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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>	Positive Behavior Interventions and Supports (PBIS)
<b>Tier(s) of Implementation</b>	Tier 1
Describe the key EBP components that will be implemented.	
<ul style="list-style-type: none"> <li>• Every school has a PBIS team that meets on a regular basis along with a PBIS coach to ensure the implementation of school wide PBIS. PBIS teams include an administrator, instructional and support staff, students, and parents/guardians.</li> <li>• Quarterly district wide PBIS Coaches professional learning.</li> <li>• Implementation of a monitoring system which allows teams to analyze risk data.</li> <li>• A district PBIS support team provides ongoing professional learning and guidance to school-based teams through collaboration with the University of South Florida (USF)/PBIS project. These plans include specific behavioral interventions at Tier I, II, and III, in alignment with Response to Intervention (Rti). These interventions are tied with resiliency and mental health supports. The data from these interventions is routinely reviewed at School Wide Support Team (SWST) meetings and Children at Risk in Education (CARE) teams.</li> <li>• Student Service Program Managers will work with school-based teams using the Tiered Fidelity Inventory to ensure implementation of PBIS at each Tier.</li> </ul>	
<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>	
<ul style="list-style-type: none"> <li>• Schoolwide PBIS Plans will be presented to the school-based Student Advisory Committees (SACs) and Parent Teacher Organization (PTOs) to ensure family parent awareness and participation.</li> <li>• Quarterly professional learning for school based PBIS coaches.</li> </ul>	
<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>	
<ul style="list-style-type: none"> <li>• This is a tier 1 implementation program- Schools are utilizing resiliency lessons aligned with Resiliency Standards.</li> </ul>	

<b>Evidence-Based Program</b>	Functional Behavioral Assessment (FBA)/Behavior Intervention Plan (BIP): Identifying and measuring individual student problem behaviors, creating hypotheses, and developing behavior intervention plans (based on positive behavior supports and evidence-based practices) to improve positive (desired) behaviors and decrease student problem behaviors.
<b>Tier(s) of Implementation</b>	Tier 3
Describe the key EBP components that will be implemented.	
<p>All district psychologists, behavior specialists and classroom teachers participate in regular development of FBA/BIPs for students who require a more targeted, intensive behavioral support plan during School Wide Support Team (SWST) and Children At-Risk in Education (CARE) school-based meetings. Parents are an integral part in the FBA/BIP team development process. Sarasota County Schools will implement Prevent-Teach-Reinforce (PTR) FBA/BIP practices after receiving professional learning from our FL/PBIS partners.</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>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> </ul>	
<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>	
<ul style="list-style-type: none"> <li>• Fidelity assessments and on-going data collection of target behaviors is conducted to ensure successful behavior plan implementation.</li> </ul>	

<b>Evidence-Based Program</b>	District Behavior Response Teams
<b>Tier(s) of Implementation</b>	Tier 3
Describe the key EBP components that will be implemented.	
<p>Behavior response teams will report to Student Services administrator for weekly PLC meetings, supervision, training and on-site technical assistance and mentoring/support in the buildings. Student Services Admin. will help coordinate communication and prioritize behavior team assignments between ESE and SS departments. Three district behavior teams will support North, Mid and South County schools. Each team will consist of a School Psychologist, Behavior Specialist or Board-Certified Behavior Analyst (BCBA), and a paraprofessional or Registered Behavior Tech (RBT).</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>Behavior Specialists /BCBA will assist schools with classroom support/modeling, classroom observations, writing FBA/BIPs, Safety Plans, analyzing data and interventions, attending MTSS meetings and attending IEP meetings. School Psychologists will assist schools with classroom modeling/support, facilitate wraparound mental health services, modeling/implementing interventions, assists with safety plans, writing FBA/BIPs, attending MTSS meetings and attending IEP meetings. Paraprofessionals/RBTs will assist with behavior data collection, classroom support, monitoring BIP implementation, and safely supporting a student in the Least Restrictive Environment. Based on individual student need, the team will use a variety of evidence-based practices to support students, these interventions include but are not limited to Why Try, Zones of Regulation, and Counseling as a Related Service.</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>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Fidelity assessments and on-going data collection of target behaviors is conducted to ensure successful behavior plan implementation.</li> <li>• School psychologist on each behavior team assists school staff by conducting specialized assessments and advocacy for students/families access to community or school-based mental health partners.</li> </ul>	

