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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

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| Evidence-Based Program | School-wide PBIS |
| Tier(s) of Implementation | Tier 1, Tier 2 |
| Describe the key EBP components that will be implemented. | |
| <p>School-wide PBIS plan is available to all students Pre-K through Grade 12. The goal of this approach is to establish behavioral, social, and emotional supports necessary to facilitate academic, social, and emotional success. Each school in the district participates in the district's PBIS initiative. For students in Tier 2 and Tier 3, The Mental Health and Behavioral Supports department receives school based referrals for service from schools. District behavior personnel work in classrooms, consult with staff, and work with students to provide intervention and supports as needed for students. Mentoring and small groups focused on topics including anger management, social skills, and respect help students struggling on the Tier 2 level. For students on a Tier 3 level, individualized behavioral supports and plans are initiated to promote success.</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>Each of our schools is a PBIS school. School PBIS teams meet monthly to develop PBIS lesson plans as well as to develop and maintain the school-wide PBIS plan. Classroom teachers as well as school staff reinforce the school plan and lesson plans. Additionally, district-level staff assist schools with their PBIS implementation and fidelity checks.</p> <p>PBIS includes the check in/check out initiative and mentoring opportunity that allows students on Tiers 2 and 3 to build relationships with teachers and mental health staff which in turn fosters growth, empowerment, and overall success (mentally, socially, and academically).</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>Decrease in behavior incidents and more emphasis on behavior plans so that behaviors and plans may be progress monitored for improvements and fading.</p> <p>Additionally, increase in emotional regulation and overall mental health wellness based on strategies learned through the implementation of PBIS.</p> | |

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| 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 K-5 program which focuses on healthy life skills (including good decision making, healthy relationships, conflict resolution, and working with others), bullying prevention, and child protection. It integrates this learning into the classroom.</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>It is presented to Kindergarten through 5th grade students in the district and is administered by the classroom and special area teachers.</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>Facilitation of the Second Steps curriculum will improve skills associated with emotional regulation, coping strategies, effective communication, behavior management, and bullying prevention. Each unit has a summary performance task for the students to complete to check for understanding.</p> | |

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| Evidence-Based Program | Monthly Wellness Videos |
| Tier(s) of Implementation | Tier 1 |
| Describe the key EBP components that will be implemented. | |
| <p>The district is implementing monthly wellness videos that will include the five hour mental health and resiliency education instruction as well as other preventative information such as dealing with trauma and violence. The district uses evidenced based information and research in the creation of the videos. The district has been creating and facilitating videos since the 2019-2020 school year.</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>There are ten videos shown per school year. Classroom teachers allot 30 minutes for each video and discussion time. If additional time is needed, follow-up can be offered through crisis counselor and Department of Mental Health and Behavioral Supports.</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>Through the use of these videos developed and recorded by licensed mental health professionals, students will be educated in the topics including developing strategies that foster resiliency such as empathy, perseverance, grit, gratitude, responsibility, critical thinking, problem solving and responsible decision making, self awareness and self-management, mentorship and citizenship, and honesty. In addition, the videos will cover signs/symptoms of mental health disorders and prevention, how to get assistance, reducing stigma, awareness of resources and the process for accessing treatment, healthy coping strategies, suicide prevention and how to help friends and family in need, education in the prevention and awareness of human trafficking, and drug/substance use prevention.</p> <p>Teachers will facilitate discussions and checks for understanding during the 30 minute allotted time slot for each video.</p> | |

