
Table of Contents

Introduction	3
Mental Health Assistance Allocation Plan	3
Section A: MHAA Plan Assurances	3
Section C: District Program Implementation	4
Section D: Direct Employment	11
Section E: MHAA Planned Funds and Expenditures	15
Section F: School District Certification	15

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	Zones of Regulation
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Zones of Regulation is a curriculum designed to foster self-regulation and emotional control. It is an evidenced-based program that integrates best practices around Trauma Informed Care and mental health supports. The curriculum helps develop awareness of feelings, energy and alertness levels while exploring a variety of tools and strategies for regulation, prosocial skills, self-care, and overall wellness. The framework provides an easy way to think and talk about how students feel on the inside and sort these feelings into four colored Zones, all of which are expected in life. Zones of Regulation is based on evidence and has shown positive, measurable outcomes across multiple studies and applications in clinical practice and school-based settings.</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 Zones of Regulation program is being implemented in a variety of ways across all grade levels. Some schools implement Zones as a Tier 1 core-level instruction. Mental Health Liaisons, as well as other school personnel, teach concepts through classroom lessons or morning announcements. Students are taught skills that help them identify feelings and regulate emotions. Pre- and post-program measures, as well as progress-monitoring measures from the Zones of Regulation program will be used to determine if students are benefitting from participation.</p>	
<p>Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.</p>	
<p>Students who are identified as needing extra support in areas related to mental wellness, social and /or emotional functioning, are assessed and provided with MTSS Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</p> <p>Some schools use Zones of Regulation to teach students about emotional regulation and body awareness in individual and small groups. Students are provided opportunities to practice skills and reflect on situations where they used the skills in the classroom or in other situations. District Mental Health Specialists continue to provide training for all the school-based Mental Health Liaisons in the Zones of Regulation curriculum. In addition, the LCS Exceptional Student Education Department also provides Zones of Regulation training to teachers and staff members.</p>	

Evidence-Based Program	Harmony
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Harmony is a life skills learning program for Pre-K through 6th grade students, that is provided to districts in Florida at no cost. Harmony fosters knowledge, skills, and attitudes students need to develop healthy identities, create meaningful relationships, and engage productively by providing learning resources, tools, and strategies for students. Through regular discussion groups and classroom lessons, students learn communication and relationship skills that help with empathy, critical thinking and problem solving. Morning circles give all students a safe opportunity to express themselves and be part of the classroom community.</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>Many Lake County Schools have the Harmony kits and received face to face training from Rick Roach, a local Harmony trainer. In addition, On-Demand training videos allow facilitators to learn and teach at their own pace and successfully implement Harmony into their classroom.</p> <p>Schools are welcome to integrate Harmony materials into regular instruction, or Harmony can be standalone lessons that teach life skills to students, including self-awareness, self management, social awareness, relationship skills, and responsible decision-making. Pre- and post program measures, as well as progress-monitoring measures from the Harmony program, will be used to determine if students are benefitting from participation.</p>	
<p>Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.</p>	
<p>Students who are identified as needing extra support in areas related to mental wellness, social and /or emotional functioning, are assessed and provided with MTSS Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</p> <p>School-based mental health professionals may choose to use Harmony materials in an individual or small group settings to support at-risk students.</p>	

Evidence-Based Program	Behavior Education Program
Tier(s) of Implementation	Tier 2
Describe the key EBP components that will be implemented.	
<p>The Behavior Education Program (BEP) is a school-based program that provides daily support and monitoring for students who are at-risk for developing serious or chronic behavior difficulties. It is based on a daily check-in/check-out system that provides students with immediate feedback on his or her behavior and increased positive adult attention. Behavioral expectations are clearly defined and students are given opportunities for immediate and delayed reinforcement, based on meeting the expectations. The BEP incorporates several core principles of positive behavior support: clearly defined expectations; instruction on appropriate social skills; increased positive reinforcement for following expectations; contingent consequences for problem behavior; opportunities for self-management; increased positive contact with adults at the school; and increased home-school collaboration.</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 at risk for social, emotional, behavioral problems, depression, anxiety disorders, and/or suicidal tendencies, are referred to the school’s Problem Solving Team for identification of specific needs and plans for intervention. Within the MTSS framework, research on the BEP supports its use at Tier 2. The LCS District Behavior Intervention Specialist trains teams of personnel from schools who choose to implement the Behavior Education Program, and offers regular assistance and support as needed to ensure fidelity.</p> <p>Students who are identified as needing extra support beyond this Tier 2 intervention (in areas related to mental wellness, social and /or emotional functioning), are assessed and provided with additional Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</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 chosen to participate in the BEP will have daily expectations and planned reinforcers specified to meet their individual needs. The students who are identified for participation will check-in with the BEP coordinator at the start of each school day, and checkout with the coordinator before leaving school. At check-in, the students are provided with a Daily Progress Report (DPR) that lists the expectations to be followed and a place to rate students' behavior. Teachers rate the students at specified blocks of time throughout the day (e.g., each class period in secondary schools; each subject area block of time in elementary schools, etc.), and provide corrective feedback and/or positive reinforcement. At checkout at the end of the day, the BEP coordinator totals the percentage of points earned to determine whether each student has met their individual goal. If students meet their goal, they receive a reinforcer. Students take their DPR home to show to their parents and obtain a parent signature, and return it the following day at morning check-in.</p>	

