



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 mentalhealth. 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).

Charter Assurable 1.a. states: "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".

GOAL 1: Miami Arts Charter School shall increase student access to quality school-based mental health support by expanding available mental health specialists. The school will improve the ratio of access to a mental health specialist from 1:50 to 1:25.

GOAL 2: By the end of the 2022-2023 academic year (June 8th, 2023), Miami Arts Charter School shall have 100% of all staff trained in 'Youth Mental Health First Aid" in order to better identify students in need of mental health services, support and to properly connect families with appropriate behavioral health services.

Charter Program Implementation

Evidence-Based Program	Positive Behavioral Interventions and Supports (PBIS)
Tiers of Implementation	Tier 1, Tier 2
•	onents that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.
for students' needs in order to in	ns and Supports (PBIS) a framework involving multi-tiered levels of support mprove outcomes across the entire school. PBIS involves integrating data, ect school climate including factors like bullying, drug and alcohol use, and
the early identification of social the likelihood of at-risk studen	mplement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as its developing social, emotional, behavioral problems, depression, anxiety es, and how these will assist students dealing with trauma and violence.
	le pieces of data about students every day. Within the PBIS framework, ct, monitor and evaluate outcomes, practices, and systems across all three
intervention, treatment, and red	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring be diagnoses and to students at high risk of such diagnoses.
and systems establish a founda Schools provide these universa support students who are at risk start. These supports help stude	entation of the evidence-based plan across all three tiers. Tier 1 practices ation of regular, proactive support while preventing unwanted behaviors. Il supports to all students, school-wide. Tier 2 practices and systems k for developing more serious problem behaviors before those behaviors ents develop the skills they need to benefit from core programs at the ive more intensive, individualized support to improve their behavioral and

Evidence-Based Program	Youth Mental Health First Aid
Tiers of Implementation	Tier 1, Tier 2
Describe the key EBP compo	programs, services, policies and strategies.
school staff, peers, neighbors, l an adolescent (age 12-18) who Youth Mental Health First Aid is The course introduces commor development, and teaches a 5- situations. Topics covered inclu	Aid is designed to teach parents, family members, caregivers, teachers, health and human services workers, and other caring citizens how to help is experiencing a mental health or addictions challenge or is in crisis. Is primarily designed for adults who regularly interact with young people. In mental health challenges for youth, reviews typical adolescent step action plan for how to help young people in both crisis and non-crisis ide anxiety, depression, substance use, disorders in which psychosis may rders (including AD/HD), and eating disorders.
the early identification of soci the likelihood of at-risk studer	mplement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as its developing social, emotional, behavioral problems, depression, anxiety es, and how these will assist students dealing with trauma and violence.
• •	tal Health First Aid Training teachers and staff will be able to identify Ith services, support and to properly connect families with appropriate
intervention, treatment, and re-	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring se diagnoses and to students at high risk of such diagnoses.
regular student behavior monitor effectiveness and general outco	school's services within the MTSS will be able to be deliver effective bring, mentoring opportunities and analysis activities focusing on program ome data. Services shall include, but not be limited to, development or vention Plan (BIP), Individualized Education Program (IEP), Section 504 cies.
Evidence-Based Program	
Tiers of Implementation	[none selected]
Describe the key EBP compo	programs, services, policies and strategies.
the early identification of soci the likelihood of at-risk studer	mplement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as its developing social, emotional, behavioral problems, depression, anxiety es, and how these will assist students dealing with trauma and violence.
Explain how the supports	will deliver evidence-based mental health care assessment, diagnosis,

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.

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022 **1:50**

2022-2023 proposed Ratio by June 30, 2023 1:25

School Social Worker

Current Ratio as of August 1, 2022 **0**

2022-2023 proposed Ratio by June 30, 2023 **0**

School Psychologist

Current Ratio as of August 1, 2022 **0**

2022-2023 proposed Ratio by June 30, 2023 **0**

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022 **0** 2022-2023 proposed Ratio by June 30, 2023

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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.

By having direct employment of school-based mental health services providers (school psychologists, school social workers, school counselors and other licensed mental health professionals) we will reduce staff-to-student ratios. As a result of reducing staff-to-student ratios we hope to see a reduction in problem behaviors, improvements in students' emotional well-being, testing scores, attendance, and GPA. Furthermore, teachers and staff will feel more supported and competent.

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).

Teacher/Staff report to student services personnel to ensure that student behavior and academic drops are addressed regularly. All staff shall submit students to the Pupil Monitoring Plans (PMP) list for academic or behavioral assessment when evidence of possible social, behavioral or substance abuse disorders may arise. All school-based counseling and related support services provided at the school shall be documented using Form 3673 (Student Case Management Student Services Form).

Students/parents are also oriented to seek student services personnel about concerns related to academics, emotional, and behavioral functioning.

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

The school shall adopt the Miami-Dade County Public Schools IDEA Parent Resources list (Form 6334) in order to select evidence-based outside agencies and service providers that can be recommended to parents and caretakers. Staff training shall take place regarding the diversity of services available with emphasis placed on community and parent education regarding available resources and treatment services for parents to consider. Counselors shall meet with parents to recommend pediatric services, positive behavior supports, assessment techniques and to generally ensure primary caretaker involvement takes place

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.

District Contracted mental health services The Stepping Stones Group

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP) \$ 43,430.00

Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan \$ 0.00

Grand Total MHAA Funds

\$ 43,430.00

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 Statues.

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:

MHAA-2022.pdf MHAA planned Funds and Expenditures Form-7059 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 7/25/2022