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| Evidence-Based Program | Small Groups led by Crisis Counselors |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| <p>Small groups led by crisis counselors, school social workers, and behavior interventionists. These groups focus on cognitive behavioral therapy strategies and different evidence based curricula written by companies such as Human Relations Media and Zones of Regulation. The crisis counselors determine the appropriate evidenced based curriculum and information to meet the needs of the group.</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>Small groups are six week groups facilitated all throughout the school year. Each group is a 30 minute lesson delivered in a weekly time slot. The lesson focuses on different topics including but not limited to anger management, grief, social skills, coping with trauma, problem solving, and emotional regulation. Staff facilitates the groups and mentors students in the group and individually during the curriculum time to help foster mastery of the goals of the curriculum.</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>During these groups, students across all grades and age brackets will learn to deal with life stressors and situations in healthy ways. Students will increase their skills in coping strategies, reducing stress, reducing anxiety, sadness and/or depression, increasing emotional regulation, and decreasing problem behaviors. Pre/post tests are provided. Counselor-led discussions take place during the groups following each facilitated lesson.</p> | |

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| Evidence-Based Program | Start with Hello and Say Something |
| Tier(s) of Implementation | Tier 1 |
| Describe the key EBP components that will be implemented. | |
| <p>These initiatives are offered by Sandy Hook Promise. They teach youth to recognize warning signs and signals, including within social media, from individuals who could be potential threats to themselves or others. Start with Hello for inclusion and to “Say Something” to a trusted adult before a tragedy occurs.</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>The safety teams at each school are trained on the program by Sandy Hook Promise, and schools deliver a school-wide facilitation each fall (Start With Hello) and spring (Say Something).</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 will increase their knowledge in empathy, citizenship, honesty, responsible decision making, problem solving, social cues, self-awareness, and overall health and awareness.</p> <p>Facilitator led discussions take place in the classroom following each completed lesson. Students take part in school wide activities for a week during the implementation period. The activities build throughout the year and continue throughout the spring. District Crisis counselors are always on stand-by to offer additional supports.</p> | |

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| Evidence-Based Program | AlcoholEdu (EverFi) |
| Tier(s) of Implementation | Tier 1 |
| Describe the key EBP components that will be implemented. | |
| AlcoholEdu offers an online alcohol, vaping, and prescription drug use prevention curriculum. It reaches students with a healthy message and encourages them to make safer choices. | |
| 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. | |
| These videos are used at the high school level to educate students as part of required instruction. | |
| 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. | |
| This program covers Tier 1 and does not cover diagnosis, intervention, treatment, and recovery services, but it does focus on student wellness and safety, substance use and prevention, responsible decision making, self awareness and self management. | |

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| Evidence-Based Program | Building Uniquely Diverse and Dynamic Youth (BUDDY) |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| BUDDY is a community volunteer mentoring program developed by the district to place mentors with students needing Tier 2 and 3 supports. | |
| 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. | |
| Mentors commit to meeting with a student for 30 minutes per week for up to one year. All meetings take place on school sites. The goals of this program is to pair students with a trusted adult which is the researched number one protective factor to reduce risk of mental illness for students. The students are referred for attendance, behavior, academic, and other issues that are causing the student to not meet their highest potential. The mentors meet and assist these students to promote success. | |
| 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. | |
| For fidelity and data collection, the program requires that mentors attend a two-hour training to learn basic tenets of mentorship, basic de-escalation, conversation starters, signs of mental distress and how to seek help, and how to report abuse and neglect. | |

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| Evidence-Based Program | First Time Offender Program |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| <p>First Time Offender Program has a goal to keep students who are found in a first time offense situation at their home school (in lieu of alternative placement), to provide counseling and education to the students and family, and to help eliminate a future incident involving illegal alcohol or drug possession.</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>The district has partnered with the Drug Abuse Treatment Association, Inc. (DATA) to help with the facilitation and implementation of the program.</p> <p>This is a 45 day program facilitated by a partnership between our school district and the Drug Abuse Treatment Association (DATA). The students complete the required curriculum that is facilitated by DATA.</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>DATA ensures skill mastery as part of their curriculum. The school district offers other school supports such as mentoring and meetings with Behavior Interventionists, Youth Coordinator, and Crisis Counselors to help ensure future student success.</p> | |

