

Mental Health Services

Internal Audit Report

February 5, 2021



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EXECUTIVE SUMMARY

Why We Did This Audit

Our objectives were to evaluate whether the Mental Health Services (MHS) Department was operating effectively, efficiently, in accordance with applicable laws, regulations, district policies, procedures, and with appropriate internal controls.

This is a planned performance audit derived from the annual audit risk assessment process.

Observations and Conclusion

Audit Results at a Glance			
	Risk/Impact Rating		
Results and Observations	Significant	Moderate	Minor
IA - Internal Audit or M - Management	IA - 2	IA - 4	IA - 0
D - Deficiency or O - Opportunity	D - 2 O - 0	D - 4 O - 0	O - 0

Our overall conclusion is that the Mental Health Services Department is functioning effectively, efficiently, generally in compliance with applicable laws, regulations, district policies, procedures, and with appropriate internal controls. However, we noted areas that require attention as described below.

- Not all schools entered data in the SharePoint application or they did not enter data timely.
- The court is not sending notifications to the district of students referred for mental health services from the courts.

- Three requirements of the Memorandum of Understanding (MOU) with community agencies are not monitored.
- The 2019 and 2020 Outcome and Expenditure Reports submitted to Florida Department of Education (FDOE) contained inaccurate information.
- Student mental health information is transmitted to community agencies via fax.
- Schools did not have required documentation for some of our sample.

Results and Recommendations

We made recommendations for each of the areas requiring attention. Proactive oversight from the district Mental Health Services Department and other responsible departments and entities would be beneficial in addressing these matters.

RECOMMENDATION	RESPONSIBLE DEPARTMENT
Share Point data	MHS & Schools
Court notifications	Legal & School Choice
MOU's	MHS, Community Agencies & Procurement
Annual FDOE Report	MHS, OMB & Schools
Transmitting personal information via fax	MHS & Schools
School documentation	MHS & Schools

We discussed this report with management and they have prepared their response that follows.

DEFINITIONS:

Risk / Impact Ratings

Minor	Low risk with a financial impact of less than one percent and/or an isolated occurrence limited to local processes (low impact and low likelihood) and no instances of non-compliance with laws, rules, regulations and policies
Moderate	Slight to moderate risk with a financial impact between one and five percent and/or a noticeable issue that may extend beyond local processes (low impact and high likelihood or high impact and low likelihood), no instances of non-compliance with laws, rules and regulations, and isolated instances of non-compliance with policies
Significant	High risk with a financial impact greater than five percent and/or a significant issue that occurs in multiple processes (high impact and high likelihood) and instances of non-compliance with laws, rules, regulations and policies

We use three risk / impact ratings.

Observations Categories

Deficiency	A shortcoming in controls or processes that reduces the likelihood of achieving goals related to operations, reporting and compliance
Opportunity	A process that falls short of best practices or does not result in optimal productivity or use of resources

We categorize our observations as opportunities or deficiencies.

Criteria for Observations Sourced to Management

- Internal audit was informed of the issue prior to starting detailed testing
- Management identified, evaluated, and communicated the issue to appropriate levels of the district
- Management has begun corrective action with clear, actionable plans and targeted completion dates

No observations from this audit were sourced to Management.

BACKGROUND:

The Marjory Stoneman Douglas High School Public Safety Act (Senate Bill SB 7026) passed into law March 9, 2018, and has increased compliance requirements related to mental health service for public school students. Prior to this legislation, the district employed 10 mental health counselors in the Exceptional Student Services Department. To implement SB 7026 and subsequent legislation (SB 7030 in 2019 and SB 7040 in 2020), the district established the Department of Mental Health Services (MHS) in the Student Services Department.

To implement the requirements of the legislation, MHS hired dozens of mental health counselors and created new processes and procedures. MHS developed and conducted training programs for the counselors and for school-based personnel. They established tracking and reporting processes and set up the mental health hotline. MHS now has 87 counselors and a small administrative staff responsible for coordinating district and community resources to deliver evidence-based mental health care and treatment for students.

Various district departments and other entities are involved in the overall provision of mental health services as noted in the table below.

