Report No. 2023-042 October 2022

SANTA ROSA COUNTY DISTRICT SCHOOL BOARD



Sherrill F. Norman, CPA Auditor General

STATE OF FLORIDA AUDITOR GENERAI

Operational Audit

Board Members and Superintendent

During the 2021-22 fiscal year, Dr. Karen Barber served as Superintendent of the Santa Rosa County Schools and the following individuals served as School Board Members:

	District No.
Linda K. Sanborn, Vice Chair	1
Elizabeth Hewey	2
Carol N. Boston	3
Charles Elliott	4
Wei L. Ueberschaer, Chair	5

The team leader was Barbara J. Sturdivant, CPA, and the audit was supervised by Kenneth C. Danley, CPA.

Please address inquiries regarding this report to Edward A. Waller, CPA, Audit Manager, by e-mail at tedwaller@aud.state.fl.us or by telephone at (850) 412-2887.

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SANTA ROSA COUNTY DISTRICT SCHOOL BOARD

SUMMARY

This operational audit of the Santa Rosa County School District (District) focused on selected District processes and administrative activities and included a follow-up on findings noted in our report No. 2020-110. Our operational audit disclosed the following:

Finding 1: District school safety procedures need improvement to ensure and demonstrate that school resource officers complete required mental health crisis intervention training.

Finding 2: Contrary to State law and State Board of Education rules, the District did not always provide required youth mental health awareness and assistance training and instruction.

Finding 3: District procedures need strengthening to ensure that instructional contact hours for adult general education classes are accurately reported to the Florida Department of Education.

Finding 4: Some unnecessary information technology (IT) user access privileges continued to exist, increasing the risk for unauthorized disclosure of sensitive personal information of students to occur.

Finding 5: As similarly noted in our report Nos. 2020-110 and 2017-053, the District had not conducted a comprehensive IT risk assessment.

Finding 6: District IT security controls related to logging and monitoring systems activity need improvement.

BACKGROUND

The Santa Rosa County School District (District) is part of the State system of public education under the general direction of the Florida Department of Education and is governed by State law and State Board of Education rules. Geographic boundaries of the District correspond with those of Santa Rosa County. The governing body of the District is the Santa Rosa County District School Board (Board), which is composed of five elected members. The elected Superintendent of Schools is the Executive Officer of the Board. During the 2021-22 fiscal year, the District operated 34 elementary, middle, high, and specialized schools; sponsored 2 charter schools; and reported 30,377 unweighted full-time equivalent students.

FINDINGS AND RECOMMENDATIONS

Finding 1: School Safety

State law¹ requires the Board and Superintendent to partner with local law enforcement agencies to establish or assign one or more safe-school officers, such as school resource officers (SROs), at each school facility. SROs must be certified law enforcement officers and, among other things, are required

¹ Section 1006.12, Florida Statutes.

to complete mental health crisis intervention training using a curriculum developed by a national organization with expertise in mental health crisis intervention.

The Board contracted for SRO services with the Santa Rosa County Sheriff's Office (Sheriff's Office) and the City of Gulf Breeze (City) and the Sheriff's Office contract specified that SROs had completed the required training. However, the contract with the City did not explicitly provide assurance that the SROs had completed mental health crisis intervention training using a curriculum developed by a national organization with expertise in mental health crisis intervention. In addition, although we requested, District records were not initially provided to evidence verification that the 40 SROs assigned to District schools and one charter school² during the 2021-22 school year had completed the required mental health crisis intervention training.

According to District personnel, the District relied on the Sheriff's Office and the City to ensure that the SROs completed the training. Notwithstanding, such reliance provides limited assurance that the required training was properly completed. Subsequent to our inquiry, in June 2022 District personnel contacted the Sheriff's Office and the City and obtained records evidencing the required training for 37 of the 40 SROs. However, according to correspondence from the Sheriff's Office and City, the remaining 3 SROs had not received the required training at the time they served as SROs.

Absent effective procedures to document verification of SRO mental health crisis intervention training, the District cannot demonstrate compliance with State law; the District has limited assurance that the SROs are appropriately trained to avert, or appropriately intervene, during school crises; and the District cannot demonstrate that all appropriate measures have been taken to promote student and staff safety.