Evidence-Based Program	Solution-Focused Counseling
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Solution-Focused Counseling is a strengths-based student-directed counseling approach that focuses on helping students gain insight into their present problem(s) and find ways to move toward their desired goals. Solution Focused Counseling does not involve confrontation; rather it focuses on empathetic problem solving.</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 at risk for social, emotional, behavioral problems, depression, anxiety disorders, and/or suicidal tendencies, are referred for in-school counseling, either for individual work or in groups to learn alongside and practice skills with peers who may have similar mental wellness needs. This counseling approach is dynamic and flexible, allowing mental health professionals to address a wide variety of needs and many levels of severity. In the 2022-2023 school year, all school-based Mental Health Liaisons participated in a year-long book study of "Solution-Focused Counseling: the Missing Manual" (Sabella, 2020), as well as a full day workshop with Dr. Sabella in order to build expertise in utilizing solution-focused counseling.</p>	
<p>Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.</p>	
<p>Students who are identified as needing extra support in areas related to mental wellness, social and /or emotional functioning, are assessed and provided with MTSS Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</p> <p>Solution focused counseling is one evidenced-based practice that will be utilized during direct services with students either in an individual or group setting. Mental health professionals have access to workbooks, counseling tools, and virtual resources to proficiently provide effective intervention.</p>	

Evidence-Based Program	Positive Behavioral Interventions and Supports
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 for improving student behavior through systems change. PBIS is not a solitary program - it is the integration of many effective strategies and programs that create a Multi-Tiered System of Supports (MTSS) for behavior. With an overarching emphasis on using data to determine the effectiveness of its techniques, PBIS reflects the application of explicit values and evidence-based practices to build a MTSS that is practical, durable, and available to all.</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 schools who choose to implement school-wide PBIS will regularly examine their student behavior data. The goal is to reduce the number of office discipline referrals and suspensions. LCS has a district level PBIS Coordinator and a multidisciplinary district-level committee to assist schools with training, coaching, and implementation of all aspects of PBIS. Student, classroom, and school-level data will be monitored to adjust the program, as needed, and to determine whether students are benefitting from participation.</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>Many different counseling and behavioral approaches can be used under the PBIS umbrella including the evidenced-based practices listed in this application. PBIS assists with early identification of students at-risk for poor classroom functioning and provides a proactive (preventative) approach to assist students in building and using resilient behaviors in the face of challenges. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</p>	

Evidence-Based Program	Cognitive Behavioral Practices
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Cognitive Behavioral Therapy (CBT) practices focus on challenging and changing cognitive distortions (e.g., thoughts, beliefs and attitudes) and behaviors, improving emotional regulation and the development of personal coping skills. CBT is a problem-focused therapy. Through CBT techniques, individuals are able to assess their thoughts, feelings, and behaviors to make positive changes to decrease distressful symptoms related to mental and emotional health.</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 are identified as needing extra support in areas related to mental wellness, social and /or emotional functioning, are assessed and provided with MTSS Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery. Evidenced-based practices will be used by both school-based and community providers. Pre- and post-counseling measures will be used to explore progress and/or setbacks.</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>Targeted school-based cognitive behavioral therapy (CBT) programs to reduce depression and anxiety symptoms are delivered to students who are assessed to be at increased risk for these conditions. The programs help students develop strategies to solve problems, regulate emotions, and/or establish helpful patterns of thoughts, feelings, and behavior.</p> <p>Mental health professionals will continue to participate in on-going CBT professional development and use the skills and techniques they learn during direct services with students. Mental health professionals also have access to workbooks, counseling tools, and virtual resources for effective intervention. Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery.</p>	

