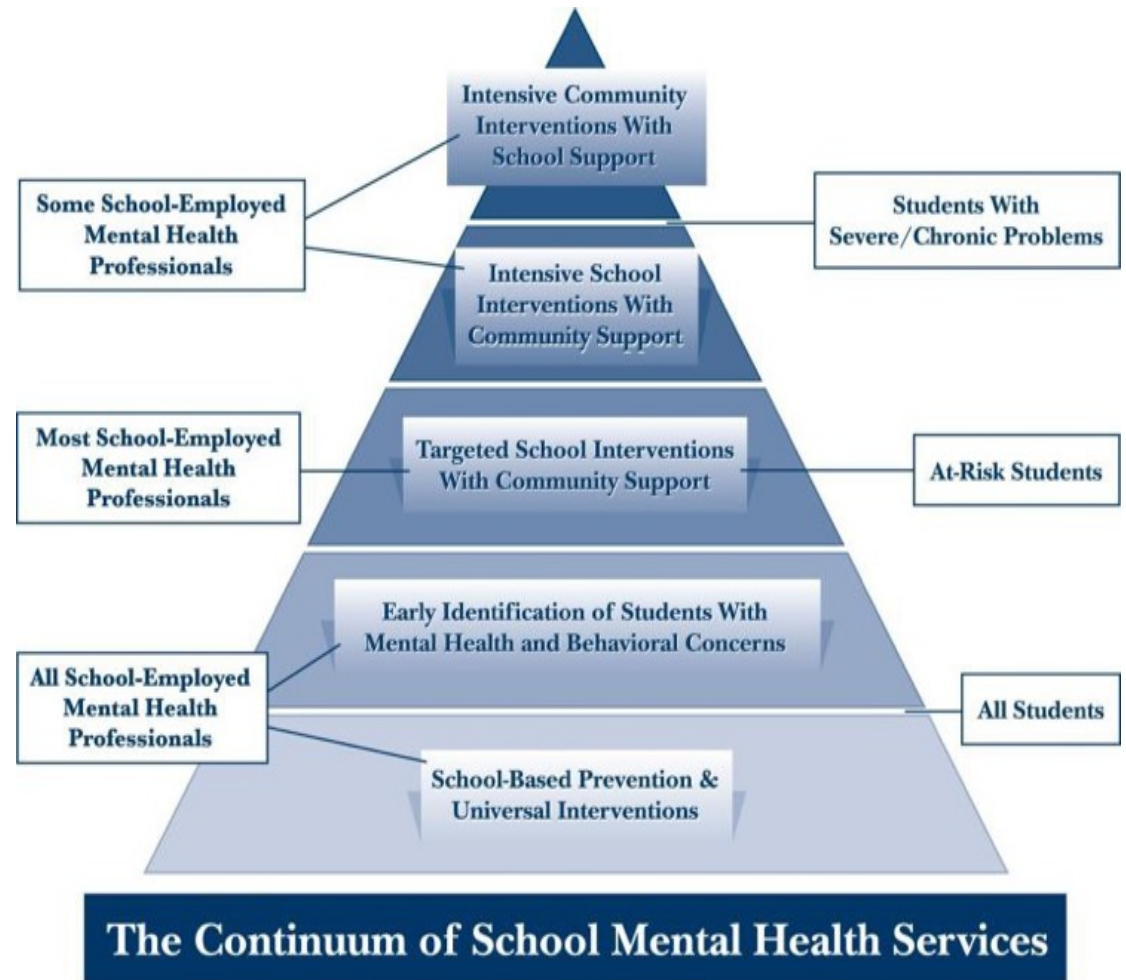
- Youth development programs
- Public health & safety programs
- Prenatal care
- Immunizations
- Recreation & enrichment
- Child abuse education

- Early identification to treat health problems
- Monitoring health problems
- Short-term counseling
- Foster placement/group homes
- Family support
- Shelter, food, clothing
- Job programs

- Emergency/crisis treatment
- Family preservation
- Long-term therapy
- Probation/incarceration
- Disabilities programs
- Hospitalization

Comprehensive School Mental Health

- The Multi Tiered System of Support provides a continuum of supports for all students, including students with intense needs.
- The System of Care supports children, youth, and families with the most intense needs (Tier 3).
- Comprehensive School Mental Health services are built on partnerships between schools and community resources (e.g., community mental health centers, hospitals, universities).



Adapted from "Communication Planning and Message Development: Promoting School-Based Mental Health Services" in *Communication*, Vol. 35, No. 1. National Association of School Psychologists, 2006.