<b>Evidence-Based Program</b>	Motivational Interviewing
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Motivational interviewing (MI) is a guiding and student-centered counseling approach used to motivate adolescents to adopt healthy and constructive behaviors consistent with their values and reduce harmful or risky behaviors inconsistent with their values.</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>Behavior specialists, school counselors, school psychologists, and school social workers will participate in Motivational Interviewing professional learning which prepares them to become the school-based facilitators. Through the School Wide Support Team (SWST), students struggling to meet behavior expectations will be identified early. The above-mentioned support team will identify which team member will provide the tier 3 intervention with the student and its frequency and duration.</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>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Increased attendance rates measured by daily attendance rate.</li> <li>• Increased parent participation in the problem-solving process.</li> </ul>	



<b>Evidence-Based Program</b>	Cognitive Behavior Intervention in Schools
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
School based, group and individual intervention is designed to reduce symptoms of PTSD, depression, and behavioral problems and to improve functioning, grades, attendance, peer, and parent/ family support.	
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.	
Coping Cat- a cognitive behavioral intervention for children with anxiety. It incorporates four components: recognizing emotional and physical reactions to anxiety, clarifying thoughts and feelings, developing plans for coping, evaluating performance, and giving self-reinforcement. School psychologists implement this intervention in the high school setting when students are referred through the School Wide Support Team (SWST).	
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.	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Increase in school attendance rates as measured by district attendance tracking reports.</li> </ul>	

<b>Evidence-Based Program</b>	Student Assistance Program (SAP)
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>The SAP is an evidence-based approach based on an employee assistance model that provides school-based prevention and engagement services designed to assist students when dealing with issues that impede academic achievement. Prior to referring a student to a SAP specialist, SCS employees obtain signed parental consent.</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>Sarasota County's SAP Specialists are staff employed by Light Share and are housed at each school. There is regular and frequent collaboration with school based SWSTs. SAP Specialists deliver substance use and mental health prevention and intervention services and connect students to community providers for more intensive services. Using a systems approach, the SAP Specialists use effective practices to resolve these issues.</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>An increase in student emotional well-being and academic success as measured by SAP quarterly reports and student SAP satisfaction surveys.</p>	

<b>Evidence-Based Program</b>	Check-in/Check-out (CICO)
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>An evidence-based intervention that provides a structured process for frequent feedback on school-wide expectations in a daily progress report. This includes a.) increasing prompts to the student for desirable behavior, b.) increasing adult feedback, c.) improving the structure of the student's schedule, and d.) facilitating feedback between students, their teachers, and their parents.</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 PBIS teams will receive ongoing training and technical assistance to develop and maintain a Tier 2 CICO system. Successful implementation includes:</p> <ol style="list-style-type: none"> <li>1. Morning check-in with a CICO Mentor</li> <li>2. Monitoring, Evaluation, and Feedback allowing the teacher to communicate with the CICO mentor and parent on a point card.</li> <li>3. End of day check-out with the CICO mentor</li> <li>4. Parent/family participation</li> </ol>	
<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>The goal is to prevent future problem behavior by checking in with students daily to share clear expectations, feedback, and support and can be implemented by teachers in less than 10 minutes per day.</p>	

<b>Evidence-Based Program</b>	Zones of Regulation
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>The Zones of Regulation is the original framework and curriculum (Kuypers, 2011) that develops awareness of feelings, energy and alertness levels while exploring a variety of tools and strategies for regulation, prosocial skills, self-care, and overall wellness. This curriculum provides us an easy way to think and talk about how we feel on the inside and sort these feelings into four colored Zones, all of which are expected in life. Once we understand our feelings and zones, we can learn to use tools/strategies to manage our different Zones to meet goals like doing schoolwork or other tasks, managing big feelings, and healthy relationships with others. The simple, common language and visual structure of The Zones of Regulation helps make the complex skill of regulation more concrete for learners and those who support them.</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 Counselors, School Psychologists, School Social Workers, and Behavior Specialists will all receive Zones of Regulation training this school year, in partnership with SedNet. All educators providing summer school are trained on Zones and provided materials to aide in expansion of this EBP in Sarasota.</p>	
<p>Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.</p>	
<p>Trained staff will provide this intervention for small groups and individual students. Students identified through SWST team as school sites.</p>	

