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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 | PATHS-5 Distinct Categories of Life Skills and Wellness |
| Tier(s) of Implementation | Tier 1, Tier 2 |
| Describe the key EBP components that will be implemented. | |
| <p>The k-5 teachers implement the 5 distinct Life Skills & Wellness Lessons (e.g., Self-Awareness, Self-Management, Social Awareness, Relationship Management, and Responsible Decision-Making) at least once per week during their 30 minute recess block on the day of PE Specials. The lessons on Self-Awareness focus on the ability to identify and manage ones own feelings and emotions. Self Management is to assist students with strategies to manage their behavior and impulses and to have and act with integrity. The Social Awareness module it to support students with the development of empathy for others. While Relationship Management focuses on teaching skills to work with and to get along with others. Finally, Responsible Decision Making is guiding students to learn how to problem-solve effectively in order to make good choices both individually and within groups. Each unit is organized around one or more of these domains.</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 K-5 Teachers implement lessons at least once per week during the day that they have PE. They use the additional 30 minute recess time block to conduct these lessons based on the recommended curriculum plan designed by the EBP or lesson deemed appropriate for the students in the class as a whole, small group or individual needs. Counselors may also identify lessons to be conducted for a specific grade level or class based on needs assessment, or to support small group or individual 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>In rigorous clinical studies, the PATHS curriculum has been shown to: reduce reports of teachers reporting of students exhibiting aggressive behaviors by 32%; increased teachers' reports of students exhibiting self-control by 36%; increase students' Resiliency vocabulary by 68%; significantly improve students' ability to tolerate frustrations, plus their ability and willingness to use effective conflict resolution and/or problem solving skills. This EBP has been used for several years and have found the results to be effective based on reduction of behavior incidents, positive school climate, as well as the ability to help students to problem-solve, develop positive self-esteem and positive peer interactions.</p> | |

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| Evidence-Based Program | ReThink Ed |
| Tier(s) of Implementation | Tier 1, Tier 2 |
| Describe the key EBP components that will be implemented. | |
| <p>ReThinkEd's EBP helps instructional and mental health staff to create healthy school climates, promote a greater awareness and understanding of mental health and wellness, and empower educators with training and instructional tools that drive whole school success. The program focuses on the following:</p> <ul style="list-style-type: none"> Awareness of Self & Others Self-Management Social Skills Social Awareness Self-Care Trauma <p>The RethinkEd platform allows our teachers and mental health team members to learn about MTSS concepts, develop academic, behavior, and social emotional learning plans, provide meaningful interventions, and analyze the effectiveness of their entire MTSS process. It allows teachers and mental health members to meet students where they are academically, socially, and emotionally with flexible tiered curriculum offerings.</p> <p>Data collection and progress monitoring tools provide ongoing evaluation to inform continuous improvement. The program allows us to create students' academic, behavior, and social emotional learning plans quickly using the built-in goal bank and suggested interventions with the Intervention Plan Wizard. Utilize the Collaboration, Pre-planning, Intervention, and Curriculum tools ensure plans are effective. The platform allows our staff to view the distribution of students across all 3 tiers for Academics, Behavior, and Social Emotional Learning. Quickly identify students who are or are not making progress to better prioritize district supports. Analyze interventions across the district to determine which interventions lead to the highest rate of student success.</p> <p>Additional BrainPop and Nearpod Video Resources to support Program.</p> <p>RETHINK ED has updated their platform to ensure that it is IN COMPLIANCE with the FLDOE mandates.</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 ReThink Ed program will be implemented K-12 via Life Skills & Wellness block. Teachers under the direction of the mental health team members will be provided program training and lessons in order for them to implement the designated weekly lessons.</p> <p>The school counselors will conduct a needs assessment to all students to see what additional services will be needed to assist students with greater needs and/at risk behaviors.</p> <p>Additionally teachers, staff and/or parents may request additional support for a student or group of students that would require tier 2/3 lessons</p> | |

We will also be utilizing the Student Screener to students whose parents have provided consent to help identify student needs.

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.

Tier 1 students: will take quizzes after each lesson to help determine student mastery of resiliency skills.

Tier 2 students: will be monitored through regular check-ins with the school counselor to determine their progress and continued needs.

Tier 3 students: will have more frequent check-ins and sessions, and may be referred to our in-house SAP therapists or community based mental health partners for additional support services.