DEPARTMENT	ORGANIZATION AFFILIATION
Mental Health Services (overall coordination)	Teaching & Learning (Chief Academic Office)
School Choice Services (court notifications)	Teaching & Learning
Legal Services (MOU's and court notifications)	General Counsel
District Police (threats)	Operations
Procurement (MOU's, licenses, certificates, affidavits and insurance)	Operations
Office of Management & Budget (annual financial information)	Fiscal Services
Schools	Teaching & Learning (Learning Communities)
Community Agencies	External Counseling

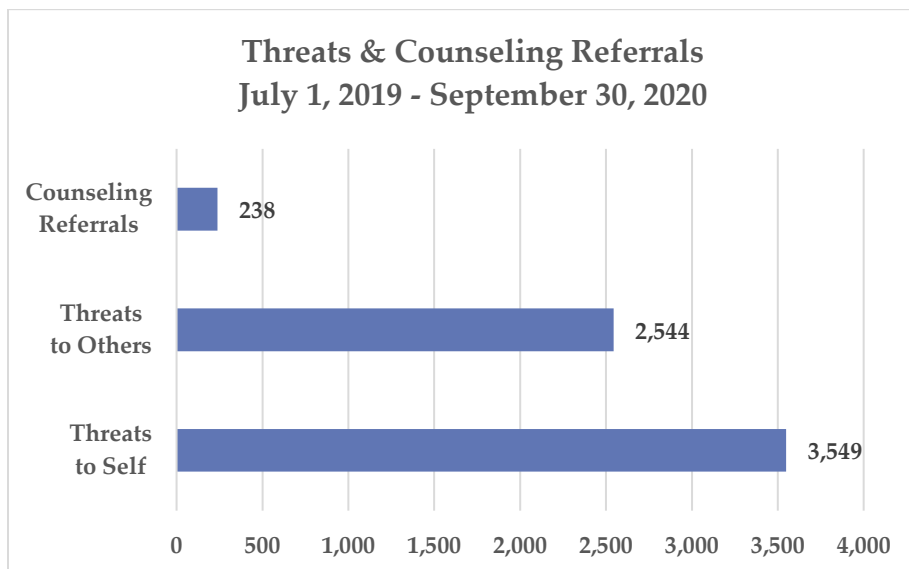
To implement new legislation, the district has gone from 10 mental health counselors to 87 and developed new processes and procedures.

A number of departments and entities are involved in the overall provision of mental health services.

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The District employs licensed mental health counselors, school psychologists, school social workers, and certified school counselors to provide mental health services to students. Mental health counselors support students and schools by providing individual and group counseling, providing mental health training in the district, and acting as a liaison between community agencies and schools. Each school has a designated contact person (guidance counselor or SAFE coordinator) to make referrals for student mental health counseling. These school-based personnel are not under the direct supervision of MHS.

According to the Department's records¹, the District responded to 3,549 threats to self, 2,544 threats to others and 238 counseling referrals from July 1, 2019 through September 30, 2020. The Department tracks threats to self/others and counseling referrals in a SharePoint application. Currently, the Department handles threats to self and counseling referrals and the District Police Department handles threats to others.



Source: Mental Health Services department records

The Department also administers a Mental Health Helpline that logged 284 calls in 2019/2020.

¹ We found a number of concerns regarding the reliability of these records. Please see comments 1 & 4 later in this report.

Mental Health Services:

- *provides individual and group counseling,*
- *provides mental health training, and*
- *acts as a liaison between community agencies and schools.*

School-based personnel involved in student mental health services are not under the direct supervision of MHS.

The District reported 6,093 responses to threats to self/others and 238 counseling referrals from July 1, 2019 through September 30, 2020.

The hotline recorded 284 calls 2019/2020.

OBJECTIVES, SCOPE AND METHODOLOGY:

Objectives

Our objectives were to evaluate whether the Mental Health Services Department (Department) was operating effectively, efficiently, in accordance with applicable laws, regulations, district policies, procedures, and with appropriate internal controls. Accordingly, we determined whether the Department:

- Has established processes and procedures and followed them
- Complied with applicable Florida DOE requirements
- Identified, referred, and assessed mental health concerns in accordance with time intervals in Senate Bill 7030.
- Provided training
- Controlled access to sensitive data
- Responded to Helpline calls in a reasonable time and recorded call activity accurately
- Monitored procedures of Community agencies

Scope

The scope of the audit included mental health services activities from July 1, 2019 to September 30, 2020.