<b>Evidence-Based Program</b>	Teen Court
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
Teen Court provides school- based prevention and engagement services designed to assist students when dealing with issues that impede academic achievement. Prior to referring a student for Teen Court Services SCS employees obtain signed parental consent.	
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.	
Six teen court client coordinators and one program manager to facilitate referrals will be employed through Teen Court. Each Client Coordinator is assigned to one middle school and the feeder high 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.	
<ul style="list-style-type: none"> <li>* Healthy Digital Practices Group (Social media responsibility-adult facilitator)</li> <li>* Life Skills Group (Goal Setting &amp; Mission defining-adult facilitator)</li> <li>*Peer Circle (Career, Education and Communication groups with an adult facilitators)</li> <li>*Teen Court Sessions (Justice for Youth by Youth court sessions) offered in the evenings 4 times per month.</li> <li>*CAMP X-RAYD (Reality Tour of Consequences/our substance abuse program) with 4 week follow up Substance Abuse Education Group Classes (adult facilitator).</li> <li>*Mental Health Counseling (individual and family). Approximately 100 students (annually) will receive free mental health counseling as indicated in the initial intake assessment with the families. Teen Court has a network of providers that are contracted out to provide shorter waiting periods at a reduced rate for our most at-risk youth.</li> </ul>	

**Direct Employment**

**MHAA Plan Direct Employment**

**School Counselor**

*Current Ratio as of August 1, 2023*

**1:401**

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

**1:401**

**School Social Worker**

*Current Ratio as of August 1, 2023*

**1:1,177**

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

**1:1,177****School Psychologist***Current Ratio as of August 1, 2023***1:1,412***2023-2024 proposed Ratio by June 30, 2024***1:1,412****Other Licensed Mental Health Provider***Current Ratio as of August 1, 2023***1:2,045***2023-2024 proposed Ratio by June 30, 2024***1:2,045****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.**

Sarasota County employs 97 school-based certified school counselors assigned directly to schools based on population and identified unique school needs. All schools have a minimum of one school counselor, with secondary schools having additional counselors depending on grade level, total population and unique school needs. Sarasota County employs 27.6 school psychologists, and 1 contracted school psychologist. Additionally, we are employing two school psychologist Master level interns for the 2023-2024 SY. Each school in the district is assigned a psychologist to serve the schools, based on student population and identified unique school needs. These psychologists are strategically positioned within a "Professional learning Community" to serve schools within a "feeder pattern" and for the promotion of mental and behavioral wellness. Sarasota County employs 20 Social Workers (SW) and 13 Home School Liaisons (HSLs). In addition, one master level SW intern for the 2023-2024 school year. SW are assigned to multiple school sites based on student population and identified unique school needs. Each Title 1 identified school is also supported by an HSL. There are 13 HSLs assigned to title 1 schools throughout the district. School SW and HSLs support mental and behavioral health efforts throughout each tier of intervention and support. Behavior Specialists are also at every school for the 23-24 school year to further support emotional, behavioral, and mental wellbeing. Three district behavioral response teams consisting of a school psychologist, behavior specialist/BCBA and paraprofessional/RBT will be supporting the most intense student behaviors and cases, assisting the school base team with modeling, resources, FBA/BIP development and professional learning opportunities.

- A full-time school psych is assigned to Oak Park our separate day school to ensure the behavioral and cognitive needs of our students most in need of services are met.
- Each traditional high school is assigned a full-time school psychologist to maximize tiered resiliency and mental health
- Decrease elementary counselor ratio from 1:750 to 1:450
- Decrease ratio by adding five additional school social workers to the district team. Social workers will now be assigned two schools allowing the maximization of resiliency and mental health intervention supports.
- Creation of 2 Family Navigator positions at the district level. This person will work directly with district staff families to assist in connecting high risk students to community based supports and services.
- Contracted Mental Health Services include a total of nineteen mental health providers. Fifteen primary mental health providers will be allocated throughout all traditional elementary schools with an

increase in their caseload from 20 clients to 26 clients. A full-time mental health provider will be assigned to Oak Park School and three mental health providers will be supporting all comprehensive high 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).**

All student referrals for screening come from the School Wide Support Team (SWST) recommendation, including parent-based and administrative-based referrals. When a recommendation is made, the first step in this process is to communicate with the parent/guardian of the student. Prior to a referral being made to the on campus mental health provider or an outside agency, the parent/guardian must sign consent on the district Mental Health Consent form. Once consent is signed, the SWST facilitator works with the school based mental health provider to ensure assessment for screening takes place within 15 days of referral; All referral and screening activity are documented in the Public Consulting Group (PCG) data base and threat assessment tool.