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| Evidence-Based Program | Lauren’s Kids Safer, Smarter Kids |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| <p>As an abuse prevention education curriculum designed for Pre-K and elementary-aged children, created by the Lauren’s Kids foundation. Lauren’s Kids is an organization founded and led by Lauren Book, M.S. Ed. She is a child sexual abuse survivor, child advocate and educator who works to prevent child abuse and help survivors heal. The curriculum focuses on teaching children that they have the ability to protect themselves. The activities of this curriculum are designed to help you meet existing educational requirements in the areas of social studies, theatre, visual art, health education, and reading/language arts, while imparting critical safety information.</p> <p>Safer, Smarter Kids includes five to eight, 30-minute age-appropriate lessons regarding personal safety and how to ask for help when a situation makes you uncomfortable. The children then have the opportunity to practice these concepts through in-class activities.</p> <p>The curriculum is available for pre-K/kindergarten, first grade, second grade, third grade, fourth grade, and fifth grade classrooms. Kids also offers a curriculum for children with special needs. The Safer, Smarter Kids curriculum fulfills Erin’s Law child sexual abuse prevention program requirements.</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>This program is being implemented by either the classroom teacher or a member of the mental health team. The implementation of Safer Smarter Kids to bring awareness to children’s personal safety, prevention of sexual abuse and child -trafficking</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>The outcome would be to improve awareness of children’s personal safety and protection. Any information regarding a child’s violation of personal safety would be shared with School Counselors and School Counselors would then refer to the proper community agency (police, Department of Children and Families, social work, etc)</p> | |

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| Evidence-Based Program | Student Assistance Program (SAP) |
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe the key EBP components that will be implemented. | |
| <p>Student Assistance Program (SAP) -offers individual and group therapy services delivered by a team of licensed mental health therapists. Clinicians are trained in and utilize EBTs (i.e., CBT, Solution-Focused Therapy, TF-CBT, Behavioral Therapy, etc.) as well as manualized treatments (e.g., Coping Cat) based on student presenting problems.</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 identified with clinically elevated mental health concerns (based on the BASC-3-BESS screener) are provided with weekly individual or group therapy services. The screener can screen for presentations related to anxiety and depression as well as issues related to self-regulation or other behavioral and emotional issues. Students receiving SAP services are screened for suicidal risk and substance use as well. After obtaining parent consent, an intake is conducted and a tailored treatment plan is created for the student. An evidenced-based therapy approach is then selected and sessions are provided on site, 30 minutes each week. Students will continue to receive therapy services until treatment plan goals/objectives are met and/or the student demonstrates a decline in clinical elevations on the BASC-3-BESS.</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>As noted, students are screened for both suicide and substance use by their clinician. Those students that present with higher risk are provided the appropriate evidenced-based therapy service, such as CBT or TF-CBT, and are monitored regularly via risk assessment and the BASC-BESS screener. In addition, ongoing safety planning is incorporated into the treatment of those students and clinicians work closely with families to link them to additional community resources as needed.</p> <p>The outcomes would be a decline in the BASC-3-BESS scale score from extremely elevated risk (t Score higher than a 70) to below elevated (t score of 60 or lower). Outcomes will also be measured by students demonstrating mastery of measurable treatment objectives (e.g., ability to use coping skills, to reduce intensity of anxiety as measured by a feelings barometer, etc.).</p> | |

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

1:699

2023-2024 proposed Ratio by June 30, 2024

1:699

School Social Worker

Current Ratio as of August 1, 2023

1:699

2023-2024 proposed Ratio by June 30, 2024

1:699

School Psychologist

Current Ratio as of August 1, 2023

1:233

2023-2024 proposed Ratio by June 30, 2024

1:233

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

1:175

2023-2024 proposed Ratio by June 30, 2024

1:140

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.

To reduce staff-to-student ratios and meet student mental health assistance, we currently have one full time school counselor with a Master's Degree in Mental Health. We also have a school social worker who has helped to support our families with connection to community-based providers, as well as one-on-one family and parenting support. We have four(4) members of our Student Assistance Support (SAP) Team 1 licensed psychologist and 3 licensed therapists. Additionally, we have a part-time teacher who helps to support school counselor with small group sessions. Further, we have budgeted (23-24) and have requested to hire an additional Mental Health Professional (in addition to the current SAP 4 Clinicians) to help to manage and arrange for school-based therapy and community based referrals therapy and other services for our K-12 system. We look to continue to expand the SAP program and clinicians. One way we have done this is by entering a practicum training agreement with a local university and now have two doctoral-level clinicians providing therapy services under the supervision of the SAP clinical director.

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).

Strategies to increase the amount of time student services personnel spend providing direct mental health services.