The Multiagency Network for Students with Emotional/Behavioral Disabilities (SEDNET)

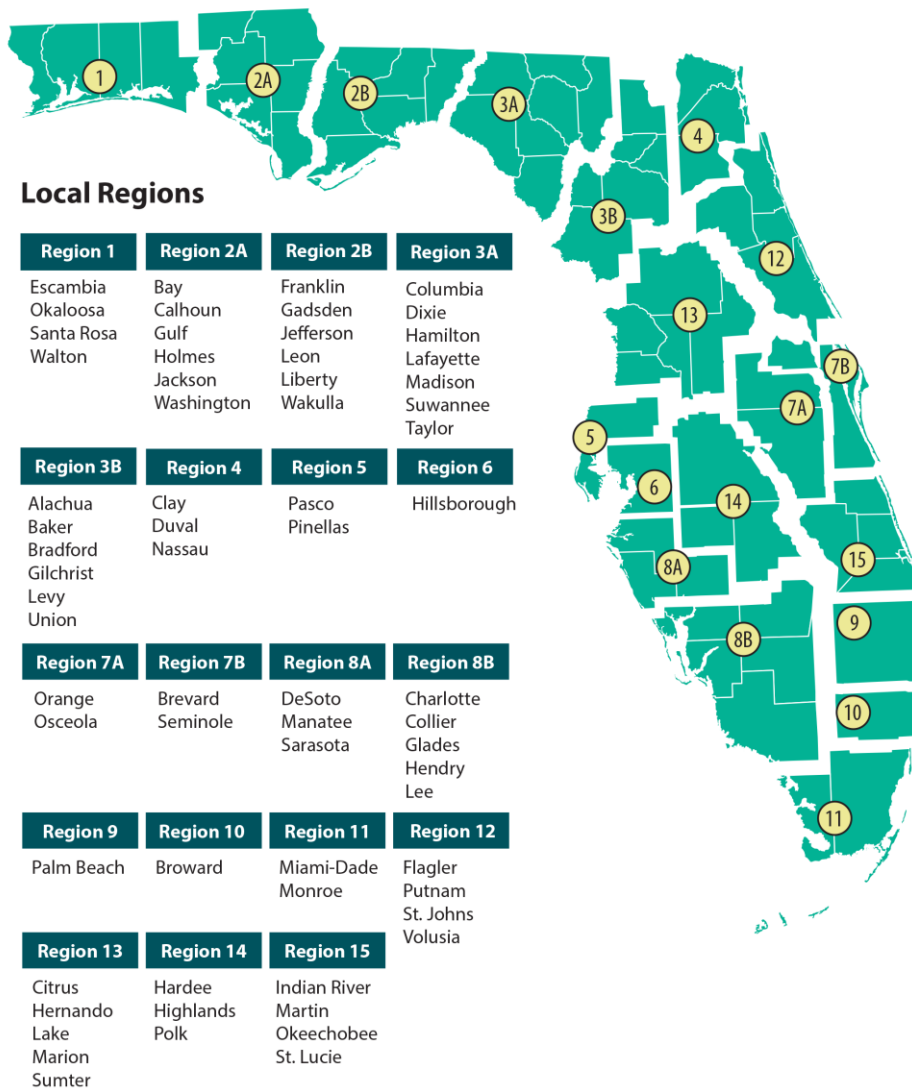
The multiagency network for students with emotional and behavioral disabilities works with education, mental health, child welfare, and juvenile justice professionals, along with other agencies and families, to provide children with mental illness or emotional and behavioral problems and their families with access to the services and supports they need to succeed.

Section 1006.04, F.S.

The Multiagency Network for Students with Emotional/Behavioral Disabilities (SEDNET)

- SEDNET is a regional network of the major child serving agencies, community-based service providers, and students and their families, focused on developing interagency collaboration and sustaining partnerships:
 - Education
 - Mental Health
 - Substance Abuse
 - Juvenile Justice
 - Child Welfare
 - Families and Youth

Florida Department of Education SEDNET Regions



SEDNET Projects Assisted Districts in the:

- Facilitation of Youth Mental Health First Aid training and needs assessments
- Identifying community mental health supports and processes
- Consulting:
 - Creating MOUs with community mental health providers
 - Increasing school-based mental health supports

SEDNET collaborates with:

- Community Action Teams
- Local System of Care
- Mobile Crisis Teams
- Managing Entities
- Community Mental Health Partners

Local Review Teams

- SEDNET Projects represent students with emotional/behavioral disabilities and their families within the Region in accessing wrap around services and problem solving individual needs at local review team meeting created by the Interagency Agreement.

