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Introduction

Mental Health Assistance Allocation Plan

s. 1006.041, F.S.

MHAA Plan Assurances

The District Assures

One hundred percent of state funds are used to establish or expand school-based mental health care; train educators and other school staff in detecting and responding to mental health issues; and connect children, youth and families with appropriate behavioral health services.

Yes

Mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses or incentives

Yes

Other sources of funding will be maximized-to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants).

Yes

Collaboration with FDOE to disseminate mental health information and resources to students and families.

Yes

A system is included for tracking the number of students at high risk for mental health or co-occurring substance use disorders who received mental health screenings or assessments; the number of students referred to school-based mental health services

Yes

Review for compliance the Mental Health Assistance Allocation Plans submitted by Charter Schools who opt out of the District's MHAAP.

Yes

Curriculum and materials purchased using MHAA funds have received a thorough review and all content is in compliance with State Board of Education Rules and Florida Statutes.

Yes

A school board policy or procedure has been established for

Students referred to a school-based or community-based mental health services provider, for mental health screening for the identification of mental health concerns and students at risk for mental health disorders are assessed within 15 calendar days of referral.

Yes

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

Yes

Community-based mental health services are initiated within 30 calendar days of referral.

Yes

Individuals living in a household with a student receiving services are provided information about behavioral health services through other delivery systems or payors for which such individuals may qualify if such services appear to be needed or enhancements in those individuals' behavioral health would contribute to the improved well-being of the student.

Yes

District schools and local mobile response teams use the same suicide screening instrument approved by FDOE pursuant to s. 1012.583, F.S., and Rule 6A-4.0010, F.A.C.

Yes

Assisting a mental health services provider or a behavioral health provider as described ins. 1006.041, F.S., respectively, or a school resource officer or school safety officer who has completed mental health crisis intervention training in attempting to verbally de-escalate a student's crisis situation before initiating an involuntary examination pursuant to s. 394.463, F.S. Such procedures must include strategies to de-escalate a crisis situation for a student with a developmental disability as that term is defined ins. 393.063, F.S.

Yes

The requirement that in a student crisis situation, the school or law enforcement personnel must make a reasonable attempt to contact a mental health professional who may initiate an involuntary examination pursuant to s. 394.463, F.S., unless the child poses an imminent danger to self or others before initiating an involuntary examination pursuant to s. 394.463, F.S. Such contact may be in person or using telehealth, as defined ins. 456.47, F.S. The mental health professional may be available to the school district either by contracts or interagency agreements with the managing entity, one or more local community behavioral health providers, the local mobile response team, or be a direct or contracted school district employee. Note: All initiated involuntary examinations located on school grounds, on school transportation or at a school sponsored activity must be documented in the Involuntary Examinations and Restraint and Seclusion (IERS) platform.

Yes

Parents of students receiving services are provided information about other behavioral health services available through the student's school or local community-based behavioral health service providers. Schools may meet this requirement by providing information about and internet addresses for web-based directories or guides for local behavioral health services.

Yes

The Mental Health Assistance Allocation Plan must be focused on a multitiered system of supports to deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses. s. 1006.041, F.S.

Yes

District Program Implementation

Evidence-Based Program	Base Education
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Base Ed is a comprehensive online student mental health platform. The program is recommended by CASEL. The curriculum modules are flexible and allow educators to use different modalities to present the content. Topics covered with the Base Ed program at Tier 1 include: Anxiety, coping strategies, suicide awareness and prevention, substance abuse and misuse, stress management, self-esteem, and mindfulness.</p> <p>Base Ed will be for Tier 2 to tailor interventions to individual students and groups based on their needs. Some of the modules that will be used for Tier 2 include: self-regulation, anger management, truancy, and restorative practices.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>During selected courses, teachers will administer the Base Ed curriculum weekly. Students will learn to identify their feelings and how to address their concerns. Students will engage in class discussions based on the presented materials.</p> <p>The Base Ed program allows students to share their thoughts and feelings through journalistic introspection. If/when a supervising adult receives a real-time alert of a student submitting an entry with words that evidence concern of the student's well-being, the adult will immediately contact the school counselor to follow up with the student. After meeting with the student, the counselor will determine if the student needs to further services and/or to be enrolled in the Tier 2 modules that will be tailored to the student's individual needs.</p>	
<p>Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.</p>	
<p>Students who are at high risk for mental-health or co-occurring substance abuse diagnoses, will be enrolled in the Tier 2 modules that are appropriate for the student's needs. The school counselor will monitor the student's progress in these modules and will follow-up with the student to discuss their progress.</p>	