Recommendation: The District should enhance procedures to ensure and demonstrate compliance with the State school safety laws. Such enhancements should include improved contract provisions to require assurance from law enforcement agencies that SROs completed the required mental health crisis intervention training and procedures to maintain documented verifications that SROs completed the required training.

Finding 2: Mental Health Awareness and Assistance Training and Instruction

Pursuant to State law,³ the District received a mental health assistance allocation totaling \$1.2 million for the 2021-22 fiscal year to establish or expand school-based mental health care services and related training. State Board of Education (SBE) rules⁴ require the District to annually provide to students in grades 6 through 12 a minimum of 5 hours of instruction related to mental health awareness and assistance, including suicide prevention and the impacts of substance abuse. In addition, State law⁵ requires the District to designate a school safety specialist to ensure that District school personnel receive youth mental health awareness and assistance training. Failure to comply with law or SBE rule requirements may result in the imposition of sanctions specified in State law.⁶

² The services provided by the 40 SROs included Sheriff's Office SRO services for 29 District schools and 1 charter school, City SRO services for 3 District schools, and at least 1 SRO at each school. Safe-school officers were not required for the 2 virtual schools and 1 adult school.

³ Section 1011.62(14), Florida Statutes.

⁴ SBE Rule 6A-1.094124(4), Florida Administrative Code.

⁵ Section 1012.584, Florida Statutes.

⁶ Section 1008.32, Florida Statutes.

To determine whether the District provided the required student instruction during the 2021-22 fiscal year, we requested District records for the 18 schools with students in grades 6 through 12 to determine whether the students received the required instruction. We found that, while most students in grades 6 through 12 received the required instruction, District records indicated that 4,072 (25 percent) of the 16,152 students did not. In response to our inquiry, District personnel indicated that student absences were the primary reason the instruction was not received.

In addition, District personnel responses to our inquiries and our examination of District records disclosed that established procedures were not always effective to ensure that the District complied with statutory mental health care training requirements. Specifically, we examined District records as of May 2022 and determined that only 1,954 (69 percent) of the 2,813 school employees had received the required mental health training. In response to our inquiry, District personnel indicated that the District experienced delays in delivering the required training due mainly to the COVID-19 pandemic and a substitute personnel shortage causing school personnel to work instead of attend the training.

Without the required instruction and training, a mental health services need may not be timely identified and appropriately met and, absent documentation evidencing youth mental health awareness and assistance instruction and training, the District cannot demonstrate compliance with State law and SBE rules. In addition, documented instruction and training enhances public awareness of District efforts to provide essential educational services.

Recommendation: The District should establish procedures to ensure that:

- Students in grades 6 through 12 annually receive at least 5 hours of mental health awareness and assistance instruction.
- All school personnel within the District receive youth mental health awareness and assistance training.

Finding 3: Adult General Education Classes

State law⁷ defines adult general education, in part, as comprehensive instructional programs designed to improve the employability of the State's workforce. The District received State funding for adult general education, and General Appropriations Act⁸ proviso language required each district to report enrollment for adult general education programs in accordance with Florida Department of Education (FDOE) instructional hours reporting procedures.⁹ SBE rules¹⁰ require the District to collect and maintain enrollment and attendance information on students based on minimum enrollment requirements for funding and mandatory withdrawal procedures for students for non-attendance. FDOE procedures provide that fundable instructional contact hours are those scheduled hours that occur between the date of enrollment in a class and the withdrawal date or end-of-class date, whichever is sooner. For students withdrawn from classes due to non-attendance, instructional contact hours are reported up to and including the last date of attendance.

⁷ Section 1004.02(3), Florida Statutes.

⁸ Chapter 2021-36, Laws of Florida, Specific Appropriations 122.

⁹ FDOE's Technical Assistance Paper: *Adult General Education Instructional Hours Reporting Procedures*, Dated September 2020.

¹⁰ SBE Rule 6A-10.0381(5), Florida Administrative Code.

