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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	Positive Behavior Intervention & Supports (PBIS)
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Positive Behavioral Interventions and Supports (PBIS) is an evidence- based/three-tiered framework to improve and integrate all of the data, systems, and practices affecting student outcomes every day. PBIS creates schools that support everyone – especially students with disabilities – for success.”-Center on PBIS</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>As an evidence-based program appropriate for Tier 1 support, students' response to PBIS implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to social, emotional, behavioral problems, depression, anxiety disorders, trauma, and violence.</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>PBIS is a foundational strategy that is reflected in the work of all school staff. Teachers, administrators and Student Services personnel take a leadership role in the implementation of core strategies such as: working with key stakeholders (including families) to develop culturally responsive school-wide Guidelines for Success (GFS), connecting GFS to common area and classroom expectations, developing plans to explicitly teach expected behavior, reinforcing students for demonstrating expected behavior and monitoring effectiveness through a data-based problem-solving approach.</p> <p>PBIS is implemented while being inclusive of mental health supports, trauma-informed practices, restorative practices and culturally responsive supports to meet the needs of all students within a multi-tiered system of supports.</p> <p>When core PBIS strategies are insufficient, then supplemental or intensive re-teaching and individualization of core strategies are implemented with increased support from Student Services personnel.</p>	

Evidence-Based Program	Check and Connect
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Check & Connect is an intervention used with K-12 students who show warning signs of disengagement with school and who are at risk of dropping out. At the core of Check & Connect is a trusting relationship between the student and a caring, trained mentor who both advocates for and challenges the student to keep education salient. Students are referred to Check & Connect when they show warning signs of disengaging from school, such as poor attendance, behavioral issues and/or low grades.</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. Check & Connect is not an early identification tool, but it will be implemented to support at risk students as indicated below.</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>Check & Connect will be implemented as a school-based program with K-12 students. School based mentors meet with students regularly (e.g. monthly, weekly) depending on intensity of need.</p>	

Evidence-Based Program	Harmony, Social & Emotional Learning (Harmony SEL)
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
Harmony is a social-emotional learning program for PreK-6 grade students designed to foster communication, connection and community both in and outside the classroom and develop students into compassionate and caring adults.	
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.	
As an evidence-based program appropriate for Tier 1 support, students' response to Harmony implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to social, emotional, behavioral problems, depression, anxiety disorders, and violence.	
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.	
School counselors will include Harmony in the School Counselor Universal Planning Guide. With flexible pacing plans, teachers will be able to use Harmony lessons to enhance restorative circles. School psychologists and school social workers will provide the Harmony lessons during individual or group sessions to support application in various settings.	

Evidence-Based Program	Second Step
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Second Step is a holistic approach to building supportive communities for every child through social-emotional learning. Universal, classroom-based, social-emotional learning curriculum for Pre-Kindergarten-Grade 8 that nurtures children's social-emotional competence and foundational learning skills. Web-based, teacher-facilitated lessons and advisory activities, along with program training and resources to help middle school students build social-emotional skills for life.</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>As an evidence-based program appropriate for Tier 1 support, students' response to Second Step implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to social, emotional, behavioral problems, depression, anxiety disorders, trauma, and violence.</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>School-based mental health providers (school counselors, school psychologists and school social workers) will utilize the Second Step program during individual, whole classroom or smaller group settings. Second Step can also be delivered by a classroom teacher and integrated into lesson plans.</p>	

Evidence-Based Program	WhyTry
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>“WhyTry is an evidence-based social and emotional learning (SEL) program. WhyTry has proven to be a successful intervention tool in a variety of settings, populations, and age groups. WhyTry teaches life skills critical to the future success of every student or adult. WhyTry is based on sound therapeutic approaches such as: Cognitive Behavior Therapy, Client-Centered Therapy, Reality Therapy, and Solution-Focused Brief Therapy.”-WhyTry</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. Why Try is not an early identification tool, but will be implemented to support at risk students as indicated below.</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>Why Try is implemented as a school-based program with K-12 students. School-based mental health providers (e.g., school counselors, school psychologists, and school social workers) implement structured lessons with students.</p>	

Evidence-Based Program	Resilience Education Program (REP)
Tier(s) of Implementation	Tier 2
Describe the key EBP components that will be implemented.	
<p>“REP is a targeted Tier 2 intervention for students at risk for internalizing concerns, such as depression and anxiety. A series of studies have provided evidence of REP efficacy, usability, and feasibility. REP intervention is intended for students in grades 4-8 and is built upon three major components: Cognitive-Behavioral Instruction, Check In/ Check Out, and Resilient Families.” -School Mental Health Collaborative</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. Why Try is not an early identification tool, but will be implemented to support at risk students as indicated below.</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>Resiliency Education Program (REP) is implemented as a school-based program with students in 4th-8th grade. School-based mental health providers (e.g., school counselors, school psychologists, and school social workers) implement structured lessons with students.</p>	

