



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org



2022-23 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

Table of Contents

Introduction	3
Part I. Mental Health Assistance Allocation Plan	4
Section A: MHAA Plan Assurances	4
Section B: Planned Outcomes	5
Section C: Charter Program Implementation	5
Section D: Direct Employment	10
Section E: MHAA Planned Funds and Expenditures	11
Section F: Charter Governing Board Approval	12

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).

Improve the identification of risk factors that impede social and emotional well-being.

Improve on providing resources to students and families after recognizing potential risks for mental health conditions.

Charter Program Implementation

Evidence-Based Program	Youth Mental Health First Aid Training
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.	
The Youth Mental Health First Aid Training allows you to recognize risk factors and red flags.	
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.	
<p>Once you have identified risk factor/red flags you then do the following:</p> <ol style="list-style-type: none"> 1. Perform a suicide risk assessment (SRA) or behavioral threat assessment (BT) 2. Then you notify the proper community resources (i.e. law enforcement, community mental health centers, local crisis agencies, etc. 	
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.	
The school will be in total communication with outside agencies once consents have been received. We have ongoing discussion with these outside agencies. We have invited them to come to school to observe the student and met with the outside therapists. The school follows up to ensure the student is attending the therapy schedule. If the student is not the school schedules follow up meetings with the family.	

Evidence-Based Program	Leader In Me
Tiers of Implementation	
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
Leader In Me is an evidence-based, comprehensive model that builds leadership and life skills in students, creates a high-trust school culture, and lays the foundation for sustained academic achievement.	
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.	
Leader In Me is taught throughout every grade level to include the paradigms of change and the seven habits of highly effective students. LIM is based on a theory of change known as the See-Do-Get cycle. When you change the way you see things, it influences what you do and the results you get. The goal is to teach students to be leaders and be able to self identify risk factors.	
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.	
Immediate teacher, parent, and student input on immediate concerns. LIM empowers everyone to be a leader and will allow students to self identify if they feel at risk or are struggling.	

Evidence-Based Program	School Wide Positive Behavioral Interventions and Supports
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.	
PBIS is an evidence-based three-tiered framework to improve and integrate all of the data, systems, and practices affecting student outcomes every day. PBIS creates schools where all students succeed.	
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.	
PBIS is a framework for creating safe, positive, equitable schools, where every student can feel valued, connected to the school community and supported by caring adults. By implementing evidence-based practices within a PBIS framework, schools support their students' academic, social, emotional, and behavioral success, engage with families to create locally-meaningful and culturally-relevant outcomes, and use data to make informed decisions that improve the way things work for everyone. PBIS improves student outcomes, reduces disciplinary issues, and improves teacher outcomes.	
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.	
The school will be able to use data-based decision making and allow the school to identify co-occurring risk factors. The school can then refer the student to outside agencies.	

Evidence-Based Program	Conscious Discipline
Tiers of Implementation	
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
Conscious Discipline believes that trauma-responsive social and emotional learning is a lens through which transformational change in the areas of mental health and behavior.	
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.	
All staff and teachers are made aware of the students' that have been identified as having past trauma or risk factors that put them at higher risk for behavioral issues, such as ESE, EBD, SBD students. Conscious discipline provides an array of behavior management strategies and classroom structures that teachers can use to turn everyday situations into learning opportunities.	
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.	
Then allows you to make the appropriate in house referral. Then allows you to make the appropriate assessment(s) as needed. Then you make appropriate community based referrals.	

Evidence-Based Program	Cloud 9 - tentative
Tiers of Implementation	
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
Cloud9 World is SEL-mental health awareness program to support teachers, students and families. Cloud 9 World utilizes character strengths to empower children and teens to adopt character strengths and embrace mental wellness.	
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.	
Cloud 9 World provides virtual lessons in a sequence from K-12 Cloud 9 is proven to increase student achievement in literacy, increased understanding and application of introduced character strengths, decreased behavior incidents, improve school climate, and increase parent engagement activities through reading books at home.	
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.	
Then allows you to make the appropriate in house referral. Then allows you to make the appropriate assessment(s) as needed. Then you make appropriate community based referrals.	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022

1054:1

2022-2023 proposed Ratio by June 30, 2023

1054:1

School Social Worker

Current Ratio as of August 1, 2022

1054:1

2022-2023 proposed Ratio by June 30, 2023

1054:

School Psychologist

Current Ratio as of August 1, 2022

1054:0

2022-2023 proposed Ratio by June 30, 2023

1054:0

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022

1054:0

2022-2023 proposed Ratio by June 30, 2023

1054:0

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.

During the 21-22 school we employed one social worker for the school, for the upcoming school year we have added one school counselor.

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).

The addition of the school counselor will allow students to be seen more frequently or for longer periods of time.

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 utilizes the school district's electronic database, BASIS, which includes at-risk indicators that guide school teams. Referrals for counseling can be made to the district's Family Counseling Program; more in-depth referrals are made to behavioral health partners and mobile response teams.

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.

The school does not have contracts with any local behavioral health providers. Although we work closely with our local community agencies. When referrals are made they are accept and students are given an appointment when available.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 38,508.00

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

\$ 0.00

Grand Total MHAA Funds

\$ 38,508.00

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:

5015_MHAA_Planned_Expenditures_Report_2022-2023.pdf
<i>MHAA Planned Expenditures Form</i>
Document Link

Charter Governing Board Approval

This application certifies that the **Broward 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

Wednesday 7/27/2022