The District reported 16,349 instructional contact hours provided to 226 students enrolled in 373 classes for the Fall 2021 Semester. As part of our audit, we examined District records for 1,434 hours reported for 30 students enrolled in 30 adult general education classes. We found that instructional contact hours for 1 student were under reported by 240 hours. After our discussions with District personnel about the discrepancy, District personnel determined that instructional contact hours were under reported by an additional 1,351 hours for 17 additional students enrolled in 19 adult general education classes during the Fall 2021 Semester.

In response to our inquiry, District personnel indicated that the errors occurred because District personnel did not update required fields in the student information system (SIS) for students who reenrolled after being withdrawn for non-attendance. District personnel also indicated that corrected information for these students was submitted to the FDOE in June 2022. Since adult general education funding is based, in part, on enrollment data reported to the FDOE, it is important that the District report accurate data.

Recommendation: The District should strengthen controls to ensure that instructional contact hours for adult general education classes are accurately reported to the FDOE.

Finding 4: Information Technology User Access Privileges

The Legislature has recognized in State law¹¹ that social security numbers (SSNs) can be used to acquire sensitive personal information, the release of which could result in fraud against individuals or cause other financial or personal harm. Therefore, public entities are required to provide extra care in maintaining the confidential status of such information. Effective controls restrict individuals from accessing information unnecessary for their assigned job responsibilities and provide for documented, periodic evaluations of information technology (IT) user access privileges to help prevent individuals from accessing sensitive personal information inconsistent with their responsibilities.

The District SIS provides for student records data processing and the District maintains current and former student information, including SSNs, in the District SIS. Student SSNs are included in the student records maintained within the District SIS to, for example, register newly enrolled students and transmit that information to the FDOE through a secure-file procedure and to provide student transcripts to colleges, universities, and potential employers based on authorized requests.

As of July 2022, the District SIS contained SSNs for 88,294 former and 15,255 current students and 168 employees had access privileges to that information. As part of our audit, we inquired of District personnel and examined District records supporting the IT user access privileges for 30 selected IT users who had access to student SSNs. We found that the 30 IT users, which included principals, bookkeepers, and secretaries, did not have a demonstrated need for access to the information.

In response to our inquiry, District personnel indicated that the District did not have procedures to provide for documented, periodic evaluations of IT user access privileges in the District SIS. After our discussions with District personnel, they evaluated who needed access to student SSNs to perform their job duties and, as of July 18, 2022, had reduced the number of IT users with access to student SSNs to 12 employees.

¹¹ Section 119.071(5)(a), Florida Statutes.

The existence of unnecessary IT user access privileges increases the risk of unauthorized disclosure of sensitive personal information and the possibility that such information may be used to commit a fraud against current or former District students. A similar finding was noted in our report No. 2020-110.

Recommendation: The District should continue efforts to ensure that only those employees who have a demonstrated need to access sensitive personal information, including student SSNs, have such access. In addition, the District should document periodic evaluations of individual access privileges and promptly remove any inappropriate or unnecessary access.

Finding 5: Information Technology Risk Assessment

Management of IT-related risks is a key part of enterprise IT governance. Incorporating an enterprise perspective into day-to-day governance actions helps entity personnel identify and understand the greatest security risk exposures and determine whether planned controls are appropriate and adequate to secure IT resources from unauthorized disclosure, modification, or destruction. A comprehensive IT risk assessment should consider specific threats and vulnerabilities, and the severity of such threats and vulnerabilities, at the Districtwide, system, and application levels and document the range of risks that District systems and data may be subject to, including those posed by internal and external users. IT risk assessments help support management's decisions in establishing cost-effective measures to mitigate risk and, where appropriate, to formally accept residual risk.

As of July 2022, the District had not completed a comprehensive IT risk assessment. In response to our inquiries, District personnel indicated that, although they had performed certain procedures, such as network security testing to evaluate the security of District IT systems, an aggregated and formalized IT risk assessment plan had not been completed, primarily due to the need to prioritize other critical assignments performed by IT personnel.

The absence of a comprehensive IT risk assessment may lessen District assurances that all likely threats and vulnerabilities have been identified, the most significant risks have been addressed, and appropriate decisions have been made regarding the risks to accept and other risks to mitigate through appropriate controls. Similar findings were noted in our report Nos. 2020-110 and 2017-053.

