

AGENDA

SPECIAL SCHOOL BOARD MEETING

GADSDEN COUNTY SCHOOL BOARD
MAX D. WALKER ADMINISTRATION BUILDING
35 MARTIN LUTHER KING, JR. BLVD.
QUINCY, FLORIDA

August 2, 2016

6:00 P.M.

THIS MEETING IS OPEN TO THE PUBLIC

1. Call to order

2. AGREEMENTS/CONTRACTS

a. Capital Health Plan Insurance Rates 2016 – 2017 – **SEE PAGE #2**

Fund Source: General Fund

Amount: See Attached Rate Sheet

ACTION REQUESTED: The Superintendent recommends approval.

b. Agreement for Professional Clinical Services with Florida State University College of Medicine – **SEE PAGE #9**

Fund Source: N/A

Amount: N/A

ACTION REQUESTED: The Superintendent recommends approval.

3. School Board Requests and Concerns

4. Adjournment

SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

AGENDA ITEM NO. 2a

DATE OF SCHOOL BOARD MEETING: 8/2/2016

TITLE OF AGENDA ITEMS: Capital Health Plan Insurance Rates 2016-2017

DIVISION: Finance Department

PURPOSE AND SUMMARY OF ITEMS:

This is for the board to approve the 2016-2017 Capital Health Plan Insurance Rates

FUND SOURCE: General Fund

AMOUNT: See attached rate sheet

PREPARED BY: LaClarence Mays

POSITION: Budget Director



June 24, 2016

Craig McMillan
Pat Thomas Agency

Dear Craig:

We are pleased to submit the 2016 Capital Health Plan renewal rates for the employees of Gadsden County School District. These rates are effective October 1, 2016. The renewal rates do not include any of these changes listed below if enacted after the date of this letter and the effective date:

- 1) Changes from the associated plan designs previously provided
- 2) Changes mandated or made available by State and Federal Regulations
- 3) Changes in eligibility
- 4) Changes in the Anniversary Date
- 5) Significant changes in Demographics (15% or more)

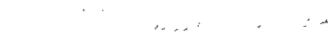
The following are the renewal rates for the current plan option and an alternate plan. These rates continue to reflect costs well below national trends.

Capital Health Plan	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family	Rate Increase
Current Plan Capital Selection \$15/\$30/\$100 Rx	\$552.51	\$1,105.45	\$939.36	\$1,602.45	8.7%
Current Plan Value Plan \$15/\$50/\$100 Rx	\$395.14	\$790.59	\$671.80	\$1,146.03	8.4%
Alternate Plan Capital Selection \$15/\$50/\$100	\$542.48	\$1,085.39	\$922.30	\$1,573.36	6.7%
Alternate Plan Principal Choice \$15/\$50/\$100	\$530.41	\$1,061.24	\$901.78	\$1,538.35	4.3%

Craig McMillan
Page 2

Capital Health Plan has partnered with Gadsden County School District to meet the health care needs of its employees and their families for almost 21 years. CHP considers Gadsden County School District to be a key business partner and take seriously our responsibility to manage its employee health benefits and administrative needs. Capital Health Plan will continue to devote experienced staff to the Gadsden County School District account to ensure a high level of service and responsiveness. We appreciate this partnership and look forward to continuing our relationship.