Methodology

Out audit methodology included:

- Reviewing information on the MHS Department's website and its job descriptions;
- Reviewing Florida DOE website;
- Reviewing contracts, addenda, agreements, memoranda of understanding (MOU);
- Reviewing the Department's SharePoint site used to track Threats to Self/Others and Counseling referrals;
- Randomly selecting 60 of 6,093 Threats to Self/Others and 24 of 238 Counseling referrals for detailed testing;
- Reviewing Threats to Self and Counseling referrals documentation;
- Making 63 actual and virtual site visits to schools to review school-level compliance with sign-in and documentation procedures
- Analyzing Helpline response times and supporting documentation;

This performance audit evaluated effectiveness, efficiency, compliance with laws, regulations, and district policies, and internal controls.

The audit period covered July 1, 2019 through September 30, 2020.

- Reviewing training documentation;
- Examining purchasing transactions;
- Conducting interviews with management and Mental Health Designees;

Our audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing* of the Institute of Internal Auditors and included such procedures as deemed necessary to provide reasonable assurance regarding the audit objective. Internal Auditing is an independent, objective assurance and consulting activity designed to add value and improve an organization’s operations. It helps an organization accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

We are required to note any material deficiencies in accordance with Florida Statutes, School Board Policy and sound business practices. No material deficiencies were noted in this audit. We also offer suggestions to improve controls or operational efficiency and effectiveness.

RESULTS AND RECOMMENDATIONS:

Overall Conclusion: Our overall conclusion is that the Mental Health Services Department is functioning effectively, efficiently, generally in compliance with applicable laws, regulations, district policies, procedures, and with appropriate internal controls. However, certain matters require attention.

Next to each comment below, we have noted the district department or other party responsible for developing and implementing corrective action.

This audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.

We noted no material deficiencies.

Overall, District Mental Health Services is functioning effectively, efficiently and generally in compliance.

1) SharePoint data was incomplete (Mental Health Services and Schools). *Moderate Impact*

Best Practice:

School staff are expected to input threats to self and counseling referrals data in the SharePoint application so that accurate data can be reported to the State and to stakeholders.

Audit Result:

We used filters on the SharePoint site and noted schools that entered no threats to self data during the entire 2019/2020 school year. We also observed counseling referral data as of 1/21/2021 that appeared incomplete. We have listed a few examples of the latter below.

SCHOOL	COUNSELING REFERRAL ENTRIES for 2020-2021 School Year through 1/21/21
East River HS	1
Gotha MS	1
Jones HS	1
Pershing K-8	1
Southwest MS	1
Westridge MS	1
Zellwood ES	0

Source: Mental Health Services records

After we brought this matter to the attention of MHS management, they contacted schools and, in some cases, schools added previously unreported referrals to the SharePoint file.

Recommendation:

Develop and implement quality control procedures to monitor SharePoint and periodically remind schools of the expectation that they enter data within a reasonable time (by the next business day, for example) or whatever time frame that the Department establishes.

Data was incomplete.

Reported counseling referrals at some schools appeared incomplete.

2) The court is not sending notifications to the district as required by statute (Legal and School Choice Services). *Moderate Impact*

Best Practice:

Florida Statute 1006.08 states that courts shall notify the district school superintendent within 48 hours of the name and address of any student the court refers to mental health services. According to the Legal Services Department, this requirement became effective in 2018.

Audit Result:

The court is not sending notifications to the district regarding students referred for mental health services. On January 12, 2021 the School Board approved an Inter-Agency agreement between the District and the Office of State Courts Administrator to access the Judicial Inquiry System. This agreement will allow access to juvenile court records and case disposition information and will assist district and school-based threat assessment teams in taking appropriate actions to keep schools safe. However, this agreement does not provide that the court will send the district the names of students referred for mental health services.

Recommendation:

Pursue an agreement with the courts to ensure compliance with the mental health services notification requirement of Florida Statute 1006.08.

3) Certain terms of Community Agencies' Memorandum of Understanding (MOU) are not monitored. (Community Agencies, Schools and Procurement) *Significant Risk/Impact*

Best Practice:

All provisions of the MOU should be monitored to ensure terms are met and services are received as stated in the MOU.

Audit Result:

The district executed MOU's with 17 community agencies to provide counseling services to students. The MOU's scope of services contains 16 items and we noted issues with two and with Article 8 of the MOU as described below.

The court is not sending notifications to the district of students referred for mental health services by the court.

Access to the Judicial Inquiry System does not provide the required notification.