Recommendation: The District should continue efforts to conduct a comprehensive IT risk assessment to provide a documented basis for managing IT-related risks.

Finding 6: Information Technology – Logging and Monitoring of System Activity

Security controls are intended to protect the confidentiality, integrity, and availability of data and IT resources. Our audit procedures disclosed that certain security controls related to the logging and monitoring of system activity needed improvement. We are not disclosing specific details of the issues in this report to avoid the possibility of compromising the confidentiality of District data and related IT resources. However, we have notified appropriate District management of the specific issues.

Without appropriate security controls related to system activity monitoring, the risk is increased that the confidentiality, integrity, and availability of District data and related IT resources may be compromised.

Recommendation: District management should improve IT security controls related to system activity monitoring to ensure the confidentiality, integrity, and availability of District data and IT resources.

PRIOR AUDIT FOLLOW-UP

The District had taken corrective actions for findings included in our report No. 2020-110 except as noted in Findings 4 and 5 and shown in Table 1.

Table 1

Findings Also Noted in Previous Audit Reports						
Finding	2018-19 Fiscal Year Operational Audit Report No. 2020-110, Finding	2015-16 Fiscal Year Operational Audit Report No. 2017-053, Finding				
4	7	Not Applicable				
5	8	8				

OBJECTIVES, SCOPE, AND METHODOLOGY

The Auditor General conducts operational audits of governmental entities to provide the Legislature, Florida's citizens, public entity management, and other stakeholders unbiased, timely, and relevant information for use in promoting government accountability and stewardship and improving government operations.

We conducted this operational audit from March 2022 through July 2022 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

This operational audit focused on selected District processes and administrative activities. For those areas, our audit objectives were to:

- Evaluate management's performance in establishing and maintaining internal controls, including controls designed to prevent and detect fraud, waste, and abuse, and in administering assigned responsibilities in accordance with applicable laws, rules, regulations, contracts, grant agreements, and other guidelines.
- Examine internal controls designed and placed in operation to promote and encourage the achievement of management's control objectives in the categories of compliance, economic and efficient operations, reliability of records and reports, and safeguarding of assets, and identify weaknesses in those controls.
- Determine whether management had taken corrective actions for findings included in our report No. 2020-110.
- Identify statutory and fiscal changes that may be recommended to the Legislature pursuant to Section 11.45(7)(h), Florida Statutes.

This audit was designed to identify, for those areas included within the scope of the audit, weaknesses in management's internal controls significant to our audit objectives; instances of noncompliance with

applicable laws, rules, regulations, contracts, grant agreements, and other guidelines; and instances of inefficient or ineffective operational policies, procedures, or practices. The focus of this audit was to identify problems so that they may be corrected in such a way as to improve government accountability and efficiency and the stewardship of management. Professional judgment has been used in determining significance and audit risk and in selecting the particular transactions, legal compliance matters, records, and controls considered.

As described in more detail below, for those programs, activities, and functions included within the scope of our audit, our audit work included, but was not limited to, communicating to management and those charged with governance the scope, objectives, timing, overall methodology, and reporting of our audit; obtaining an understanding of the program, activity, or function; identifying and evaluating internal controls significant to our audit objectives; exercising professional judgment in considering significance and audit risk in the design and execution of the research, interviews, tests, analyses, and other procedures included in the audit methodology; obtaining reasonable assurance of the overall sufficiency and appropriateness of the evidence gathered in support of our audit findings and conclusions; and reporting on the results of the audit as required by governing laws and auditing standards.

Our audit included transactions, as well as events and conditions, occurring during the 2021-22 fiscal year audit period, and selected District actions taken prior and subsequent thereto. Unless otherwise indicated in this report, these records and transactions were not selected with the intent of statistically projecting the results, although we have presented for perspective, where practicable, information concerning relevant population value or size and quantifications relative to the items selected for examination.

An audit by its nature does not include a review of all records and actions of management, staff, and vendors, and as a consequence, cannot be relied upon to identify all instances of noncompliance, fraud, waste, abuse, or inefficiency.