Evidence-Based Program	Individual Counseling
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
Students exhibiting any warning signs of requiring additional support during classroom conversations of topics based on the Base Ed Program, will be referred to the School Guidance Counselor or a community-based provider for further assistance.	
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.	
Students exhibiting any warning signs of requiring additional support during classroom conversations of topics based on the Base Ed Program, will be referred to the School Guidance Counselor. If the school guidance counselor notices a trend amongst the populations that he/she feels could be best addressed through group therapy, they will schedule these sessions to occur during the school day. These counselors will provide one on one time with students exhibiting the further need for assistance.	
Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.	
Students requiring mental health therapy that is above what the school has offered, will be referred to a community-based provider. This provider will be brought in to to provide the students additional support on an individual basis at school. Any student that has had one or more mental health or co-occurring substance abuse diagnoses, or is at high risk of such diagnoses will also be referred to a community-based provider for additional support.	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

1:474

2023-2024 proposed Ratio by June 30, 2024

1:474

School Social Worker

Current Ratio as of August 1, 2023

1:1897

2023-2024 proposed Ratio by June 30, 2024

1:1897

School Psychologist

Current Ratio as of August 1, 2023

1:1897

2023-2024 proposed Ratio by June 30, 2024

1:1897

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

1:948

2023-2024 proposed Ratio by June 30, 2024

1:948

Direct employment policy, roles and responsibilities

Explain how direct employment of school-based mental health services providers (school psychologists, school social workers, school counselors and other licensed mental health professionals) will reduce staff-to-student ratios.

The certified school psychologist is available to all students at all schools. Both elementary schools and the middle school have full time certified guidance counselors. The district contracts with a licensed clinical social worker and two licensed mental health counselors. There will be one mental health counselor assigned to one elementary and the middle school and another counselor assigned to the other elementary school and the high school. High school students may also receive mental health services (counseling and/or coaching) virtually through the Gaggle platform. By assigning providers to specific schools the amount of time spent providing mental health services to students by student services personnel will increase. Outside agencies will also provide services to all schools in the district, increasing the amount of time to students and reducing student to provider ratios.

Describe your district's established policies and procedures to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).

The district has school board policies and procedures to ensure that students receive mental health services in a timely manner. These policies address: upon the receipt and acceptance of a student being referred, with appropriate consents, a mental health screening for the identification of mental health concerns and the assessment of students at risk for mental health disorders will occur within 15 days of the referral. School-based mental health services will be initiated within 15 days after identification and assessment, and support by community-based mental health service providers for students who are referred for mental health services must be initiated within 30 days after the school or district make a referral.

Describe the role of school based mental health providers and community-based partners in the implementation of your evidence-based mental health program.

The Director of Student Services meets, at least once a month, with mental health personnel to discuss students and care. Community based providers, ex. Meridian Behavioral Health, will have client's consent to share information with the district mental health staff. These providers provide monthly data on students who are active on their case load, students who may have declined services, students whose treatment has been completed, closed cases, and number of times a student received services in a month. Other community service providers, ex. CAT team, will also have consent from their clients to provide the school district with monthly updates on the student's progress, and to exchange any information that may be needed to assist the student.

Community Contracts/Interagency Agreements

List the contracts or interagency agreements with local behavioral health providers or Community Action Team (CAT) services and specify the type of behavioral health services being provided on or off the school campus.

Provider: Kim Carpenter-Herring, M.S.W, L.C.S.W. - Counseling, assessment, case management, crisis intervention (if MRT is unavailable)

Provider: Gaggle.net, Inc- video mental health therapy, counseling and coaching services, assessment

Agency: Meridian Behavioral Healthcare Inc.- Behavior assessment, behavior analysis, prevention programs, Mobile Response Team

Agency: CAT Team-Meridian Behavioral Healthcare, Inc.- comprehensive, intensive, community-based treatment to families

Agency: CAT Team- Chrysalis Health- comprehensive, intensive, community-based treatment to families

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP)

\$ 206,599.00

Unexpended MHAA funds from previous fiscal years

\$ 34,417.00

Grand Total MHAA Funds

\$ 241,016.00

MHAA planned Funds and Expenditures Form

Please complete the MHAA planned Funds and Expenditures Form to verify the use of funds in accordance with (s.) 1006.041 Florida Statutes.

The allocated funds may not supplant funds that are provided for this purpose from other operating funds and may not be used to increase salaries or provide bonuses. School districts are encouraged to maximize third-party health insurance benefits and Medicaid claiming for services, where appropriate.

The following documents were submitted as evidence for this section:

No files were uploaded

School District Certification

This application certifies that the **Dixie District Schools** School Superintendent and School Board approved the district's Mental Health Assistance Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with the statutory requirements for the mental health assistance allocation in accordance with s. 1006.041(14), F.S.

Note: The charter schools listed below have **Opted Out** of the district's Mental Health Assistance Allocation Plan and are expected to submit their own MHAAP to the District for review.

Charter Schools Opting Out

0043 - Kinder Cub School

School Board Approval Date

Monday 7/24/2023