Evidence-Based Program	Cognitive Behavioral Intervention for Trauma in Schools (CBITS)
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>The Cognitive Behavior Intervention for Trauma in Schools (CBITS) program is a school-based, group and individual intervention. It is designed to reduce symptoms of post-traumatic stress disorder (PTSD), depression, and behavioral problems, and to improve functioning, grades and attendance, peer and parent support and coping skills. CBITS was designed and tested with students ages 11-15 and has been implemented nationwide in late elementary schools (4th-6th grades), middle schools, and high schools.</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. CBITS is not an early identification tool, but it will be implemented to support at risk-students to address behavioral problems, depression, anxiety disorders, and trauma.</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>School-based mental health providers (e.g. school counselors, school psychologists, and school social workers) implement structured lessons in both group and individual sessions (ten group sessions and one to three individual sessions) of similar structure. Sessions typically occur once per week but can increase or decrease in frequency depending on need.</p>	

Evidence-Based Program	Insights to Behavior
Tier(s) of Implementation	Tier 3
Describe the key EBP components that will be implemented.	
<p>Insights to Behavior is a web-based application that empowers any user to quickly create a Behavior Intervention Plan with research-based strategies. It is based on Applied Behavior Analysis (ABA) best practices including: observe and define the maladaptive behavior; assess the behavior to determine the underlying function; identify research-based intervention strategies; and track progress and make datadriven decisions.</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. Insights to Behavior is not an early identification tool, but it will be implemented to support at risk-students to address social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and trauma, and violence.</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>Trained Functional Behavior Assessment (FBA) & Positive Behavior Intervention Plan (PBIP) Facilitators including behavior specialists, school counselors, school psychologists, and school social workers will implement FBA procedures and develop individual student PBIPs collaboratively with teachers, parents, and other team members to support successful student behavior.</p>	

Evidence-Based Program	Safe & Civil Schools Classroom Management (CHAMPS)
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
<p>Materials from Safe & Civil Schools offer proactive and positive strategies for improving:</p> <ul style="list-style-type: none"> • Schoolwide responsibility & discipline • Classroom management • Positive Behavior Support • Motivation • School culture & climate 	
<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>As an evidence-based program appropriate for Tier 1 support, students' response to CHAMPS classroom management strategies will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behavior related social and behavioral problems at school.</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>When core CHAMPS classroom management strategies are insufficient, then supplemental or intensive re-teaching and individualization of core strategies occurs with increased support from student services personnel.</p>	

Evidence-Based Program	Prepare Crisis Response
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>The PREPaRE curriculum has been developed by the National Association of School Psychologists (NASP) as part of NASP’s decade- long leadership in providing evidence-based resources and consultation related to school crisis prevention and response. PREPaRE training is ideal for schools committed to improving and strengthening their school safety and crisis management plans and emergency response.</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>Other evidence-based programs identified in our plan will support early identification as Tier 1 universal supports. PREPaRE is not an early identification tool, but will be implemented to support at risk students as indicated below.</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>All student service staff are expected to have PREPaRE Workshop 2 training to support the mental health response in the aftermath of a crisis. Student Services leadership invests resource to provide in-house trainers and monitors percentage of trained staff. When a crisis occurs, trained school-based mental health providers work with the broader incident response team at the school and district to provide immediate support to impacted students with an emphasis on triaging those who are more likely to be at risk.</p>	

Evidence-Based Program	Olweus Bullying Prevention
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>The Olweus Bullying Prevention Program is designed to improve K-12 peer relations and make schools safer, more positive places for students to learn and develop. Goals of the program include reducing existing bullying problems among students and preventing the development of new bullying problems. Olweus is a comprehensive approach that includes schoolwide, classroom, individual and community components. The program is focused on long-term change that creates a safe and positive school climate.</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>As an evidence-based program appropriate for Tier 1 support, students' response to Olweus implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to social, emotional, behavioral problems, substance use disorders, and violence.</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>Schools will adopt the Olweus Bullying Prevention Program. A school will choose a coordinator and provide training to staff, students and families.</p>	

Evidence-Based Program	Sandy Hook Promise Say Something: Prevent Suicide
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
Sandy Hook Promise Say Something: Prevent Suicide focuses on how students can help a peer in a suicidal crisis. There are parent, school staff, and student training components.	
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.	
As an evidence-based program appropriate for Tier 1 support, students' response to Sandy Hook Promise Say Something: Prevent Suicide implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to suicidal tendencies.	
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.	
Trained facilitators guides students through multi-media content and training module, including facilitated discussion. Students learn about risk and warning signs of suicide and how to access help.	

Evidence-Based Program	Sandy Hook Promise Say Something: Anonymous Reporting System
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
Sandy Hook Promise Say Something: Anonymous Reporting System teaches students how to recognize warning signs and signals especially within social media, from individuals who may be a threat to themselves or others, and to say something to a trusted adult. Students build core social emotional competencies. By knowing the signs and reporting threats of violence entire communities are safer and lives are saved.	
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.	
As an evidence-based program appropriate for Tier 1 support, students' response to Sandy Hook Promise Say Something: Anonymous Reporting System implementation will be considered along with other early warning factors to improve early identification of problems and reduce at-risk behaviors related to social, emotional, behavioral problems, depression, anxiety disorders, violence, substance use disorders, and suicidal tendencies.	
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.	
Trained facilitators guide students through multi-media content and training module, including facilitated discussion. Students learn about risk and warning signs and how to access help and report concerns. Reported concerns are addressed immediately using school and community resources.	