In conducting our audit, we:

- Reviewed applicable laws, rules, Board policies, District procedures, and other guidelines, and interviewed District personnel to obtain an understanding of applicable processes and administrative activities and the related requirements.
- Reviewed Board information technology (IT) policies and District procedures to determine whether the policies and procedures addressed certain important IT control functions such as risk assessment, security, and disaster recovery.
- Evaluated District procedures for maintaining and reviewing IT user access to IT data and resources. We examined access privileges of the 36 IT users with access to two selected functions within the District enterprise resource planning system finance and human resources applications to determine the appropriateness and necessity of the access based on job duties and user account functions and whether the access prevented the performance of incompatible duties.
- Evaluated District procedures for protecting the sensitive personal information of students, including social security numbers. Specifically, from the population of 168 IT users who had access to sensitive personal student information, we examined the access privileges of 30 selected IT users to evaluate the appropriateness and necessity of the access privileges based on job duties.

- Examined selected security settings to determine whether authentication controls were configured and enforced in accordance with IT best practices.
- Determined whether the District had established a comprehensive IT risk assessment to document the District's risk management and assessment processes and security controls intended to protect the confidentiality, integrity, and availability of data and IT resources.
- Inquired whether the District had any expenditures or entered into any contracts under the authority granted by a state of emergency, declared or renewed during the audit period, to evaluate the reasonableness of District actions.
- For the charter school that closed effective June 30, 2021, evaluated District procedures to determine whether the charter school was required to be subjected to an expedited review pursuant to Section 1002.345, Florida Statutes; whether applicable funds and property appropriately reverted to the District; and whether the District did not assume debts of the school, except as previously agreed upon by the District.
- Determined whether payments to the new charter school that opened for the 2021-22 school year were properly calculated and supported.
- Examined the District Web site to determine whether the 2021-22 fiscal year proposed, tentative, and official budgets were prominently posted pursuant to Section 1011.035(2), Florida Statutes. In addition, we determined whether the Web site contained the required graphical representations, for each public school within the District and for the District, of summary financial efficiency data and fiscal trend information for the previous 3 years, and a link to the Web-based fiscal transparency tool developed by the Florida Department of Education (FDOE).
- Pursuant to Section 1013.64(6)(d)2., Florida Statutes, examined the District's 2021 cost of construction report for the one construction project with student stations completed during the 2021 calendar year to determine whether student station cost was accurately reported and complied with the student station cost limits established by Section 1013.64(6)(b)1., Florida Statutes.
- Examined District records to determine whether the Board had adopted appropriate school safety policies and the District implemented procedures to ensure the health, safety, and welfare of students and compliance with selected provisions of Sections 1006.07 and 1006.12, Florida Statutes.
- Examined District records to determine whether the Board had adopted appropriate mental health awareness policies and the District had implemented procedures to promote the health, safety, and welfare of students and ensure compliance with Section 1012.584, Florida Statutes, and State Board of Education (SBE) Rule 6A-1.094124, Florida Administrative Code.
- From the population of \$1.8 million total workforce education program funds expenditures for the period July 1, 2021, through May 19, 2022, selected expenditures totaling \$1.4 million and examined supporting documentation to determine whether the District used the funds for authorized purposes (i.e., not used to support K-12 programs or District K-12 administrative costs).
- From the population of 200 industry certifications eligible for the 2021-22 fiscal year performance funding, examined 27 selected certifications to determine whether the District maintained documentation for student attainment of the industry certifications.
- Examined District records supporting 1,434 reported contact hours for 30 selected students from the population of 16,349 contact hours reported for 226 adult general education instructional students during the Fall 2021 Semester to determine whether the District reported the instructional contact hours in accordance with SBE Rule 6A-10.0381, Florida Administrative Code.
- Evaluated District controls over District school-age childcare fee collections.