Sincerely,


Deborah J. Sisk
Sales Account Executive

Gadsden School Board CHP 2016-2017 Rates

	#	Current	Emp Cost		BD Cost	
Emp	609	\$508.44	\$127.11		\$381.33	
Emp+Sp	33	\$1,017.28	\$635.95		\$381.33	
Emp+Ch	54	\$864.43	\$483.10		\$381.33	
Emp+Fam	4	\$1,474.63	\$1,093.30		\$381.33	
Capital Select 15/30/50				Difference		Difference
Emp	609	\$552.51	\$138.13	[REDACTED]	\$414.38	\$33.05
Emp+Sp	33	\$1,105.45	\$691.07		\$414.38	\$33.05
Emp+Ch	54	\$939.36	\$524.98		\$414.38	\$33.05
Emp+Fam	4	\$1,602.45	\$1,188.07		\$414.38	\$33.05
Capital Select 15/50/100						
Emp	609	\$542.48	\$135.62	[REDACTED]	\$406.86	\$25.53
Emp+Sp	33	\$1,085.39	\$678.53		\$406.86	\$25.53
Emp+Ch	54	\$922.30	\$515.44		\$406.86	\$25.53
Emp+Fam	4	\$1,573.36	\$1,166.50		\$406.86	\$25.53
Principal Choice 15/50/100						
Emp	609	\$530.41	\$132.60	[REDACTED]	\$397.81	\$16.48
Emp+Sp	33	\$1,061.24	\$663.43		\$397.81	\$16.48
Emp+Ch	54	\$901.78	\$503.97		\$397.81	\$16.48
Emp+Fam	4	\$1,538.35	\$1,140.54		\$397.81	\$16.48

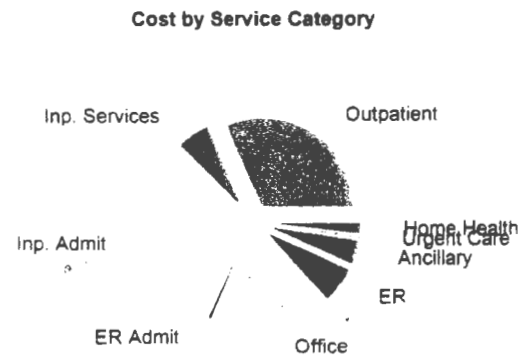
2016 Large Group Benefit Plans



Benefit Recommendation	Current			
	Capital Selection 15/30/50	Capital Selection 15/50/100	Principal Choice 15/50/100/100	Minimum Value Selection 15/50/100
Single Deductible	N/A	N/A	N/A	\$2,500.00
Family Deductible	N/A	N/A	N/A	\$5,000.00
Single MOOP 2016 limit = \$6,850	\$2,000/\$4,600	\$2,000/\$4,600	\$2,000 Medical /\$4,850 Rx	\$4,000 Medical / \$2,850 Rx
Family MOOP 2016 limit = \$13,700	\$4,500/\$8,700	\$4,500/\$8,700	\$4,500 Medical /\$9,200 Rx	\$8,500 Medical /\$5,200 Rx
Formulary Change	Prime's Accord Formulary	Prime's Accord Formulary	Prime's Accord Formulary	Prime's Accord Formulary
Primary Care Visit	\$15	\$15	\$15	\$15
Specialist Visit				
(All specialists including Chiropractors & OBs)	\$40	\$40	\$50	\$75
Mental/Behavioral Health & Substance Abuse Disorder Visits	\$40	\$40	\$50	\$75
Imaging (CT/PET Scans, MRIs)	\$100	\$100	\$150	\$250
Tier 1 drugs	\$15	\$15	\$15	\$15
Tier 2 drugs	\$30	\$50	\$50	\$50
Tier 3 drugs	\$50	\$100	\$100	\$100
Tier 4 drugs (specialty)	\$50	\$100	\$100	\$100
ASC	\$100	\$100	\$200	\$250
Outpatient hospital	\$250	\$250	\$350	\$500
ER (waived if admitted)	\$250	\$250	\$350	\$500
Ambulance	\$100	\$100	\$200	\$250
Urgent Care	\$25	\$25	\$50	\$50
Inpatient hospital (includes medical and MH/SH)	\$250	\$250	\$350	\$500
Rehabilitative Therapies (PT/OT/ST)	\$40	\$40	\$50	\$75
Routine Eye Exam (CHP Eye Care centers)	\$15	\$15	\$15	\$15
Telehealth	\$15	\$15	\$15	\$15
Rates				
Current	10/1/2016	10/1/2016	10/1/2016	10/1/2016
Emp -	\$508.44	\$552.51	\$542.48	\$395.14
Emp + Sp -	\$1017.28	\$1,105.45	\$1,085.39	\$790.59
Emp + Ch -	\$864.43	\$939.36	\$922.30	\$571.80
Emp + Fam -	\$1474.63	\$1,602.45	\$1,573.36	\$1,146.03
	8.70%	6.70%	4.30%	8.40%

Where are our group members receiving services?