School referrals are then shared with our school based mental health therapists for screening and assessment. All services for school-based mental health services are initiated within 15 days of identification and assessment; Activity is recorded in the PCG data base and threat assessment tool system.

All student referrals for screening come from the recommendation of school based SWST, including parent-based referrals and administrative based referrals. When a need for community-based mental health services are determined, the school-based staff making the determination for recommendation to community mental health services is responsible for ensuring initiation of services within 30 days of referral. Documentation is maintained in the SWST notes and maintained by the SWST facilitator.

If the parent/guardian declines the Mental Health Referral they sign the portion of the document which indicates declining of services. Activity is recorded in the PCG database and threat assessment tool system.

Upon initial enrollment and annually thereafter, families are asked to indicate if their student has any mental health concerns/conditions. This information is immediately filtered to our school-based health services providers (school nurses). The school health services provider reaches out to the family to further understand student need. The school health provider makes all necessary referrals to the SWS team. The SWS team determines needs of the student through intentional coordination of services the student's primary healthcare provider and any other mental health providers involved in the student's care. The SWS team regularly reviews and monitors progress of students and adjusts as necessary to ensure maximized support for the student.

**Counselors:**

- Utilize School Counseling Program as an integral component of the academic mission of the school
- Facilitate positive behavior intervention and support
- Weekly Resiliency lessons K-5
- Supports PBIS initiative at the school level
- Progress monitoring

**Psychologists:**

- Evaluate students' learning needs
- Develop individualized plans to support academic, behavioral and social functioning.
- Consults with teachers and other school staff to boost understanding and interpretation of progress

data

- Assists school teams in selecting evidence-based interventions

Social Workers and Home School Liaisons

- Maximization of access to school-based and community-based resources

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

Counselors, Psychologists, Social Workers (SW):

- Deliver prevention, intervention, and post-vention services as part of comprehensive school safety plans
- Promote physical and psychological well-being
- Assist administrators and school resource officers during risk and/or threat scenarios
- Facilitate “next steps” in crisis situations, foster posttraumatic growth after emergencies occur.
- Ensure that schools have appropriate process for referring and reporting students at-risk for or in need of academic, behavioral, or mental health support services
- Foster student success in schools through increased attendance, feelings of acceptance, decreased discipline referrals, increased engagement and academic achievement
- Collaborate with family members and other professionals
- Advocate for the mental health needs of all students
- Classroom observations to support the problem-solving process for students
- Consultation and professional learning for school personnel
- Sharing resources and strategies with students and families
- Counseling as a Related Service for children with IEPs or 504s
- Provide referrals to school and community resources that treat mental health issues
- Provide individual and group-level behavioral, resiliency, and mental health services
- Provide short-term counseling and crisis intervention focused on mental health or situational concerns such as grief or difficult transitions
- Participates on multi-disciplinary teams
- Deliver instruction that proactively enhances awareness of mental health and resiliency;

Counselors:

- Large group guidance
- Conflict resolution
- Attendance
- Check in - Check out Interventions (CICO)
- Progress monitoring
- Facilitates re-entry meeting and the creation and implementation of a safety plan

Psychologists:

- Participate in the design and implementation of behavior intervention curricula
- Supports regular progress monitoring and data reviews
- Participates in functional behavior and academic assessments
- Completes comprehensive psychological evaluations

Social Workers and Home School Liaisons

- Family support provided through case management
- Assist/support student attendance
- Individualized psycho-educational counseling to students
- Home visits
- Completion of social histories and parent rating scales as part of a comprehensive evaluation



Family Navigator

- Support family well-being
- Provide early engagement-early connection to help high-risk families, follow-up to families and support
- Initiate strategies to engage family in services
- Collaborate with local providers to ensure service linkage
- Monitor effective delivery of services
- Maximize appropriate resources available throughout Sarasota County
- Wrap families with intensive supports to maintain children in a safe, supportive environment