PROCESS FRAMEWORK



AGENCY/SCHOOL REVIEW PROCESS

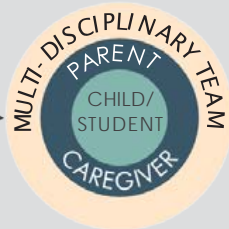
Agency/School Review Teams Working for Resolution of Child/Student Needs

INTERAGENCY REVIEW PROCESS

Local, Regional and State Review Teams Working for Resolution of Child/Student Needs



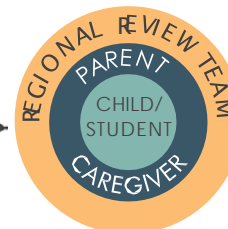
If unable to resolve, seek assistance from **Multi-Disciplinary Team**



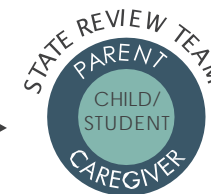
If unable to resolve, seek assistance through formal request to **Local Review Team**



If unable to resolve, seek assistance through formal request to **Regional Review Team**



If unable to resolve, seek assistance through formal request to **State Review Team**



If unable to resolve, **agency executive management** will be notified and will continue to work collaboratively for resolution

LOCAL REVIEW TEAM

Local agency, SEDNET Project Mgr, School Rep, & contractors/providers, as appropriate

REGIONAL REVIEW TEAM

Regional agency, SEDNET Administration, School District Rep, & contractors/providers, as appropriate

STATE REVIEW TEAM

State agency leadership, FL Children & Youth Cabinet Reps., & other state level stakeholders, as appropriate



Each Review Team communicates information/resolution **back** to all involved stakeholders



Florida Children's Mental Health System of Care

*John N. Bryant, Assistant Secretary
for Substance Abuse and Mental Health*

Senate Appropriations Subcommittee on Education
January 23, 2019

Overview

- Department of Children and Families role on community based children's mental health services
 - System of Care – Chap 394, F.S.
 - DCF/DOE Collaboration
 - Managing Entities (ME)/SEDNET
- Update on programs and services funded as a result of SB 7026
 - Community Action Treatment (CAT) Teams
 - Mobile Response Teams



Department of Children and Families' System of Care

- Authority: s. 394.491, F.S.
 - Guiding Principles:
 - Based on Child and Adolescent Service System Program (CASSP) (In 1984, Congress appropriated funds for CASSP, envisioned as a comprehensive mental health system of care for children, adolescents, and their families.)
 - Centered on the needs and strengths of the child or adolescent and their family
 - Parents/caregivers as active participants
 - Timely access to a comprehensive array of cost effective mental health treatment and support services
 - Individualized and developmentally appropriate
 - Least restrictive
 - Support and strengthen families
 - Services are integrated into community and coordinated



Children and Adolescents Served by DCF-Funded Providers

	At-Risk	Emotionally-Disturbed (ED)	Severely Emotionally Disturbed(SED)
FY 2015-16	1,170	15,636	20,677
FY 2016-17	19,368	31,761	19,890
FY 2017-18	20,002	34,154	22,727



What is System of Care (SOC)?

System of Care is:

- A comprehensive network of community-based services
- Supports organized to meet the needs of youth and families
- Inclusive of multiple child service agencies

The goal is:

- For families and youth to work in partnership with public and private organizations.
- To ensure supports are effective, culturally and linguistically competent, and built on the individual's strengths and needs.



Outcomes of the SOC Approach

When children and youth are served within a system of care approach:

- Improvement in functioning;
- Improvement in educational outcomes;
- Reduction in anxiety and depression;
- Reduction in contact with law enforcement;
- Reduction in suicidal thoughts and attempts; and
- Reduction in average number of days in inpatient hospital setting.



SOC Community Partners

- Community buy-in and coordination
- Partners at all levels include but are not limited to:
 - DCF Substance Abuse and Mental Health
 - DCF Child Welfare
 - Managing Entities
 - Schools
 - SEDNET
 - Medicaid Managed Care Organizations
 - Department of Juvenile Justice
 - Community Service Providers
 - Family-Run Organizations
 - Youth-Run Organizations
 - Family Members
 - Local Governments
 - Children’s Services Boards
 - Other Stakeholders



CAT Teams Overview

- Funding
 - Between FY 2013-14 and FY 2017-18, the Legislature funded 26 CAT Teams.
 - In FY 2018-19 the Legislature allocated \$9.8M to competitively procure 13 additional CAT Teams.
 - Currently, there are 41 CAT Teams in all six DCF regions covering all counties.