Service Category	Count	CHP Cost	Avg Cost
Office Visits	3,160	\$485,306	\$154
Home Health	423	\$52,313	\$124
Urgent Care	143	\$16,811	\$118
Emergency Room	444	\$177,619	\$400
Emergency Room Admits	26	\$14,413	\$554
Outpatient Services	616	\$848,621	\$1,378
Inpatient Admits	49	\$814,776	\$16,628
Inpatient Services	356	\$164,497	\$462
Ancillary Services	1,091	\$117,517	\$108
Total	6,308	\$2,691,874	



This data displays the cost of healthcare under separate categories of where the services were provided. Comparing the services in association with the overall cost demonstrates how location can impact overall healthcare costs.

Multiple factors account for cost variation by location of service, including health plan contracting, intensity of service provided, and local practice pattern changes (ex. when procedures are shifted from inpatient to outpatient facilities or from outpatient facilities to the physician's office). Capital Health Plan continually reviews local practice patterns and national trends in order to promote and guide Members into the lowest-possible cost setting in which quality care can be delivered.

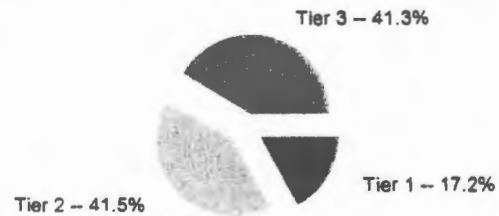
What is the fill rate by drug tier for our group members and how does that compare to Capital Health Plan?

Tier	Fills	% Fills	Cost	% Cost
Tier 1 drugs	8,106	84.7%	\$109,887	17.2%
Tier 2 Preferred drugs	840	8.8%	\$264,534	41.5%
Tier 3 Non-preferred drugs	626	6.5%	\$263,448	41.3%
Total	9,572	100.0%	\$638,219	100.0%

Portion of Fills for GADSDEN COUNTY SCHOOL BOARD



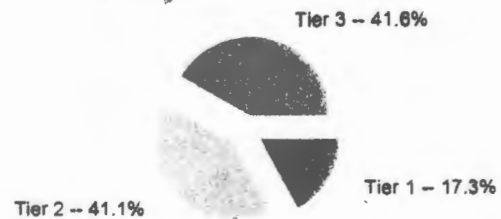
Portion of Cost for GADSDEN COUNTY SCHOOL BOARD



Portion of Fills for ALL CHP Groups



Portion of Cost for ALL CHP Groups



SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

AGENDA ITEM NO. 2b



DATE OF SCHOOL BOARD MEETING: August 2, 2016

TITLE OF AGENDA ITEM: Agreement for Professional Clinical Services with Florida State University College of Medicine

DIVISION:

 This is a CONTINUATION of a current project, grant, etc.

PURPOSE AND SUMMARY OF ITEM: Agreement for Professional Clinical Services between the Florida State University College of Medicine and the Gadsden County School Board

FUND SOURCE: N/A

AMOUNT: N/A

PREPARED BY: Caroline McKinnon

POSITION: District Assessment Coordinator

INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER

 Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered _____

CHAIRMAN'S SIGNATURE: page(s) numbered _____

REVIEWED BY: _____

AGREEMENT FOR PROFESSIONAL CLINICAL SERVICES

THIS AGREEMENT is made and entered into as of the last date written below by and between the Florida State University Board of Trustees, for and on behalf of The Florida State University and its College of Medicine ("University") and the School Board of Gadsden County, Florida ("School").