Contracted Mental Health Therapists

- Collaborate with family members and other professionals
- Individualized mental health therapy for students
- One on one parent education training/support
- Consultation to teachers and school teams
- Regular progress monitoring and data reviews
- Consultation with staff

Nurse Educators

- Work on the front lines and are familiar with and educated to recognize warning signs
- Adhere to appropriate guidelines regarding confidentiality.
- Promote student success
- Provide behavioral health screening and basic behavioral health skills
- Recognize care coordination
- provide educational programming to teachers, administrators, parents and guardians, and students

**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.**

Light Share : On campus mental health therapy wrap around supports. Coaching and professional learning provided to staff. Oak Park School; Mobile Response Team: The MRT will be utilized to assist students that are in an emergent crisis; Compeer Program: matches children living with a mental illness, with a trained volunteer; Family Life Intervention Program (FLIP):An outreach program designed to improve the lives of at risk students ages 7 to 17 and their families.

Florida Center : On campus mental health therapy wrap around supports. Coaching and professional learning provided to staff. Elementary Schools

Centerstone: The Community Action Treatment (CAT) Team Provide support for students with substance abuse, mental health, and co-occurring disorders.

Chrysalis Health: On campus mental health therapy wrap around supports.

Forty Carrots Family Center: Nurturing healthy children and family development through research-based, relationship-centered education and mental health services.

Girls Inc.: Mentorship, Researched based small group program for girls.

Girls on the Run Greater Tampa Bay: Positive youth development program for girls 3rd- 8th grade.

NAMI : Family Support Groups, Mental Health Therapy Supports, Lean on Me provides the access necessary to bridge mental health wellness and academics

Teen Court: meet the specific needs of at-risk youth and student volunteers (ages 8-18).

Big Brothers, Big Sisters: One-to-one mentoring relationships to children ages 6-18.

Camelot Community Care Inc: Mental Health Therapy

Jewish Family Children’s Services – Challenge to Change (CTC): meet with at-risk students to tackle various issues

Circuit 12: Effectively addresses educational, developmental or other disabilities, job training and employment issues by including all parties who are involved with a child in the dependency case planning process.

Sarasota Housing Authority: empower youth to set and work toward goals that will enable them to break the intergenerational cycle of poverty.

Sarasota YMCA Youth and Family Services: Provides temporary housing and safe care for youth ages 10 to 18 who have run away, are experiencing family conflict or have been locked out of their homes.

Take Stock in Children :combining a volunteer mentor, college readiness and coaching, and a Florida Prepaid Project STARS scholarship.

Bay Area Youth: works with individuals, families, and communities to inspire change, growth, and success.

Circle of Friends:Trauma-focused services to children and families in the home, school or clinic.

United Way: Partners with a number of service providers through 2-1-1 to help people find solutions to a temporary emergency

Brotherhood of Men Mentoring Group: Provides a supportive environment, fostering life-skill enhancement and personal development in young males.

School House Link/Homeless Education: Advocate helping students in transition attend and succeed in school.

Valerie's House: Grief support program for children who have lost a loved one and/or parents and caregivers

Tidewell Hospice: Grief specialists help grieving children and teens

Crisis Text Line: A live, trained Crisis Counselor receives the text and responds, all from a secure online platform.

Faces of Accomplishment: High school counselors, teachers and principals identify low income and at risk students that appear to be struggling for diverse reasons.

## MHAA Planned Funds and Expenditures

### Allocation Funding Summary

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

\$ 2,525,094.00

#### Unexpended MHAA funds from previous fiscal years

\$ 455,724.00

#### Grand Total MHAA Funds

\$ 2,980,818.00

### 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 **Sarasota 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**

0074 - Sarasota Military Academy, High School and Prep Campuses
0081 - Suncoast School for Innovative Studies
0083 - *Sarasota School of Arts and Sciences
0120 - Dreamers Academy
0090 - Island Village Montessori 0103
0103 - Imagine School at North Port
0113 - Sarasota Academy of the Arts
0100 - Sarasota Suncoast Academy
0122 - State College of Florida Collegiate School Venice
0102 - Student Leadership Academy
0106 - Imagine School at Palmer Ranch
0110 - Sky Academy Venice
0117 - Sky Academy Englewood
1501 - College Prep of Wellen Park

**School Board Approval Date**

Monday 7/24/2023