Evidence-Based Program	
Tier(s) of Implementation	[none selected]
Describe the key EBP components that will be implemented.	
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.	
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.	

Direct Employment

MHAA Plan Direct Employment

School Counselor*Current Ratio as of August 1, 2023***1:387***2023-2024 proposed Ratio by June 30, 2024***1:389****School Social Worker***Current Ratio as of August 1, 2023***1:705***2023-2024 proposed Ratio by June 30, 2024***1:709****School Psychologist***Current Ratio as of August 1, 2023***1:859***2023-2024 proposed Ratio by June 30, 2024***1:880****Other Licensed Mental Health Provider***Current Ratio as of August 1, 2023***NA***2023-2024 proposed Ratio by June 30, 2024***NA****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.

PCS Student Services employs Department of Education (DOE) certified school counselors, school psychologists and school social workers (many of whom are also licensed mental health counselors, licensed school psychologists and licensed clinical social workers through the Department of Health) as school-based mental health professionals. An additional DOE-certified school psychologist and a school social worker will be hired to reduce the ratio of staff to students in order to better align to the national recommended ratio models.

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).

As we utilize this funding to increase DOE-certified staff, we also have taken steps to increase the time all Student Services personnel spend providing direct mental health services to students. The strategic changes include: include freeing up school psychologists from time spent on testing by contracting with them to conduct gifted testing beyond the regular work day; allowing them to spend additional time providing mental health supports to children; providing school psychologists an additional half-hour in their work day to help them focus more on direct service during student hours; moving IQ tests to the Q-Interactive Digital platform; assigning a full-time social worker to every high school and most middle schools; training behavior specialists to facilitate Functional Behavior Assessments and Positive Behavior Intervention Plans; encouraging schools to stop using counselors

as Testing Coordinators or Tier 3 Coordinators, or to perform other clerical duties; and conducting focus groups with Student Services staff to gather their input on strategies that would give them more time with students.

One example of a strategy to increase the time spent providing direct mental health services was the implementation of the research-based online Functional Behavioral Assessment Program, Insights to Behavior. During several focus groups, staff reported spending a lot of time completing FBAs, and this online resource has streamlined the process reducing time needed and producing even more effective plans to improve behavior. This has been very successful, and the district has entered into a three-year contract with this program.

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

Staff will be assigned based on formulas to include data points that help anticipate the risk levels of a school's student population. All the staff hired will be Florida DOE-certified in their discipline. Their role includes delivering evidence-based mental health services including assessment, diagnosis, intervention, treatment and recovery. These include but are not limited to: Positive Behavior Interventions and Supports (PBIS); Harmony Social Emotional Learning; Restorative Practices; Second Step; Individual & Group Counseling; ; PREPaRE Crisis Response; Safe and Civil Schools Classroom Management (CHAMPS); Olweus Bullying Prevention; FACE IT for Alcohol, Tobacco and Other Drugs; Sandy Hook Promise – Say Something: Stop Suicide; Why Try?; and Check and Connect.

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.

Directions for Living

Treatment Works is a direct intensive therapy services program model available to all students served by the Pinellas County School system and all charter school that have opted into the PCS Mental Health Plan who have been identified via the Pinellas County School System's District Threat Assessment Team to be in need of intensive mental health and co- occurring substance abuse services. Services will principally be provided in far less than 30 days in the family home and, when appropriate, to strengthen and assist the family in other natural environments such as schools, family friendly

parks, home of support system (family and friends), neighborhood community centers, and places of worship. Services include case management and counseling that can occur every day when needed. Each family participates in an interdisciplinary team staffing meeting every 15 days during their participation in the program at which PCS staff are in attendance. We have also begun to expand the program at the elementary level to provide early intervention with at-risk students prior to significant threats. 86% of students had no additional threats while in the program and 73% were closed successful which is very encouraging for this difficult to treat population.

Suncoast Center for Community Mental Health

The District has contracted with Suncoast Center for Community Mental Health to have licensed mental health therapists on school campuses that are referred by school staff and seen in far less than 30 days. These direct services target emotional and behavioral issues, whether individual, family or system-related, which impede the youth's emotional availability for learning. Therapy seeks to resolve issues and to build upon successful coping skills to support school success and social success for the youth and their families including trauma-informed treatment. 81% of students participating demonstrated improvement as measure by standardized rating scales and teacher/ family reports.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 4,781,147.00

Unexpended MHAA funds from previous fiscal years

\$ 1,013,991.00

Grand Total MHAA Funds

\$ 5,795,138.00

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 **Pinellas County 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

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School Board Approval Date

Tuesday 8/1/2023