WHEREAS, University employs trained and qualified professionals ("Provider(s)") who are appropriately licensed and/or trained employees of University and available to provide certain professional clinical services to students at School as herein more fully described, and

WHEREAS, School desires to make such clinical services available to students in accordance with the terms of this Agreement, and

WHEREAS, the parties acknowledge that University's scientific and educational missions and programs will be advanced and enhanced through the cooperative efforts of University and School pursuant to this Agreement as a result of opportunities for its faculty, employees, and/or students to participate in educational and/or clinical experiences, patient care, and administrative responsibilities, and

WHEREAS, the parties acknowledge that School's educational mission and overall commitment to the health of its students will be advanced and enhanced through the cooperative efforts of University and School pursuant to this Agreement.

NOW, THEREFORE, in consideration of the foregoing, which is incorporated herein and made a part hereof, and the mutual obligations, promises, and covenants set forth in this Agreement, University and School agree as follows:

1. SERVICES. University shall make available at School the clinical services (hereinafter the "Clinical Services") described in Attachments A and B, attached hereto and made a part hereof, through its designated Providers. School agrees to provide such support as may be reasonably required, including the necessary clinical and/or educational space and facilities, and to assign support staff for the provision of the Clinical Services at the sole expense of School.

2. TERM. The term of this Agreement shall begin on the 1st day of August, 2016 and shall expire on the 31st day of July, 2017. At the conclusion of the initial term, the term of this Agreement may be extended by mutual written agreement.

3. FEES, EXPENSES AND PAYMENTS. School shall compensate University for the Clinical Services in the amount(s) set forth in Attachment A, Services / Scope of Work, attached hereto and made a part hereof.

4. UNIVERSITY CONTROL AND SUPERVISION. Throughout the term of this Agreement, University's Provider(s) providing Clinical Services pursuant to this Agreement

shall remain employees of University, subject to University policies and procedures and under University's exclusive supervision and control.

5. INDEPENDENT CONTRACTOR STATUS. Both University and School expressly intend that with regard to the provisions of this Agreement, they are independent contractors and neither shall receive any other benefits besides those expressly provided for herein. Further, it is the express intent of the parties hereto that no agent, servant, contractor, or employee assigned by University to fulfill its obligations described herein shall be deemed an agent, servant, contractor, or employee of School. Regardless of anything else contained in or implied from this Agreement, any employee of University who may be performing the services herein described shall remain an employee of University subject at all times to University's policies and procedures, and in no way shall such employee be deemed an employee of School. University assumes complete administrative and professional responsibility for University's employees, including the provision of workers' compensation and other employment related insurance as may be required from time to time by state or other law or regulation. While rendering services pursuant to this Agreement, all employees of University shall wear picture identification badges which shall clearly denote their employee status with University, and shall further identify themselves whenever appropriate to patients as University employees. School shall take reasonable steps to inform all students and/or patients of the employment or agency status of University employees, including those more fully set forth in paragraph 7 below.

6. PROFESSIONAL RESPONSIBILITY. Nothing in this Agreement shall be construed to interfere with or otherwise affect the rendering of Clinical Services by University hereunder in accordance with the Provider(s)'s independent and professional judgment and duty. This Agreement shall be subject to the rules and regulations of any and all professional organizations or associations to which University or its Provider(s) may from time to time belong and the laws and regulations governing said practice in jurisdictions and/or licensing bodies that govern the work of University.

7. MALPRACTICE INSURANCE. To the extent that the State of Florida, on behalf of the Board of Governors and the Florida State University Board of Trustees ("FSUBOT"), has partially waived its immunity to tort claims and is vicariously responsible for the negligent acts and omissions of its employees and agents as prescribed by Section 768.28, Florida Statutes, FSUBOT is protected for a claim or judgment by any one person in a sum not exceeding Two Hundred Thousand Dollars (\$200,000.00) and for total claims or judgments arising out of the same incident or occurrence in a total amount not exceeding Three Hundred Thousand Dollars (\$300,000.00), such protection being provided, as applicable, by the State Division of Risk Management, or the Florida State University College of Medicine Self-Insurance Program, created pursuant to the authority of Section 1004.24, Florida Statutes. Personnel and agents of FSUBOT are not individually subject to actions arising from their state functions. Any damages allocated against the FSUBOT as prescribed by Section 766.81, Florida Statutes, are not subject to reallocation under the doctrine of joint-and-several liability to codefendants of the FSUBOT in professional liability actions. The sole remedy available to a claimant to collect damages allocated to FSUBOT is as prescribed by Section 768.28, Florida Statutes. All liability protection described in this Section is on an "occurrence" basis. The Florida State University College of Medicine Self-Insurance Program provides ongoing protection with no expiration.