Evidence-Based Program	Motivational Interviewing Techniques
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>"Motivational Interviewing (MI) is often recommended as an evidence-based approach to behavior change. It is a collaborative, goal-oriented style of communication with particular attention to the language of change. It is designed to strengthen personal motivation for and commitment to a specific goal by eliciting and exploring the person's own reasons for change within an atmosphere of acceptance and compassion" (Miller & Rollnick, 2013, p. 29).</p> <p>The most current version of MI is described as a guiding style of communication that sits between following (good listening) and directive (giving information and advice). MI is designed to empower people to change by drawing out their own meaning, importance and capacity for change. MI is based on a respectful and curious way of being with people that facilitates the natural process of change and honors personal autonomy.</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 are identified as needing extra support in areas related to mental wellness, social and /or emotional functioning, are assessed and provided with MTSS Tier 2 and/or 3 interventions, depending on the severity of the students' needs. Motivational interviewing techniques are utilized by mental health professionals to support student interventions that increase engagement and positive functioning in the classroom and build resiliency for facing challenging situations.</p> <p>Students who are demonstrating needs that are chronic or severe may be referred (only with parental consent) to LifeStream or other Community Mental Health Providers to engage in therapeutic services to support recovery. Evidenced-based practices will be used by both school-based and community providers. Pre- and post-counseling measures will be used to explore progress and/or setbacks.</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>Motivational Interviewing (MI) techniques can be used in an individual or group setting. Mental Health Liaisons took part in a year-long book study in 2021-2022 to expand their knowledge and practice of MI. The Miller & Rollnick (2013) book introduced key concepts and provided therapeutic strategies that could be used with students and families.</p> <p>To ensure districtwide support and implementation, Individual and Group Counseling Protocols have been developed. Student counseling consists of four to twelve, 30-45 minutes sessions. Students who are not making adequate progress will be referred for more intensive therapeutic intervention (only with parent consent).</p>	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

1:410

2023-2024 proposed Ratio by June 30, 2024

1:410

School Social Worker

Current Ratio as of August 1, 2023

1:1,708

2023-2024 proposed Ratio by June 30, 2024

1:1,600

School Psychologist

Current Ratio as of August 1, 2023

1:2,050

2023-2024 proposed Ratio by June 30, 2024

1:1,600

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

1:1,323

2023-2024 proposed Ratio by June 30, 2024

1:911

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.

Lake County Schools is dedicated to meeting the mental health needs of all its students. Since the passing of the Marjory Stoneman Douglas High School Public Safety Act, the district has built a comprehensive program that has dramatically increased access to mental health services for students and their families. Lake County Schools' 2023-2024 updated plan will continue to build upon the foundation that has been established, and seeks to continue to increase access and the quality of mental health services provided to students.

The foundational success of the Lake County Schools' mental health plan rests on a substantial increase in the number of mental health professionals that are now available in our schools. Mental Health professionals include District Mental Health Specialists, Regional Therapists, School-based Mental Health Liaisons, Certified School Counselors, School Psychologists, Social Workers, and School Nurses. This significant increase in personnel was made possible in 2019 when local Lake County residents voted and passed a four-year .75 millage rate increase to fund school safety and mental health. This referendum was approved by the Lake County voters again in November of 2022.

Responding to a need for easily accessible therapeutic services, the district has created three Regional Therapist positions. Students with significant mental health needs and whose families are having difficulty accessing community resources will be referred to one of the three Regional

Therapists.

Based on student needs in the district as determined by the collection of data, specific personnel recruitment efforts will continue or increase in order to continue to reduce the staff-to-student ratios. National recruitment efforts are being done in the field of School Psychology, which is a critical shortage area.

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).

During the course of every school year, all mental health professionals are required to maintain databases that track a variety of indicators that are used to evaluate the quantity and quality of mental health services being provided to students. LCS' data collection measures are comprehensive, and minimally include the following indicators:

- Number of students at high risk for mental health or co-occurring substance abuse disorders who received mental health screenings or assessments;
- Number of students referred to school-based mental health services providers;
- Number of students referred to community-based mental health services providers;
- Number of students who received school-based interventions, services or assistance;
- Number of students who received community-based interventions, services or assistance.

Analysis of the data drives discussion and decisions around personnel needs for the next school year. Two main funding sources are available to support school mental health services: the MHAAP allocation for Lake County and citizen-supported four-year .75 millage rate increase to fund school safety and mental health.