- From the population of \$5.2 million total teacher salary increase allocation payments for the audit period, examined District records supporting payments totaling \$143,848 to 30 teachers and the required reports submitted to the FDOE (salary distribution plan and expenditure report) to determine whether the District submitted applicable reports to the FDOE and used the funds in compliance with Section 1011.62(16), Florida Statutes (2021).
- Examined District records for the audit period for 29 contractor workers selected from the population of 1,562 contractor workers to assess whether individuals who had direct contact with students were subjected to the required fingerprinting and background screening.
- Examined Board policies, District procedures, and related records for the audit period for 30 volunteers selected from the population of 8,754 volunteers to determine whether the District searched prospective volunteers' names against the Dru Sjodin National Sexual Offender Public Web site maintained by the United States Department of Justice, as required by Section 943.04351, Florida Statutes.
- Evaluated the effectiveness of Board policies and District procedures addressing the investigation requirements of all reports for alleged misconduct to determine the sufficiency of those policies and procedures to ensure compliance with Section 1001.42 (7)(b)3., Florida Statutes.
- Evaluated Board policies and District procedures to ensure that health insurance was provided only to eligible dependents.
- From the population of 335 athletic salary supplements totaling \$1.3 million, examined District records supporting 38 supplements totaling \$138,047 to determine whether the supplements were properly supported, approved, and paid in accordance with Board policies and District procedures.
- Communicated on an interim basis with applicable officials to ensure the timely resolution of issues involving controls and noncompliance.
- Performed various other auditing procedures, including analytical procedures, as necessary, to accomplish the objectives of the audit.
- Prepared and submitted for management response the findings and recommendations that are included in this report and which describe the matters requiring corrective actions. Management's response is included in this report under the heading **MANAGEMENT'S RESPONSE**.

AUTHORITY

Section 11.45, Florida Statutes, requires that the Auditor General conduct an operational audit of each school district on a periodic basis. Pursuant to the provisions of Section 11.45, Florida Statutes, I have directed that this report be prepared to present the results of our operational audit.

riel 7. Norman

Sherrill F. Norman, CPA Auditor General

MANAGEMENT'S RESPONSE



Dr. Karen R. Barber Superintendent of Schools

6032 Highway 90 Milton, FL 32570 Phone: 850/983-5150 E-mail: <u>barberk@santarosa.k12.fl.us</u>

Mission: "To love, educate, and prepare all students for graduation and a successful future"

October 12, 2022

Sherrill F. Norman, CPA Auditor General Claude Denson Pepper Building, Suite G74 111 West Madison Street Tallahassee, FL 32399-1450

Dear Ms. Norman:

Pursuant to the provisions of Section 11.45 (4)(d), Florida Statutes, I am submitting to you, in writing, statements of explanation (compiled from the responses as received from those in positions of responsibility of a given area) concerning the items presented in the preliminary and tentative audit findings for the fiscal year ended June 30, 2022. As a matter of organization and clarification, the responses can be referenced using the headings as submitted from your office.

Finding No. 1: School Safety

Response: Current contracts that exist with both the Santa Rosa Sheriff's Department and the City of Gulf Breeze Police Department will be amended with language specifically stating that SRO's must complete the CIT training prior to being assigned to a school. However, in the event of a shortage or inability to obtain the training, such training will be completed in no more than 60 days absent extenuating circumstances. Again, the purpose of the 60-calendar day timeframe is due to potential personnel changes that may occur during the school year or prior to the starting of the school year while also being contingent upon when the CIT course is made available. In addition, the school district has created a spreadsheet that will be used to document all required trainings (to include CIT). Certificates and other forms of documentation concerning course completion will be kept on file in the office of the Director of School Safety to ensure compliance with State law.

Finding No. 2: Mental Health Awareness and Assistance Training and Instruction Response: In response to this finding, student absences were a factor in the 25% of students who did not complete all five hours. These absences were mostly Covid-related, but there were some absences due to parents holding their child out of school to avoid lesson participation, even when makeup opportunities were offered. Other factors of student incompletion related to those students who were Hospital/Homebound and ACCESS students whose cognitive abilities prevented them from understanding the

 DISTRICT 1
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content or Dual-enrolled students who were never physically on campus. DE students were offered make up opportunities via TEAMS.