Based on prior school year's data collection, administrators will review and revise student support personnel allocation and assigned roles based on mental health assistance needs.

Administrators collaborate with mental health team members to determine the best allocation of roles to service the student population.

Student support team members collaborate to determine the best use of team resources to support specific individualized student needs.

The City allocated financial resources in the 22-23 School Budget to hire two additional Mental Health

Professionals (Student Assistance Program Coordinator and 3 total School Mental Health Therapist) to help to ensure that students are being properly referred and in receipt of therapy and other support services to help with their Mental Health challenges. We have requested to continue to increase the clinicians within the SAP program to support more students and families.

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

The 4 SAP Licensed Clinicians support our students through direct, school site based small group and individual therapy services based on the identification of elevated need using the BASC-3-BESS Screener, as well as school-based counselor or social worker referrals based on elevated behaviors that raise concern (e.g., SRA, BTA, Trauma, Crisis, etc.). Also, our school counselor works closely with our Social Worker to identify students and families in need of support. These students are referred to the Social Worker to meet with the student and families to determine the best community-based providers to assist with the identified need(s). The Mental Health Team meets at least once per month as part of our concerns meeting to review the students that are being serviced by the counselors, social worker and SAP Clinicians. Updates are recorded and adjustments are made to the intervention plan

Throughout the year we conduct a K-12 Student Needs Assessment Survey through Rethink Ed that identifies students in need. The program has Tier 1, 2 and 3 Lessons which are designed to address student needs.

The school has built in Block one day per week for 40 minutes which requires all students to participate in Rethink Ed or PATHS lessons implemented by the classroom teachers under the direction of the school counselors. Also, teachers enhance the curriculum with additional BrainPop video lessons.

We have been approved to hire an additional SAP Clinician to service our students in 23-24.

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.

FSU BROWARD

Dr. Joanne Nemiroff, School Psychologist, Contracted Service Provider Psychological Testing, Contributing Member of our MTSS/Rtl Team, Other Mental Health Needs as needed
DIRECT SERVICES

Dr. Gary Matloff, School Psychologist, Psychological Testing and FBA Evaluations.
DIRECT SERVICES

Jennilee Abolafia, School Psychologist, Psychological Testing
DIRECT SERVICES

Department of Children & Families, Community Provider, Collaboration with our Social Worker to support our students and families.
INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

City of Pembroke Pines Police Department, SRO and TAT Team Members. The SRO is a member of each school’s Threat Assessment Team and collaborates on all student health and safety concerns. Also, Wellness Checks are conducted by the SRO and/or the TAT Team in cases of students who pose a threat to the school, students, staff or self. City Police Budget- Community Partner
 DIRECT SERVICES

The Institute for Children and Family Health, Community Mental Health Provide. Our School Counselors and/or Social Worker collaborate with this community provider to secure therapy services for students having been identified as being in need.
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

Camelot Community Care, Community Mental Health Provider. Our School Counselors and/or Social Worker collaborate with this community provider to secure therapy services for students having been identified as being in need.

Chrysalis, Community Mental Health Provider. This community provider affords students and families with therapy services after conducting student and family needs assessment.
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

Memorial Health Services, Community Mental Health Provider. Our School Counselors and/or Social Worker collaborate with this community provider to secure therapy services for students having been identified as being in need.
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

Big Brothers, Big Sisters Program, Community Support. Student Mentor Program
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

Active Community Health Center, Community Mental Health Provider. Our School Counselors and/or Social Worker collaborate with this community provider to secure therapy services for students having been identified as being in need.
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

Smith Community Mental Health, Community Mental Health Provider. Our School Counselors and/or Social Worker collaborate with this community provider to secure therapy services for students having been identified as being in need.
 INDIRECT SERVICES REFERRALS BY OUR SCHOOL SOCIAL WORKER OR MENTAL HEALTH TEAM MEMBERS

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP)
 \$ 137,207.00

Unexpended MHAA funds from previous fiscal years
 \$ 0.00

Grand Total MHAA Funds

\$ 137,207.00

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 **Florida State University Schools** School Superintendent and School Board approved the district's Mental Health Assistance Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with the statutory requirements for the mental health assistance allocation in accordance with s. 1006.041(14), F.S.

Note: The charter schools listed below have **Opted Out** of the district's Mental Health Assistance Allocation Plan and are expected to submit their own MHAAP to the District for review.

Charter Schools Opting Out

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|-----------------------------------------------------------------|
| 73-0351 - City of Pembroke Pines Charter Elementary-Broward Lab |
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School Board Approval Date

Wednesday 5/17/2023