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

The LCS district mental health plan is a comprehensive framework that creates a system of mental health services based on collaboration between district and school-based mental health professionals, school administration and staff, and local mental health providers. Schools are able to offer students and families a wide array of mental health services ranging from awareness and prevention to crisis response. Through this framework school and district-based mental health professionals along with community mental health providers implement a multi-tiered system of mental health supports that include:

- *Services and supports at all tiers of the MTSS framework;
- *Resiliency Education, including Civic and Character Education, and Life Skills Education;
- *School-wide mental wellness activities and lessons;
- *Classroom lessons based on mental wellness;
- *Individual and small group counseling;
- *Individual and group therapy;

Additionally, the professionals involved in implementing LCS' mental health plan will:

- *Collaborate to provide students and families with a continuum of care inside and outside of school;
- *Collaborate with other school-based problem-solving and intervention teams;
- *Provide intervention for students in crisis including those who are experiencing suicidal ideations or who have experienced a traumatic event;
- *Coordinate activities that build mental health awareness with students, parents and the community;
- *Provide professional development opportunities for all Lake County School employees;

*Use program development tools to monitor student progress and program effectiveness.

LCS has partnerships with 15 local community mental health providers who deliver direct therapeutic services to our students, both on the school campus and in families' homes. Additionally, a long-standing contract and partnership with LifeStream Behavioral Center provides for not only individual and group therapeutic services for students, but also for immediate school-level support whenever any student is experiencing a mental health crisis. The Clinical Coordinator and/or the Mobile Response Team from LifeStream work with school teams in attempting to de-escalate mental health crises prior to the implementation of a Baker Act.

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.

LifeStream Behavioral Center - Lake County Schools has a long-standing, collaborative relationship with LifeStream Behavioral Center. On-going contracts are in place for the provision of direct (e.g., individual or group therapy) and Indirect services (e.g., case management) provided on and off campus, professional development trainings, wellness workshops, and a Clinical Coordinator who coordinates crisis and mental health services in collaboration with Lake County Schools' mental health professionals.

Mobile Response Team (MRT) is a 24-hour, 7 day per week service that provides assistance for mental health and substance use crises for children, adolescents and young adults up to age 25 in Lake, Citrus and Sumter Counties. This team provides on-demand crisis intervention services in any setting in which a behavioral health crisis is occurring, including homes, schools and emergency rooms. The team works to divert individuals to the least restrictive service that will assist them in resolving the immediate crisis and provide follow up care, thus resulting in the individual's safety and the safety of the community.

Children's Community Action Team (CAT) through LifeStream Behavioral Center offers parents and caregivers of youth ages 11-21 with serious behavioral health issues a safe and effective alternative to out-of-home placement. The CAT model utilizes a team approach that "wraps around" the family to address their unique challenges with community-based treatment.

Direct therapeutic services provided on and off-campus by:

- Adapt Behavioral Services
- Advanced Psychiatric Solutions
- Arnette House
- Lukas Counseling
- Cornerstone Hospice
- Chrysalis Health
- Enriched Life Counseling and Consulting
- Families First of Florida
- Family Life Counseling
- Kinder Konsulting
- Lake-Sumter Child Advocacy Center
- LifeStream Behavioral Center
- Milestones Counseling
- NeuMind Wellness
- Sowka Psychotherapy and Consultation

Starting in the 2023-2024 school year, LCS will also have a contract with BRAVE (Be Resilient and Voice Emotions). BRAVE is a state-funded project that utilizes a coordinated intake process to expeditiously connect students and families to the most appropriate mental and behavioral health providers. Referrals are addressed within 24-48 hours after it is received and BRAVE personnel address any barriers like transportation to ensure family follow through for appointments. One FL district already working with BRAVE reported an increase in students engaged with mental health services from 35% to 91% in one year! LCS is hoping for similar success in getting services to more students and families.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 2,638,881.00

Unexpended MHAA funds from previous fiscal years

\$ 777,860.00

Grand Total MHAA Funds

\$ 3,416,741.00

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 **Lake 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

0541 - Mascotte CHarter
0261 - Minneola Charter
9027 - Pinecrest Four Corners
9041 - Pinecrest Lakes Academy
9061 - Pinecrest Lakes Middle/High
9039 - Pinecrest Tavares
0631 - Spring Creek Charter
9018 - Alee Academy
9028 - Altoona School
0149 - Round Lake Charter School

School Board Approval Date

Monday 7/24/2023