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| Evidence-Based Program | Sources of Strength |
| Tier(s) of Implementation | Tier 1, Tier 2 |
| Describe the key EBP components that will be implemented. | |
| <p>Sources of Strength is a best practice youth suicide prevention initiative designed to use peer networks to change unhealthy norms with the ultimate goal of preventing suicide, substance abuse, and bullying. Efforts are made to increase protective factors, increase connections, promote self awareness and self management, promote perseverance and grit, and to build resiliency.</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>Through peer leaders, peer leader teams, and adult advisors, students are connected into groups and guided to supportive resources. Meetings are held monthly with adult advisors. Monthly campaigns are designed and created by the teams to implement on campus. Peer leaders actively recruit new members for their teams. The goal is that every student on campus is part of a team. This fully inclusive program invites all students to be part of a peer led group to help with social and emotional support which has the overall goal of decreasing the risk of behavioral problems, depression, anxiety disorders, and suicidal tendencies.</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>This program has goals of improving student inclusion, youth-adult connectedness, peer leaders' school engagement, and positive perceptions of adult support for suicidal youth and the acceptability of seeking help. Additionally, it aims to increase peer to peer mentoring as well as adult to peer mentoring.</p> <p>Adult Advisors lead discussions at each meeting, and the peer leaders decide with the advisors on the monthly campaigns for the school.</p> | |

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| Evidence-Based Program | KidSmartz |
| Tier(s) of Implementation | Tier 1 |
| Describe the key EBP components that will be implemented. | |
| KidSmartz is a child safety program that educates children and families about preventing abduction. These videos are used in elementary classrooms to help educate on child trafficking, and they offer education to promote health and safety. | |
| 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. | |
| These videos are embedded into the Wellness Videos that are shown monthly. | |
| 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. | |
| This program covers Tier 1 and does not cover diagnosis, intervention, treatment, and recovery services, but it does focus on student wellness and safety, as well as critical thinking, responsible decision making, and self awareness. | |

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| Evidence-Based Program | Cognitive Behavioral Intervention for Trauma in Schools (CBITS) and Bounce Back |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| Cognitive Behavioral Intervention for Trauma in Schools (CBITS) and Bounce Back includes cognitive behavioral and trauma focused techniques to improve overall student well-being | |
| 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 are invited into these small groups with parent consent. The small groups are six week groups are led by crisis counselors and are facilitated all throughout the school year. Each group is a 30 minute lesson delivered in a weekly time slot. The lessons will focus on trauma informed care and increasing mental wellness, resiliency, self-awareness, and self management. Staff facilitates the groups and mentors students in the group and individually during the curriculum time to help foster mastery of the goals of the curriculum. | |
| 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. | |
| The goals of the small group instruction of these curricula is to decrease post traumatic stress symptoms and to increase emotional regulation. In addition, goals of the training include increasing overall coping strategies, perseverance, positive self awareness and resiliency. | |

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| Evidence-Based Program | Child Safety Matters and Teen Safety Matters (Monique Burr Foundation) |
| Tier(s) of Implementation | Tier 1 |
| Describe the key EBP components that will be implemented. | |
| Child Safety Matters and Teen Safety Matters teaches students to prevent, recognize, and respond appropriately to bullying and cyberbullying. This program also encompasses all types of abuse, relationship abuse, human trafficking, and digital dangers. | |
| 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. | |
| It is presented to elementary and middle school students by their school counselors. The district crisis counselors and school social worker will also supplement the curricula with small groups. | |
| 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. | |
| This program covers Tier 1 and does not cover diagnosis, intervention, treatment, and recovery services, but it does focus on student wellness and safety, building resiliency, and responsible decision making. Additionally, components of the human trafficking curriculum are embedded into the monthly wellness videos. | |

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

1:442

2023-2024 proposed Ratio by June 30, 2024

1:442

School Social Worker

Current Ratio as of August 1, 2023

1:6,200

2023-2024 proposed Ratio by June 30, 2024

1:3,100

School Psychologist

Current Ratio as of August 1, 2023

1:2,066

2023-2024 proposed Ratio by June 30, 2024

1:2,066**Other Licensed Mental Health Provider***Current Ratio as of August 1, 2023***1:2,066***2023-2024 proposed Ratio by June 30, 2024***1:2,066****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 direct employment of mental health service providers allows students needing the most support (Tiers 2 and 3) access to direct care such as counseling, mentoring, and/or small psycho-educational or counseling groups. Students who are identified by either the Universal Screening process or school staff will be placed or referred for further intervention / treatment. Having these direct service providers provide this additional support to students reduces the staff-to-student 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).