School shall maintain professional liability insurance coverage for School and its employees and agents in amounts consistent with that maintained by similar entities and shall provide evidence of such insurance coverage upon reasonable request of University.

University and School shall, to the maximum extent possible, fully cooperate in the defense of any claim or action involving medical care or treatment provided pursuant to this Agreement. Such cooperation shall include but not be limited to timely reporting to the other any such claim or action of which they become aware, timely providing relevant medical records and other documentation to the other at no expense to the other, and, to participate in such investigation and mutual defense as may be mutually advantageous.

8. REPORTING / LIAISON. For University, Daniel Van Durme, M.D., Associate Dean for Clinical and Community Affairs shall maintain ongoing liaison with School. For School, Caroline McKinnon, shall maintain ongoing liaison with University.

*9. TRAINING. School shall, at School's sole expense, provide such education and training as may be required for the Provider to provide Administrative / Clinical Services at School.

10. CONFIDENTIAL INFORMATION. (a) Information gathered by or provided to University and/or its Provider under this Agreement may be confidential in nature, and if that is the case, it shall be the sole property of the School. Except upon the prior written consent of School, neither University nor its Provider(s) shall use or disclose any confidential information gathered by or provided to University and/or its Faculty Provider(s) under this Agreement for any purpose not in conformity with applicable state and federal regulations. (b) University shall: i) only use or disclose Protected Health Information ("PHI"), as defined in the Health Insurance Portability and Accountability Act, as permitted under this Agreement and consistent with applicable state and federal law, rules, and regulations; ii) use appropriate safeguards to prevent the use or disclosure of PHI except as permitted by this Agreement or by applicable state or federal law; iii) report any known misuse of PHI to School; iv) impose these same requirements on any subcontractors or agents of University; v) make PHI and an accounting of disclosures available as required by HIPAA Privacy Standards; vi) make the internal practices, books and records of University and its Provider relating to the use and disclosure of PHI available to the United States Department of Health and Human Services. (c) Notwithstanding the foregoing, University and its Provider(s) and School agree to comply with all applicable local, State, and Federal rules, regulations, and statutes relating to confidentiality.

11. REGULATORY COMPLIANCE. University and its Faculty Provider(s) and School shall comply with all Federal and State fraud and abuse prohibitions, including, but not limited to, the Federal Anti-Kickback Statute, 42 U.S.C.1320a-7b, Stark II, 42 U.S.C. 1395, the Florida Patient Self-Referral Act, section 456.053 of the Florida Statutes, and the Florida Patient Brokering Prohibition, section 817.505 of the Florida Statutes. The School shall not, directly or indirectly, determine the fees, if any, paid to University for the provision of professional services of its Provider(s) based on the volume or value of referrals between University (and/or its Provider(s)) and School for designated health services as defined in 42 U.S.C. 1395nn. The values and consideration of all remuneration, goods and services exchanged between University and School are determined by fair market value and reflect the actual provision of health care

services provided and are not exchanged to induce and/or direct any direct or indirect referrals of goods and/or services that may be paid by a government program.

12. ASSIGNMENTS AND SUBCONTRACTS. Neither party may assign its obligations under this Agreement to another entity without the prior written approval of the other party. University will not subcontract or assign any of the Clinical Services provided by its Providers hereunder to other individuals not employees of University without the prior written approval of the School.