Provisions of the MOUs with community agencies are not monitored.

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MOU Requirement	Issue
Item D.4. of the Scope of Services states: "Submit monthly individual student services summaries directly to the school at which services are rendered." This report documents students' counseling progress each month.	During our site visits, staff at several schools informed us that the student monthly summary reports were not submitted, were not submitted timely, or had to be tracked down from the agency.
Item D.15. of the Scope of Services states: "Keep in full force and effect appropriate occupational and professional licenses for itself and all of its agents or employees furnishing services pursuant to this Agreement; and furnish a "drug free workplace" certificate and public entity affidavit to SBOC with the execution of this Agreement."	No one at the District followed-up to ensure that the community agencies provided the required professional licenses, drug free workplace certificates and public entity affidavit documents
Additionally, Article 8 of the MOU contains requirements for the agencies to provide workers compensation, general liability, automobile liability, and professional liability insurance in specific amounts.	We learned from inquiries of Procurement Services, Legal Services, and Mental Health Services that no one at the District followed-up to ensure that the community agencies provided the required certificates of insurance.

Through inquiry of Procurement Services, Legal Services, and Mental Health Services management, we learned that no one at the District followed-up to ensure that the community agencies are provided the required certificates of liability insurance, professional licenses, drug free workplace certificates and public entity affidavit documents. Consequently, these requirements were not met by any of the agencies. Certificates of insurance are particularly important since representatives of these agencies come to district schools to provide services.

Ordinarily, Procurement Services would assist in obtaining documentation related to licenses, insurance and the like. However, MHS and Legal Services handled these MOUs and Procurement Services was not involved.

Monthly Student Summary Reports are not submitted consistently each month to the schools.

No one at the district followed-up on item D.15 of the SOW or Article 8 of the MOU. As a result, none of the community agencies met these requirements.

Certificates of insurance are particularly important since representatives of these agencies come to district schools to provide services.

Recommendation:

Develop procedures to ensure community agencies meet all MOU terms.

4) The 2019 and 2020 Mental Health Plan Outcome and Expenditure Reports to State Were Inaccurate. (Mental Health Services, OMB and Schools) *Moderate Impact*

Best Practice:

The Mental Health Plan Outcome and Expenditures report submitted to the Florida Department of Education (FDOE) each year by September 30 should contain accurate information.

Audit Result Related to Financial Information Submitted to State:

The Department’s reports submitted to FDOE on September 30, 2019 and September 30, 2020 contained inaccurate financial information.

We compared the department’s 2018-2019 report to data obtained from the district’s Office of Management and Budget (OMB) and noted the following discrepancies.

Analysis of Fiscal 2018/2019 Report		
OMB Data	Amount Reported to FDOE	Difference
Funding		
\$4,676,684	\$4,701,585	\$24,901
Expenditures		
\$2,876,927	\$3,407,795	\$530,868
Unexpended Funds		
\$1,799,757	\$1,429,994	(\$369,763)

We also noted discrepancies in the 2019/2020 report. However, after we brought those discrepancies to the attention of MHS management, FDOE allowed the Department to submit revised information for its

The Program Outcomes & Expenditure Reports submitted to FDOE were inaccurate.

The FDOE permitted the District to submit revised information for the 2020 report.

2020 report on November 23, 2020. The revised information agreed to OMB records.

Audit Result Related to Statistical Information Submitted to State:

We were unable to verify the data for referral and counseling services provided in the 2019/2020 annual report with supporting documentation at the schools. The Department used a survey to gather data about mental health services provided by schools and community agencies in order complete the report for 2019/2020. Only 70% of the schools responded, and Department staff did not follow-up to obtain data from those that did not respond. The Department accepted the information provided by the schools without a desk review for reasonableness or completeness. As a result, the following questionable data was included in the report to FDOE:

- A middle school with a May 2020 enrollment of 1,565 students, reported that 500 school-based referrals were received while 1,400 students (almost every student on campus) were provided school based counseling services in 2019/2020.
- Another middle school with a May 2020 enrollment of 1,215 students, reported no school based or community based referrals were received and no counseling services were provided in 2019/2020.
- A high school with a May 2020 enrollment of 1,979 students, reported only 11 school based referrals were received and seven school based counseling services were provided in 2019/2020.
- A K-8 school with a May 2020 enrollment of 682 students, reported only one school based referral was received and no school based counseling services were provided in 2019/2020.
- Three high schools did not respond to the survey request.