New CAT Teams Implementation Update – SB 7026

Region	Counties Served	Provider	Operational
Northwest	Santa Rosa	Lakeview Center	September 2018
	Holmes/Washington/Jackson	Life Management Center	November 2018
	Calhoun/Gulf	Life Management Center	November 2018
	Liberty/Franklin	Apalachee Center	November 2018
	Madison/Jefferson/Taylor	Apalachee Center	October 2018
Northeast	Flagler/Volusia	Halifax Health	July 2018
	Bradford/Baker/Union/Nassau	Meridian Behavioral Health	September 2018
	St. Johns	St. Augustine Youth Services	July 2018
	Gilchrist/Levy/Dixie	Meridian Behavioral Health	September 2018
	Citrus/Hernando	LifeStream Behavioral Center	December 2018
Central	Osceola	Aspire Health Partners	September 2018
	Seminole	Aspire Health Partners	September 2018
SunCoast	Glades/Hendry	Centerstone	November 2018
Southern	Monroe	Guidance Care Center	October 2018



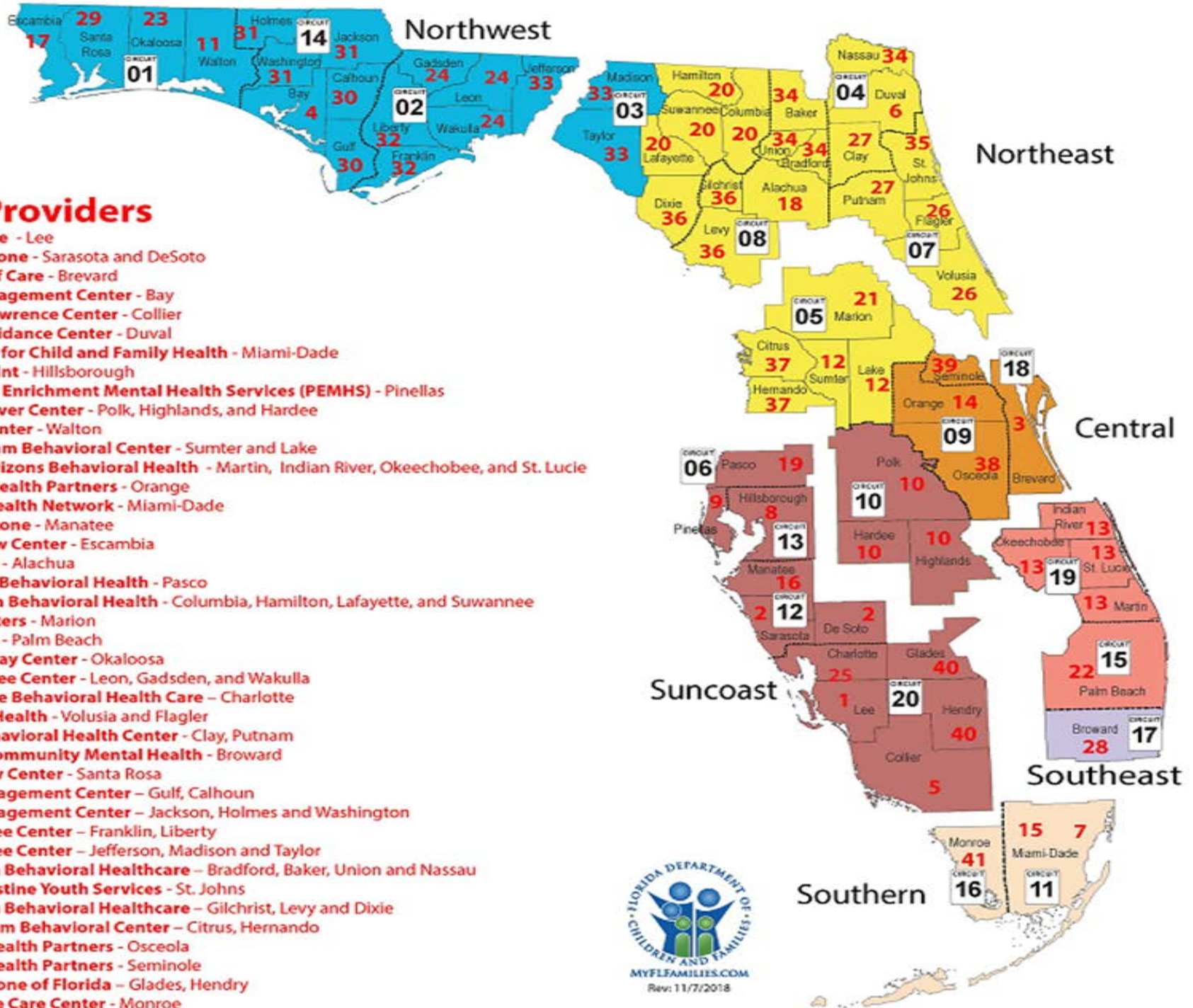
CAT Program Goals

CAT is intended to be a safe and effective alternative to out-of-home placement for children with serious behavioral health disorders. The goals of the CAT program are to:

1. Strengthen the family and support systems for youth and young adults to assist them to live successfully in the community;
2. Improve school related outcomes such as attendance, grades, and graduation rates;
3. Decrease out-of-home placements;
4. Improve family and youth functioning;
5. Decrease substance use and abuse;
6. Decrease psychiatric hospitalizations;
7. Transition into age appropriate services; and
8. Increase health and wellness.



SAMH Community Action Treatment (CAT) Teams



CAT Providers

1. SalusCare - Lee
2. Centerstone - Sarasota and DeSoto
3. Circles of Care - Brevard
4. Life Management Center - Bay
5. David Lawrence Center - Collier
6. Child Guidance Center - Duval
7. Institute for Child and Family Health - Miami-Dade
8. Gracepoint - Hillsborough
9. Personal Enrichment Mental Health Services (PEMHS) - Pinellas
10. Peace River Center - Polk, Highlands, and Hardee
11. COPE Center - Walton
12. Lifestream Behavioral Center - Sumter and Lake
13. New Horizons Behavioral Health - Martin, Indian River, Okeechobee, and St. Lucie
14. Aspire Health Partners - Orange
15. Citrus Health Network - Miami-Dade
16. Centerstone - Manatee
17. Lakeview Center - Escambia
18. Sinfonia - Alachua
19. Baycare Behavioral Health - Pasco
20. Meridian Behavioral Health - Columbia, Hamilton, Lafayette, and Suwannee
21. The Centers - Marion