13. TERMINATION: a) This Agreement may be terminated by either party without cause and without penalty upon thirty (30) days' prior written notice to the other party; b) In the event either party breaches any material term of this Agreement, the other party may terminate this Agreement immediately upon written notice, unless the breach is waived in writing. Waiver of a breach of the Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the Agreement. In case of a breach, the parties shall have all rights available under law.

14. NOTICES. Any notice required to be given under this Agreement shall be in writing and shall be sent by certified mail, return receipt requested, or by hand delivery, to the parties at the addresses set forth below:

University: Daniel Van Durme, M.D.
Associate Dean for Clinical and Community Affairs
1115 West Call Street
Tallahassee, Florida 32306-4300

School:

15. ATTORNEYS' FEES. In any litigation, arbitration, or mediation arising out of this Agreement, including appeals, each party shall be responsible for the payment of its own attorneys' fees and costs, regardless of the outcome.

16. ENTIRE AGREEMENT. This Agreement and its attachments represent the entire agreement between or among the parties. Any changes to this Agreement must be made in writing, signed by all parties.

17. GOVERNING LAW AND VENUE. This Agreement is governed by and shall be interpreted under the laws of the State of Florida. Venue for legal actions which may arise out of this Agreement shall be in the state or federal courts located in Leon County, Florida.

IN WITNESS WHEREOF, School and University have executed this Agreement as of the day and year first written above with full authority to enter into this binding Agreement.

THE SCHOOL BOARD OF GADSDEN
GADSDEN COUNTY

THE FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES:

By:

By:

Reginald James Date

John P. Fogarty, M.D. Date
Dean, College of Medicine

Roger Milton Date
School Board Member

Approved as to form and legality:

Robert B. Jurand Date
Associate General Counsel
Florida State University

ATTACHMENT A

SERVICES / SCOPE OF WORK School Board of Gadsden County

Services may be provided for school-children in Gadsden County by physician or ARNP faculty of the FSU College of Medicine (“FSU COM”).

- All physician faculty are duly licensed by the State of Florida, Board-Certified in their specialty and coverage by professional liability insurance through the FSU COM Self-Insurance Program
- The nurse practitioner faculty of the FSU College of Medicine practice under established protocols of the Nurse Practitioner Act, Florida Statutes, Chapter 464 and Florida Administrative Code, Rules Chapter 64B9-4 (Administrative Polices Pertaining to Advanced Registered Nurse Practitioners). The supervising physician(s) for these protocols are faculty of the FSU COM and they are also covered by professional liability insurance through the FSU COM.

Scope of Services - summary

- Provision of sports, school entrance and Special Olympic physical exams.
- Prescribe and administer medications for common pediatric ailments such as conjunctivitis (pink eye), asthma and minor skin infections.
- Conduct classes for elementary and middle school faculty on health related topics.
- Serve as a resource for school faculty and DOH support staff.
- Coordinate vision referrals for migrant children.
- Staff and manage migrant summer school clinic in conjunction with DOH partnership.

Detailed list of services

- Evaluations (physicals) for: 1) sports participation; 2) school entry; 3) Special Olympics participation
- Sick child evaluation, diagnosis, and treatment
 - Most common diagnoses: otitis media, pharyngitis, upper respiratory infection, asthma, cellulitis/abscess, dental abscess, urinary tract infection, rashes, ring worm, head lice, conjunctivitis
 - Have the ability to do rapid strep screen and urinary analysis in the school clinic
 - Can administer albuterol via nebulizer for asthma if needed
 - Prescribe antibiotics, medicated cream/ointments, or other medications as appropriate
 - Recheck on sick visits (i.e., ear or rash recheck)
- Simple procedures such as: foreign object removal from ear, draining of an abscess, cerumen removal from ear
- Injury evaluation and treatment, referral to Capital Regional Emergency Department (CRMC ED) if stitches are needed.
- Coordinate with primary care providers and specialists for care of the children.