When this survey was conducted, the majority of District employees were working remotely due to the pandemic and may not have had access to records to provide accurate information for the survey.

Thirty percent of schools did not submit their data to the district office so it was not included in the report to FDOE.

We were unable to verify survey data submitted by the schools and noted questionable data in the survey results.

The survey was conducted during the pandemic shutdown when most employees were working remotely.

Recommendation:

Develop procedures to review and evaluate data received from the schools and ensure the report is reviewed for accuracy before submitting to the FDOE each year.

5) Student mental health information is being faxed/emailed. (Mental Health Services and Schools) *Moderate Risk*

Best Practice:

Student mental health information should be transmitted to community agencies in a secure manner.

Audit Result:

During our site visits and Teams meetings, we learned that schools are faxing or emailing student mental health information to the community agencies. It is our understanding that a pilot program currently being tested at two middle schools will utilize centralized Community Resource/Case Management Database software to increase the connectivity and ease of navigation between community providers, youth and families in need.

Recommendation:

Evaluate the trial program, and implement either it or an alternate means to ensure a secure file transfer process for student mental health information with each agency.

6) School Mental Health Documentation was not always available. (Mental Health Services and Schools) *Significant Risk/Impact*

Best Practices:

Meet program requirements.

- Senate Bill 7030 states that students referred for community-based mental health services must have services initiated within 30 days after the school or district makes the referral.
- District Mental Health Counselors and community agency counselors are expected to sign in the District Mental Health

Student mental health information is faxed/emailed to external Community agencies.

The District is testing a pilot program.

Senate Bill 7030 and district mental health services procedures set forth several documentation requirements.

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Binder (Blue Book) and the community agency counselors should also sign in with the District's Visitor System (Raptor).

- According to the Threat Response to Suicide/Self Harm flow chart, a Columbia Suicide Severity Rating Scale (C-SSRS) form should be completed, a School-Based Mental Health Safety Plan should be developed and implemented, and District Police should be notified of any Baker Act incidents.

Audit Result:

Our actual and virtual site visits and email requests to 63 schools disclosed the following:

Counseling Referrals:

- A school sent a request for counseling services for a student to a community agency on September 2, 2020 and as of December 2, 2020, the school had received no reply. We inquired whether the agency or the school ever provided counseling services and were told that the student is not currently receiving therapy services since the parent thought the counseling would take place on campus and the student is LaunchEd. Senate Bill 7030 and the district's MOU with the community agencies require the services be provided within 30 days of referral. The MOU further requires that if, by the 20th day after referral, the community agency cannot guarantee the initiation of services within 30 days, services are to be provided by OCPs staff.
- The Blue Book from the 2019/2020 school year was not available for our review at four schools. One school stated they were not aware that they should retain these documents from year to year and the contents from 2019/2020 had been shredded. Others simply could not locate it.
- The Blue Book at another school was only partially complete, with only February and March 2020 pages available for review.
- Two schools stated the District Mental Health Counselors did not always sign the Blue Book as stated in the Mental Health Counseling Service Log.

Documentation such as, Blue Book, C-SSRS, Safety Plan was not available or maintained at several schools.

We physically or virtually visited 63 schools.

One community referral was not responded to for over three months and the school did not follow-up.

Some schools' Blue Books were not available to document site visits by community agencies.

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- Five schools do not require representatives of community agencies to sign in with the Computer Visitor Log (Raptor) as stated in the Mental Health Counseling Service Log.
- Front office personnel at four schools stated that they do not always verify the expiration date on the vendors' badges.
- Two schools could not provide Monthly Student Summary reports for community agencies. This is also noted in #3.

Threat Response:

- Five students in our sample had no C-SSRS form as called for in the Threat Response Flow Chart.
- Two schools did not notify District Police when a Baker Act incident occurred as called for in the Threat Response Flow Chart.
- Seven students in our sample had no School-Based Mental Health Safety Plan form as called for in the Threat Response Flow Chart.

Recommendations:

We have several recommendations to address these matters that should be addressed by the appropriate responsible departments as noted at the beginning of this report:

- Review current procedures and modify where necessary to ensure counseling services are provided within 30 days of referral.
- Develop and implement procedures to monitor completion of the Blue Book and the Computer Visitor Log.
- Remind schools of record retention policy/procedures and the requirement to exam the expiration date on vendor badges.
- Reiterate to schools the requirement to complete and retain all required documentation for Counseling Referrals and Threat Response to Suicide/Self-Harm and to notify District Police of any Baker Act incidents.

