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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

<b>Evidence-Based Program</b>	Cognitive Behavioral Intervention for Trauma in Schools (CBITS)
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>The Cognitive Behavioral Intervention for Trauma in Schools (CBITS) is a school-based, group and individual program that is used with grades 5-12 students who have witnessed or experienced traumatic life events of community/school violence, accidents and injuries, physical abuse, domestic violence and/or natural or human-made disasters.</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>Students who participate in CBITS are identified by school-based MTSS/Problem Solving teams. CBITS is delivered by mental health professionals in the school setting upon parental consent. The program consists of ten group sessions, one-to-three individual sessions, two parent psychoeducational sessions, and/or one teacher educational session.</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>CBITS supports and interventions are designed to reduce symptoms of posttraumatic stress disorder (PTSD), depression, and behavioral problems; and improve coping skills, attendance, and academic performance.</p>	

<b>Evidence-Based Program</b>	Support for Students exposed to Trauma (SSET)
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>The Support for Students Exposed to Trauma (SSET) program is a structured approach that aims to reduce distress resulting from exposure to trauma. The program includes a wide variety of skill-building techniques geared toward changing maladaptive thoughts and promoting positive behaviors.</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>School-based MTSS/Problem Solving teams identify students who would benefit from SSET and upon parental consent, students participate in ten 45-minutes lessons designed to be delivered in one class period by school counselors or mental health professionals. The lessons focus on common reactions to trauma, relaxation techniques, coping strategies, learning to approach difficult situations, and problem solving.</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>SSET is designed for students who have witnessed and/or experienced family, school, or community violence, natural or man-made disasters, abuse, accidents or experiencing PTSD. Program supports aim to relieve symptoms of child traumatic stress, anxiety, and functional impairment of students who have been exposed to traumatic events.</p>	

<b>Evidence-Based Program</b>	Positive Behavioral Intervention and Supports (PBIS)
<b>Tier(s) of Implementation</b>	Tier 1
Describe the key EBP components that will be implemented.	
<p>Positive Behavioral Interventions and Supports (PBIS) is an evidenced-based, tiered framework for supporting students' behavioral, academic, social, emotional, and mental health. When implemented with fidelity, PBIS improves social emotional competence, academic success, and school climate. It also improves teacher health and wellbeing. It is a way to create a positive, predictable, equitable and safe learning environment where everyone thrives.</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>PBIS will be implemented at each school level to best meet the needs of the student population. Each school will decide on a continuum of evidenced-based practices to support student needs that engages students, families, and other community members to create a culturally responsive school climate. Each school team will guide the implementation and use data to identify strengths, weaknesses and monitor student progress and response that can guide professional development.</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>Positive Behavioral Interventions and Supports (PBIS) is an evidence-based, tiered framework for supporting students' behavioral, academic, social, emotional, and mental health. Tier I practices are universal strategies that defines positive school/program-wide expectations and prioritize appropriate social, emotional, and behavioral skills. Students are identified for Tier 2 and/or Tier 3 interventions when they do not respond to universal strategies and practices. Students receiving Tier 2 supports are provided individual and/or group interventions targeting their specific needs. At Tier 3, students receive more intensive, individualized support to include wraparound services for families.</p>	

<b>Evidence-Based Program</b>	Cognitive Behavioral Therapy
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
School-based Cognitive Behavioral Therapy (CBT) programs will assist students in developing strategies to solve problems, regulate emotions, and establish helpful patterns of thought and behavior.	
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 who participate in school-based CBT are identified by school-based MTSS/Problem Solving teams. CBT is delivered by Florida State University School Psychologist Doctoral students in the school setting upon parental consent. One doctoral FSU student will be assigned to each school and come to the school one full day per week to provide counseling. They will see up to 6 "clients" each day, with a "client" being a group of students or individual students, depending on the needs of the school.	
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.	
Cognitive Behavior Therapy supports and interventions are designed to reduce symptoms of posttraumatic stress disorder (PTSD), depression, and behavioral problems; and improve coping skills, attendance, and academic performance.	

<b>Evidence-Based Program</b>	New Horizons
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>New Horizons is a program that addresses various social problems that youth may be experiencing. The goal is to increase knowledge of substance abuse prevention, communication, anger management, and decision-making skills.</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>New Horizons is a 16-session program facilitated by a Social worker/wellness specialist in a group or individual session. Topics that are covered include positive self-esteem, developing effective coping skills, establishing positive decision-making skills, anger management skills, understanding healthy versus unhealthy relationships, academic success planning strategies, stress management skills, the dangers of alcohol and other drugs, personal responsibility, and effective communication practices. Students at risk of academic failure, substance uses, anger management issues, absenteeism, and law enforcement involvement are referred by teachers, parents, or the school-based MTSS/Problem Solving Team and are enrolled upon parental consent.</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>New Horizons supports enhance the ability of students to make constructive choices to increase positive and responsible behaviors both at school and in the community.</p>	

<b>Evidence-Based Program</b>	Bounce Back
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
Bounce Back is a school-based small group intervention for elementary students exposed to stressful and/or traumatic events. Bounce Back teaches students ways to cope with and recover from traumatic experiences that they have endured.	
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.	
School-based MTSS/Problem Solving teams identify students who would benefit from Bounce Back and upon parental consent, student participate in 10 group sessions, 1-3 group parent sessions, and 2-3 individual student sessions. Bounce Back utilizes structured group activities that help our youth who have experienced something traumatic.	
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.	
Bounce Back supports and interventions target symptoms of child traumatic stress, anxiety, depression and functional impairment for students who have been exposed to traumatic events to improve cognitive-behavioral coping strategies, adds feeling identification and positive activities.	