22. Sinfonia - Palm Beach
23. Bridgeway Center - Okaloosa
24. Apalachee Center - Leon, Gadsden, and Wakulla
25. Charlotte Behavioral Health Care - Charlotte
26. Halifax Health - Volusia and Flagler
27. Clay Behavioral Health Center - Clay, Putnam
28. Smith Community Mental Health - Broward
29. Lakeview Center - Santa Rosa
30. Life Management Center - Gulf, Calhoun
31. Life Management Center - Jackson, Holmes and Washington
32. Apalachee Center - Franklin, Liberty
33. Apalachee Center - Jefferson, Madison and Taylor
34. Meridian Behavioral Healthcare - Bradford, Baker, Union and Nassau
35. St. Augustine Youth Services - St. Johns
36. Meridian Behavioral Healthcare - Gilchrist, Levy and Dixie
37. LifeStream Behavioral Center - Citrus, Hernando
38. Aspire Health Partners - Osceola
39. Aspire Health Partners - Seminole
40. Centerstone of Florida - Glades, Hendry
41. Guidance Care Center - Monroe



Mobile Response Teams (MRTs) - Vision

Access to MRT services will reduce inpatient hospitalizations, provide linkage to community-based services, and facilitate warm hand-offs to service providers.



Mobile Response Teams Requirements

- All MRT providers must:
 - Ensure reasonable access to services among all counties in the MEs region;
 - Be available 24 hours per day, seven days per week with on-site response time to the location of referred crises within 60 minutes of the request for services;
 - Establish formalized written agreements to establish response protocols with local law enforcement agencies and local school districts or superintendents;
 - Ensure access to a board-certified or board-eligible Psychiatrist or Psychiatric Nurse Practitioner; and
 - Provide for an array of crisis response services that are responsive to the individual and family needs.



Mobile Response Teams Services

- MRTs provide readily available crisis care in a community-based setting.
- Increase opportunities to stabilize individuals in the least restrictive setting to avoid the need for jail or hospital/emergency department utilization.
- These services are contracted by the MEs and provide services to those age 25 and younger.



Mobile Response Teams Implementation

- The MEs have contracted with providers for 32 MRTs across the state, with statewide access to this service.
- 11 MRTs were providing services by January 1, 2019; the remaining 21 are anticipated to be providing services by March 1, 2019.