Five schools did not require community agencies' staff to sign in to the district's visitor system (Raptor).

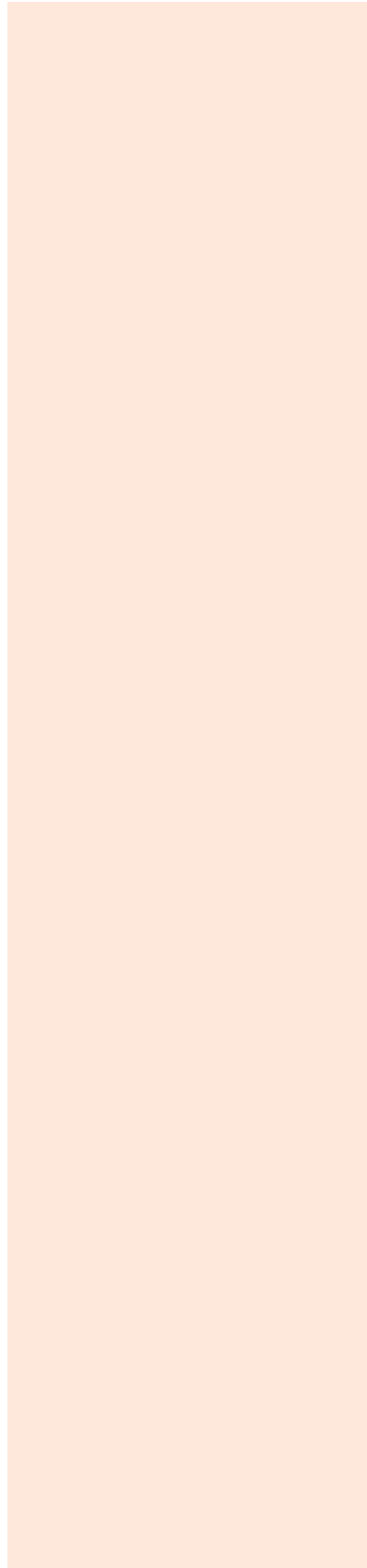
Five students had no Columbia Suicide Severity Rating Scale completed.

Two schools did not notify District Police when a student was committed under the Baker Act.

Seven students had no Mental Health Safety Plan.

Several departments will be involved in addressing these recommendations.

We wish to extend our thanks to the Mental Health Services team, the schools and the ITS Department for their assistance and cooperation with this audit.



Threat Response to Suicide/Self-Harm (TRSS-H) Flow Chart

DURING SCHOOL HOURS

Keep the student with you and **DO NOT** leave the student alone
(If student needs Immediate Medical Attention contact 911)

Notify an Administrator and the Mental Health Designee (MHD)
MHD will notify Parent/Guardian of reported threat

Conduct the Columbia Suicide Severity Rating Scale (C-SSRS) and engage the student in de-escalation strategies

Suicidal Ideations or Harm to Self WITH a Plan

Suicidal Ideations or Harm to Self WITHOUT Plan

If de-escalation successful; complete Parent/Guardian Acknowledgement form

If de-escalation successful, complete Parent/Guardian Acknowledgement form

If additional intervention is needed the MHD will:
-Contact parent for verbal consent to contact Mobile Crisis Services (211)
-Contact the Mobile Crisis Services (211)

Develop and implement School-Based Mental Health Safety Plan (as needed)

If intervention has been unsuccessful or if parent does **not** consent, is unable to be reached or a delay will increase harm to student, contact the SRO for additional Risk Assessment

If Baker Act Initiated:
-Notify OCPS District Police 407-317-3333
-Hold Re-entry upon student return to school

Develop and implement School-Based Mental Health Safety Plan

Complete Digital TRSS-H Incident Form
Fax Parent/Guardian Acknowledgement and C-SSRS Form To:
Mental Health Services 407-250-6253

Threat Response to Suicide/Self-Harm (TRSS-H) Flow Chart

OUTSIDE OF SCHOOL HOURS OR LAUNCHED@HOME

If student needs Immediate Medical Attention contact 911

LaunchEd@Home

Immediately contact the School Administrator and Mental Health Designee (MHD) to report all necessary information