Our district reorganized our MTSS to a more consistent, unified approach. We collaborate with Branching Minds which is a cloud based platform that has streamlined and personalized student supports. A main goal of better streamlining this process is to increase the amount of time student services personnel (i.e. school counselors, crisis counselors, school social worker(s)) spend providing direct mental health services. Our district uses our school social worker and three district crisis counselors to help implement support services for our students. They run small groups, mentor students, and facilitate threat and suicide assessments to promote student support and safety.

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

District crisis counselors, behavior interventionists, and our youth coordinators lead small groups, mentor, and follow-up with students needing additional supports. The extra support provided is aligned to the supports already offered through the district. Community-based partners work closely with our school social worker and mental health department to share treatment plans and progress. They work to align their treatment plans to help the students attain optimal success academically, socially, and emotionally. Quarterly, we meet to discuss agency updates, progress, and concerns.

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.

Agency: Suncoast Mental Health; Providers: LMHC (2), LCSW (1), TCM (6), Masters Level Clinicians (6), Psychiatrist (1), ARNP (1); Services Provided: Psychiatry, Counseling, and TCM (Direct and Indirect Services); Funding Source: N/A

Agency: Hibiscus Children's Center; Providers: LMHC (1), Masters Level Clinicians (3); Services Provided: Counseling (Direct Services); Funding Source: N/A

Agency: Helping People Succeed; Providers: TCM (1), Masters Level Clinicians (2), Psychiatrist (3); Services Provided: Psychiatry, Counseling, and TCM (Direct and Indirect Services); Funding Source: N/A

Agency: Tykes and Teens; Providers: LCSW (1); Registered Interns (LMHC (2) LCSW (1); Masters Level Clinicians (3); ARNP (1); Services Provided: Psychiatry and Counseling (Direct and Indirect Services); Funding Source: N/A

Agency: New Horizons of the Treasure Coast; Providers: LMHC (1), TCM (2), Masters Level Clinicians (2), Psychiatrist (1); ARNP (1); Services Provided: Psychiatry, Counseling, and TCM (Direct and Indirect Services); Funding Source: N/A

Agency: Hospice of Okeechobee; Providers: Masters Level Clinician (1); Services Provided: Grief Counseling (Direct and Indirect Services); Funding Source: N/A

Agency: Hospice of the Treasure Coast; Providers: LCSW (1); Masters Level Clinicians (2); Services Provided: Grief Counseling (Direct and Indirect Services)

Agency: Health Haven; Providers: LMHC (1), LCSW (3), Psychiatrist (1), ARNP (7); Services Provided: Psychiatry and Counseling (Direct and Indirect Services); Funding Source: N/A

Agency: Legacy Behavioral Health; Providers: LMHC (2), TCM (3), Masters Level Clinicians (10), Psychiatrist (7), ARNP (3); Services Provided: Psychiatry, Counseling, and Targeted Case Management (Direct and Indirect Services); Funding Source: N/A

Agency: Drug Abuse and Treatment Association (DATA); Providers: LCSW (1); Bachelor's Level Clinicians (3); Master's Level Clinicians (1); Services Provided: Counseling (Direct Services) and substance abuse education; Funding Source: N/A

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 427,314.00

Unexpended MHAA funds from previous fiscal years

\$ 246,669.00

Grand Total MHAA Funds

\$ 673,983.00

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 **Okeechobee County School District** 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

Monday 7/31/2023