Collaborative Multi-System Action Plan

- Services
 - CAT and MRT services have been authorized, funded, and procured, and are accepting clients or will be by mid-February 2019.
 - Strong collaborative approach involving DOE, DCF, school superintendents, school districts, MEs, and community agencies in improving access to care.



Collaborative Multi-System Action Plan

- Partners
 - DOE
 - DCF
 - Individual School Districts
 - Managing Entities/SEDNET
- Formal collaborative arrangements by the ME district/circuit under the SEDNET umbrella
- Assessment of Where We Are
- Assessment of What We Need
- Circuit Action Plans
- Establish a method of work that improves access to services



Questions?



FLORIDA DEPARTMENT
OF CHILDREN AND FAMILIES
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THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

1/23/2019

Meeting Date

Bill Number (if applicable)

Topic Overview of Mental Health Programs and Services in Public Schools

Amendment Barcode (if applicable)

Name Nickie Zenn

Job Title Executive Director

Address 140 7th Avenue South, SVB 112

Phone 727-873-4874

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Email nzenn@usfsp.edu

City

State

Zip

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing SEDNET FLDOE BEESS

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

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1-23-19
Meeting Date

Bill Number (if applicable)

Topic _____

Amendment Barcode (if applicable)

Name John Bryant

Job Title Asst. Secretary

Address 1317 Wine wood Blvd
Street

Phone 850-717-4417

TALL FLA
City State Zip

Email John.Bryant@myflfamilies.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Dept of Children & Families

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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THE FLORIDA SENATE
APPEARANCE RECORD

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Tuesday, January 23, 2019

Meeting Date

Bill Number (if applicable)

Topic Mental Health Systems of Support

Amendment Barcode (if applicable)

Name Jacob Oliva

Job Title Vice Chancellor of Public Schools

Address 325 W. Gaines St.

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Email _____

City

State

Zip

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Department of Education

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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S-001 (10/14/14)

CourtSmart Tag Report

Room: KN 412 Case No.:
Caption: Senate Appropriations Subcommittee on Education

Type:
Judge:

Started: 1/23/2019 1:34:00 PM
Ends: 1/23/2019 3:00:13 PM Length: 01:26:14

1:33:59 PM	Sen. Stargel (Chair)
1:34:30 PM	TAB 1 - Overview of Mental Health Programs and Services in Public Schools
1:37:02 PM	Jacob Oliva, Vice Chancellor of Public Schools, Dept. of Education
1:41:08 PM	Sen. Book
1:41:43 PM	J. Oliva
1:42:06 PM	John Bryant, Assistant Secretary for Substance Abuse and Mental Health, Dept. of Children and Families
1:43:44 PM	Sen. Book
1:44:28 PM	J. Bryant
1:44:38 PM	Sen. Montford
1:45:46 PM	J. Oliva
1:46:06 PM	Sen. Montford
1:46:18 PM	J. Oliva
1:46:25 PM	Sen. Montford
1:46:45 PM	J. Oliva
1:47:09 PM	Sen. Montford
1:47:50 PM	J. Oliva
1:48:08 PM	Sen. Montford
1:48:19 PM	Sen. Book
1:48:52 PM	J. Oliva
1:49:20 PM	Sen. Book
1:49:46 PM	Nickie Zenn, Statewide Director, SEDNET Administration Project
1:50:02 PM	Sen. Book
1:50:21 PM	N. Zenn
1:50:57 PM	Sen. Stargel
1:51:06 PM	N. Zenn
1:56:37 PM	Sen. Book
1:57:23 PM	N. Zenn
1:58:27 PM	Sen. Book
1:59:27 PM	Sen. Stargel
1:59:37 PM	N. Zenn
2:00:42 PM	Sen. Book
2:02:00 PM	Sen. Stargel
2:03:07 PM	J. Oliva
2:04:09 PM	Sen. Stargel
2:04:20 PM	J. Oliva
2:05:34 PM	Sen. Diaz
2:06:58 PM	J. Bryant
2:09:34 PM	Sen. Diaz
2:11:12 PM	N. Zenn
2:13:05 PM	Sen. Diaz
2:13:46 PM	J. Oliva
2:13:58 PM	Sen. Book
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2:16:46 PM	Sen. Stargel
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2:19:16 PM	Sen. Montford
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2:53:15 PM	Sen. Simmons
2:59:24 PM	Sen. Stargel