



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org



2022-23 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

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Introduction

The purpose of the combined mental health application is to streamline and merge two programs into one application. The Youth Mental Health Awareness Training (YMHAT) Plan and the Mental Health Assistance Allocation (MHAA) Plan are to provide supplemental funding to districts so schools can establish, expand and/or improve mental health care, awareness and training and offer a continuum of services. These allocations are appropriated annually to serve students and families through resources designed to foster quality mental health. This application is separated into two primary sections: Part II includes the YMHAT Plan and Part III includes the MHAA Plan.

Part I. Mental Health Assistance Allocation Plan

In accordance with s. 1011.62, F.S., the MHAA Plan allocation is to assist districts with establishing or expanding school-based mental health care; training educators and other school staff in detecting and responding to mental health issues; and connecting children, youth and families who may experience behavioral health issues with appropriate services.

Submission Process and Deadline

The application must be submitted to the Florida Department of Education (FDOE) by August 1, 2022.

There are two submission options for charter schools (MHAA Plan Only):

- Option 1: District submission includes charter schools in their application.
- Option 2: Charter school(s) submit a separate application from the district.

Part I: Mental Health Assistance Allocation Plan

s. 1011.62, F.S.

MHAA Plan Assurances

The Charter School Assurances

One hundred percent of the state funded proportionate share is used to 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

Maximizing the use of other sources of funding 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

Includes a system 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 providers; the number of students referred to community-based mental health services providers; the number of students who received school-based interventions, services or assistance; and the number of students who received community-based interventions, services or assistance.

Yes

A Charter school board policy or procedures 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-40010, Florida Administrative Code.

Yes

Assisting a mental health services provider or a behavioral health provider as described in s. 1011.62, 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 in s. 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 in s. 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, or 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

Planned Outcomes

Identify two specific and measurable goals that will be accomplished within the 2022-23 school year, and specify which component of Charter Assurance 1.a. directs that goal (refer to the Guidance Tab if needed).

All students who require mental health services will receive school based mental health services from school based licensed mental health care counselors within 15 days and depending on the individual student issues will be referred to a community based mental health services which are initiated within 30 days.

All students will receive instruction in Social and Emotional Learning through the school's Choose Love program which will address issues of mental health and wellness.

Charter Program Implementation

Evidence-Based Program	Choose Love
Tiers of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
At the Tier One Level, the Social and Emotional Learning curriculum "Choose Love", which was founded by the Sandy Hook promise, provides lesson plans and activities that will be taught to all students on social and emotional growth, wellness and ways to assist in better peer relationships.	
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.	
After Tier One strategies are taught to all students, our school will implement tier 2 interventions to those students who require additional supports through our licensed school mental health counselors who will work with students individually or in small groups. Issues covered will be goal oriented counseling sessions dealing with issues pertaining but not limited to academic failure, bullying, child abuse, attendance problems, family issues, substance abuse, suicide prevention and intervention, behavior problems and other peer problems. Tier Three interventions will include community based counseling services to students and their families through the schools partnership with Barry University and its "Barry Care Center" where students will be able to meet with health care workers to receive more intensive and individualized assistance.	
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.	
Assisting students with evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services will occur through a systematic process of psycho-education, cognitive behavior therapy and techniques and creating a narrative of the issue with the child and caregiver to process individually and together. Our school will provide a continuum of care that integrates the school with family and the community. Through prevention and wellness promotion, universal screening for academic and behavioral barriers to learning, implementing evidence-based interventions that increase in intensity as needed, monitoring the ongoing progress of students in response to implement interventions, and engaging in systematic decision making about programming and services needed for students based upon specific student outcome. Through this process, one will be able to provide biofeedback that will address issues such as anxious or avoidant behaviors, depressive or withdrawn behavior, and self-awareness issues.	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022

600 students to 1 Mental Health Counselor

2022-2023 proposed Ratio by June 30, 2023

264 students to 1 Middle School Mental Health Counselor, and 336 to 1 High School Mental Health Counselor

School Social Worker

Current Ratio as of August 1, 2022

2022-2023 proposed Ratio by June 30, 2023

School Psychologist

Current Ratio as of August 1, 2022

2022-2023 proposed Ratio by June 30, 2023

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022

2022-2023 proposed Ratio by June 30, 2023

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.

Last year, our school was fortunate to have one licensed mental health counselor who was able to address the many issues relating to mental health. During the 2022-23 school year, our school will employ two licensed mental-health school counselors who will be able to meet and provide greater mental health services to students when the need arises. They will collaborate with one another to create programs to address issues that are pervasive in small or large group settings.

Describe your school's established policies and procedures to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).

Our school relies on our Mental Health Assessment Team to review as frequently as possible or at minimum on a monthly basis the needs of the students referred for mental health services. During our meetings, we determine appropriate services and supports for each student and the frequency with which the student will be required to meet with the mental health counselor or whether the student is required to participate in the community-based partner.

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

Upon a teacher completing a mental health form for a student, the counselor will review the form and take appropriate measures to communicate with the student for an assessment. A counselor will initiate a screening tool from SAMHSA-HRSA Center for Integrated Health Solutions based on the information in the referral. These screening tools should provide an avenue for diagnosis and interventions. Determination of in-school counseling or referral to our community-based partner, the Barry Care Center or other agencies will be provided as outlined in Form 6334H Parent Resources.

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.

Barry University - the Barry CARE Center

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP)

\$ 26,955.00

Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan

\$ 12,345.00

Grand Total MHAA Funds

\$ 39,300.00

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.) 1011.62 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:

13-6040_MHAA_Planned_Expenditures_Rept_2022-2023_.pdf
<i>Doctors Charter School of Miami Shores - Dade Co 22-23 Funds</i>
Document Link

Charter Governing Board Approval

This application certifies that the **Miami-Dade County Public Schools** governing board has approved the 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 section 1011.62(14), F.S.

Governing Board Approval date

Monday 7/18/2022