**Direct Employment**

**MHAA Plan Direct Employment**

**School Counselor**

*Current Ratio as of August 1, 2023*  
**478/1**

*2023-2024 proposed Ratio by June 30, 2024*  
**414/1**

**School Social Worker**

*Current Ratio as of August 1, 2023*  
**971/1**

*2023-2024 proposed Ratio by June 30, 2024*  
**887/1**

**School Psychologist**

*Current Ratio as of August 1, 2023*  
**1725/1**

*2023-2024 proposed Ratio by June 30, 2024*

1725/1

**Other Licensed Mental Health Provider***Current Ratio as of August 1, 2023***15529/1***2023-2024 proposed Ratio by June 30, 2024***15529/1****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.**

Direct employment of fifteen (15) school-based mental health service providers and two (2) licensed mental health professional to provide mental health supports to students, referral, and coordination of services for students and families will decrease the ratio of students to staff in the progression toward nationally recommended ratio models. Lowering the professional to student ratio, hiring more School Counselors, School Psychologists, School Social Workers, and Licensed Mental Health Professionals, and empowering these professionals to use their specialized training and skills to carry out their roles and functions within the schools can vastly improve the delivery of mental services in schools.

**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).**

Procedures and strategies used to increase the amount of time student services personnel spend providing direct mental health services to students include:

- Communicating the role of student services personnel to school-site leaders during their regularly scheduled administrator meetings and trainings.
- Providing clerical support staff/assistance to school counseling departments to assist with indirect mental health duties.
- Reviewing and revising staffing allocations based on the school's student mental health needs.
- Utilizing a Student Services personnel assignment model to maximize the amount of time mental health personnel use provide appropriate student-focused activities and interventions.
- Identification of the referral methods and data sources for connecting students to mental health services and supports.
- Interagency agreements with local community mental health providers to partner with school staff in the development of school support plans and to continue individual services to students on campus.

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

School counselors are assigned to each school to help every student improve academic achievement; to support social and emotional development; to enhance student success; and to connect children, youth, and families with appropriate mental and/or behavioral health services.

School psychologists are trained to deal with mental health concerns, behavioral concerns, offer positive behavioral support, academic and classroom support, consultation with teachers, parents, and administrators as well as with individual and group counseling techniques. Services include identifying mental health and educational evidence-based programs to support the student, assisting with designing student support plans, and/or making referrals to community-based mental health and substance abuse providers and agencies for treatment and recovery services.

School social workers are instrumental in furthering the mission of the schools, which is to provide a setting for teaching, learning, and for the attainment of competence and confidence. Services may consist of case management, assistance with attendance follow-up, behavior support, counseling or skills training, holiday program referrals and/or making referrals to community-based mental health and substance abuse providers for treatment and recovery services.

Program Specialists for Behavior are assigned to each school and provide behavior management support services, complete functional behavior assessments, develop positive behavior intervention plans, and identify interventions for students with emotional and behavioral disabilities.

The School counselors, school psychologists, and school social workers along with each individual student's parents and specific instructional staff participate on the school level MTSS team in which the team uses various student data to identify appropriate interventions based on student need.

The CBITS program is a school-based, group, and individual intervention program that will be implemented by trained school social workers and DISC Village mental health providers.

SSET targets students in grades 5-12 and will be implemented by DISC Village mental health providers and trained school counselors with the support of school social workers and school psychologists.

Bounce Back targets K-5 students exposed to at least one traumatic event and will be implemented by DISC Village wellness/mental health providers in the elementary setting.

Positive Behavioral Interventions and Supports (PBIS) supports students' behavioral, academic, social, emotional, and mental health and is implemented by school counselors, social workers, school psychologists, teachers, administrators, and behavioral specialists.

The New Horizons program is implemented by the DISC Village Wellness Specialist in grades 6-12.

### **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.**

- Children's Home Society (\$68,000 - MHAA) - Social Worker Navigator to provide wrap-around services to students and families.
- DISC Village, INC. - Wellness Specialists, individual and group programs on the school campus. (\$441,007 - MHAA) - see EBP
- DISC Village, INC. - Youth Counseling Services, individual counseling on the school campus. (Grant funded through DISC Village & NWFH)
- Capital City Youth Services - Individual and group counseling on the school campus. (Community Partnership)
- Perseverance Integrated - Interagency agreement to provide individual counseling on school campus.
- Big Bend Hospice - Youth Grief Counseling, individual and group on the school campus. (Community Partnership/grant funded)
- Optimal Performance (grant funded)
- The Love, Identify, Foundation, and Encouragement Group (grant funded)
- Neighborhood Medical Center (Interagency agreement)
- Turn About (interagency agreement)

- Apalachee Center Inc. Mobile Response Team (interagency agreement)
- Florida State University College of Education, School Psychology, (interagency agreement)

## MHAA Planned Funds and Expenditures

### Allocation Funding Summary

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

\$ 1,792,482.00

#### Unexpended MHAA funds from previous fiscal years

\$ 0.00

#### Grand Total MHAA Funds

\$ 1,792,482.00

### 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 **Leon 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

1451 - Tallahassee Classical

### School Board Approval Date

Tuesday 7/25/2023