- Examples: neurologist for a child with seizures, Diabetes Center for diabetic children, Nemours GI for a child with functional constipation, Shands Gainesville Pulmonology for child with severe asthma
- Coordinate with CRMC ED for care of child if needed.
- Administer over the counter medications at school – antipyretics (fever reducers, such as Tylenol), allergy medication (e.g., Claritin), pain medication, antifungal creams, steroid cream (hydrocortisone)
- Prescription medication for acute illness as well as chronic illness.
 - Work with local pharmacies to get low cost medications for those without health insurance
- Prescription medication for use at school (i.e., albuterol inhaler for child with asthma)
- Provide first aid services at school events and Special Olympics
- Collaborate with parents regarding illness or injury of child to meet needs.
 - Often notes are sent home when parents are unable to be reached via phone. Sometimes a prescription is sent home when the parents cannot be reached to call in to a pharmacy.
- Consult with school faculty and staff regarding acute or chronic illness. Provide education, refer to primary care provider, or treat if able (i.e., ringworm)
- Health education to faculty, staff, and students
- Gather clothes for use in the school clinics
- Gather school supplies and hygiene supplies for use in the school clinic
- Collaborate with Gadsden Health Department staff for care of children who visit the clinic – assistance with visits that don't require an NP, medication administration, annual screenings.
- Consult at Carter Paramore School as needed for injury or illness

COMPENSATION: There shall be no monetary compensation by School to University, unless specifically set forth elsewhere in this Agreement. Providers will remain full-time employees of University and are entitled to all University holidays.

Louise R. Goldhagen Multidisciplinary Evaluation and Consulting Center

The College of Social Work
715 West Gaines Street • P.O. Box 3061603
(FAX)
Tallahassee, Florida • 32306-1603

(850) 644-2222
(850) 644-6591

<http://mdc.fsu.edu/>

School Mental Health Program Services: Gadsden County, FL

The FSU Multidisciplinary Center's School Mental Health Program (SMHP), in agreement with the FSU College of Medicine's Department of Family Medicine and Rural Health, provides mental health/counseling services to students at George Munroe Elementary School, Stewart Street Elementary School, and James A. Shanks Middle School in the Gadsden County School District. In previous years, services have also been provided at Havana Middle School. Following a referral for services from a parent or school personnel, or self-referral by a student, parent/guardian consent for services is obtained, student needs are assessed, treatment goals are established, and students are then seen during school hours on either an individual or group basis to address identified concerns. Consultation and referral occur as needed. Student progress toward meeting treatment goals is monitored and assessed post-treatment.

- Following referral and consent, a brief evaluation is undertaken that includes input from the referral source, parents, teachers, and the student themselves. Whenever possible, the student's psychosocial and developmental history are obtained, academic records are reviewed, and concerns regarding the student's functioning are obtained through interviews with parents/caregivers and the child's teacher(s) as well as any other relevant school staff or administrators. In addition, parents/caregivers and teachers are asked to complete rating scales regarding students' social, emotional and behavioral functioning, and students are asked to complete pencil-and-paper self-report assessments regarding their own social, emotional, and behavioral functioning.
- Following the initial evaluation, treatment goals are established. Students are assigned to either individual or group counseling and are typically seen on a weekly basis at a time mutually agreed upon by the student, parent, and teachers.
- Typical needs and/or concerns identified include social adjustment difficulties, anger management problems, peer problems and/or bullying, academic concerns, disruptive behavior concerns, and symptoms of anxiety and depression that interfere with academic success.
- Overall, cognitive-behavioral therapy is utilized, as this is a collection of evidence-based interventions that, through rigorous research trials, have been demonstrated to be effective for addressing emotional, social, and behavioral difficulties in youth through psychoeducation, skill-based treatment modules, and opportunities to practice/apply skills learned.
- Whenever possible, post-treatment assessments are conducted with parents, teachers, and students to assess for change relevant to treatment goals and the students' overall functioning and needs.
- Direct mental health/counseling and consultation services are provided by doctoral students or pre-doctoral Psychology Interns from clinical, counseling, or school psychology training programs.
- All services are supervised through weekly individual or group supervision meetings by a Florida-licensed psychologist with expertise in the provision of school mental health services.