As a district, we are establishing procedures to ensure our students complete the full five hours of instruction via our Suite 360 online program by:

- Re-training all Assistant Principals on Suite 360 dashboard during first AP meeting in September
- Mental Health Coordinator scheduling preset curriculum for all schools to ensure that all students have been assigned the appropriate lessons
- Requiring all schools to submit Implementation Plans for approval by the Mental Health Coordinator prior to beginning lessons
- · Requiring all secondary grades to start lessons during first semester
- Requiring all lessons be completed by May 1

In response to 69% of employees being trained, we are currently working towards the 80% trained due by July 2023 as stated in HB 1421. Since this requirement started in 2018, our district has offered and facilitated 115 Youth Mental Health First Aid Classes. Nine classes were cancelled in March and April 2020 when school was not in session due to Covid. When the curriculum changed in 2020 because of the pandemic, all trainers completed additional training hours to meet the new requirements of the 2.0 curriculum and new blended model (part online/part in person). Covid also created sub shortages, so classes were offered outside of regular working hours and stipends were given to participants who completed these classes. Even though classes were offered after hours, including weekends, there was less participation compared to classes scheduled during regular school hours. The learning platform also changed four different times over the past two years (National Council Portal, ProProfs, Cornerstone, MHFA Connect, now back to ProProfs) which added to any delay of class scheduling. Each time this changed, the state issued additional training for project coordinators and trainers prior to initiating and scheduling classes.

As a district, we are establishing procedures to ensure at least 80% all school personnel within the district receive Youth Mental Health First Aid by July 2023 by:

- Scheduling multiple classes on planning days so substitutes will not be required, and employees have an additional option when students are not in attendance
- Utilizing FOCUS to keep track of certification dates and recertification due dates of employees to ensure accurate recordkeeping of employees who are trained
- · Retraining trainers on delivery/curriculum changes

DISTRICT 1	DISTRICT 2	DISTRICT 3	DISTRICT 4	DISTRICT 5
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• Training three additional trainers to add to our current 12 trainers

Finding No. 3: Adult General Education Classes

<u>Response</u>: The following are corrective actions we have taken and those we are in the process of implementing:

- With the assistance of ITS, we have ceased running the automated process in FOCUS that was automatically withdrawing students who have six consecutive absences.
 - a. Going forward, this FLDOE rule will be met by manual withdrawal of students in FOCUS at the specified time (six consecutive absences).
 - b. The data clerk who enters this information now knows what to look for to prevent a recurrence of this error.
- 2. We corrected the data for the affected students and submitted this corrected data through the appropriate process to FLDOE.
- 3. As a secondary safeguard, we are in the process of developing a report in FOCUS to identify the funding end dates of students who have withdrawn and who reenrolled. Once developed, this report will be reviewed quarterly to confirm we are not under reporting hours due to this issue.

Finding No. 4: Information Technology User Access Privileges Response:

- ITS created a report listing everyone with access to student SSNs. Using that report, ITS was able to reduce the number of employees with access to student SSNs to 12
- ITS will implement a documented periodic student SSN access review procedure no later than January 2023
- Effective immediately, access to student SSNs may not be granted without the documented approval of the Assistant Superintendent of Information Technology or the Superintendent

Finding No. 5: Information Technology Risk Assessment Response:

- The district has active threat protection components in place and will also deploy an additional system no later than March 2023
- The district is also in the process of implementing various MFA options through a commercial Identity Management Provider. MFA will be required based on position

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 In addition, to stem unintentional security from within the district, ITS will require cyber-security training for employees based on their position starting no later than January 2023

Finding No. 6: Information Technology – Logging and Monitoring of System Activity

Response:

- The district is restructuring where publicly available and secured cloud-based file *content* is stored to improve access control and auditing functionality. Additionally, ITS has established an automated monitoring tool to detect the use of SSNs or similar confidential information data in those files. This tool will be implemented on a larger scale where that *content* is stored
- We are aware of the finding and taking steps to address it

In conclusion, let me reflect the sincere feeling of our school board and staff concerning the professional manner in which your staff conducted this audit. In the process of the audit, there always exists a mutual professional respect and consideration of each one's responsibility.

Sincerely,

Van N. Barth

Dr. Karen Barber Superintendent of Schools

DISTRICT 1 Linda Sanborn DISTRICT 2 Elizabeth Hewey DISTRICT 3 Carol Boston DISTRICT 4 Charles Elliott DISTRICT 5 Wei Ueberschaer