Make Parent/Guardian contact

After School Hours

(Example: A call from a concerned parent or social media post)

Immediately contact the School Administrator and report all necessary information

Make Parent/Guardian contact

For a non-immediate threat, call for Wellbeing Check at 407-317-3333

- MHD complete Parent Acknowledgement Form
- MHD Give parent Mobile Crisis Services (211) information
- MHD Follow up with Parent/Guardian and Student

When the student returns to school (or LaunchEd@Home):

If a Baker Act *was* initiated:

- Hold a Re-entry meeting
- Develop and implement School-Based Mental Health Safety Plan

If a Baker Act *was not* initiated:

- Develop and implement School-Based Mental Health Safety Plan (as needed)

Complete Digital TRSS-H Incident Form
Fax Parent/Guardian Acknowledgement Form To:
Mental Health Services 407-250-6253



Department / School Name	Student Services/Mental Health
Administrator / Department Head	Mary Bridges/Anna Williams Jones
Cabinet Official / Area Superintendent	Kathryn Shuler

Exception Noted (Finding / recommendation) What is? What should be?	Management Response (Corrective Action) What needs to be done?	Responsible Person (Name & Title) Who needs to do it?	Expected Outcome & Completion Date What is the evidence of the corrective action? When will the action be completed? (MM/YYYY)
SharePoint data was incomplete (Mental Health Services and Schools). <i>Moderate Impact</i>	The appropriate school staff have been trained how to properly use and update the SharePoint. The mental health services team will work with school-based administration to ensure that data is entered in a timely manner.	Executive Director of Student Services, Director of Mental Health Services, School Principals, School Counselors, SAFE Coordinators, MHS Staff	The mental health services team will work collaboratively with school principals to ensure that school-based staff enter data into the SharePoint in a timely manner. 04/2021
2019 and 2020 Mental Health Plan Outcome and Expenditure Reports to State Were Inaccurate. (Mental Health Services, OMB and Schools	Mental health services reviewed the expenditure report with the budget department prior to submitting it to FDOE.	Executive Director of Student Services, Director of Mental Health Services, Budget	The errors in the 2020 report were corrected and there was no fiscal impact. FDOE allowed submission of the corrected 2020 document. 11/2020 The expenditure report is due September first. MHS and Budget will meet in August each year to develop and review the expenditure report. 8/2021
School Mental Health Documentation was not always available. (Mental Health Services and Schools	The mental health services team has trained all school-based staff on maintaining and storing the necessary documentation. The mental health services team will work with school-based administration to ensure that	Executive Director of Student Services, Director of Mental Health Services, School Principals, School Counselors, SAFE Coordinators	The mental health services team will work collaboratively with school principals to ensure that school-based staff enter data into the SharePoint in a timely manner. 04/2021



	data is entered in a timely manner and stored appropriately.		
Student mental health information is being faxed/emailed. (Mental Health Services and Schools) Moderate Risk	Currently the process for communicating with community providers is to fax or send encrypted emails. State statute does not prohibit faxing or utilizing encrypted emails to disseminate student information.	Executive Director of Student Services, Director of Mental Health Services, School Counselors, SAFE Coordinators, MHS Staff	State statute does not prohibit faxing or utilizing encrypted emails to disseminate student information. The mental health services team is researching a more efficient process to share information with community mental health providers. All mental health staff, SAFE Coordinators and elementary school counselors received additional training on confidentiality which includes keeping documents secure. The trainings took place on 02/2021 and 03/2021.
The court is not sending notifications to the district as required by statute (Legal and School Choice Services). Moderate Impact	The courts should send notifications to the district to ensure needed information is provided to OCPS to ensure ongoing support for students that enter school.	Legal Services, School Choice	Legal Services has reached out to the courts. Please follow-up with legal services for the status.
Certain terms of Community Agencies' Memorandum of Understanding (MOU) are not monitored. (Community Agencies, Schools and Procurement) <i>Significant Risk/Impact</i>	Proof of required insurance as identified in the MOU needs to be maintained by the mental health services team.	SEDNET Manager, Executive Director of Student Services, Risk Management, Director of Mental Health Services	Student Services will collect proof of insurance from agencies when MOUs are created/updated yearly. Student Services will provide these documents to Risk Management and work with them to ensure all agencies have the required coverage.