



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).

Goal 1: At Galileo, 100% of students will receive their tier 1 social/emotional support within the classroom.

Goal 2: 100% of students identified as benefiting from tier 2 social emotional support will be screened for additional Mental Health services.

Goal 3: Galileo will provide 100% of all tier 2 students with CBT counseling.

Charter Program Implementation

Evidence-Based Program	Conscious Discipline Curriculum
Tiers of Implementation	Tier 1

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

This proactive social emotional curriculum provides children with the practical skills needed to manage their thoughts, feelings, and actions. Used correctly, it provides children the ability to self-regulate and use problem-solving skills to solve social and internal conflicts. All teachers and staff are trained in facilitating this curriculum and use the program premises as a part of their class meetings when discussing conflicts and issues. Annual training with teachers and staff occurs to ensure successful schoolwide implementation. This will assist us with successfully acheiving our first goal.

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 receive training in the implementation of CD and how to support a students social/emotional learning. Training begins during pre-plan and continues throughout the year in PLC meetings and professional development.

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.

Conscious Discipline is an evidence based curriculum that supports social emotional learning and teaches needed skills to help a student be successful. Conscious Discipline focuses on building connections and safety to help students be able to report triggers with trusted adult. The trusted adult could make a referral to the mental health counselor if it is needed based on student report.

Evidence-Based Program	Psychoeducation/social skill group service using CBT mode
Tiers of Implementation	Tier 2

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

Galileo will assess for student needs to determine types of group services needed for students. This is in connection with Goal 2. The CBT model is used to support social skills by allowing students to role-play and practice communication, challenging thoughts, and providing problem-solving training to group participants.

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.

Once students are assessed or referred for group services, Galileo will schedule weekly group counseling to support student needs. Galileo will utilize Zones of Regulation and SuperFlex to support 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.

Mental Health counselor will assess student needs and determine appropriate tiered support. Tiered two intervention utilizes Zones of Regulation curriculum and SuperFlex in small groups. Students are monitored during small groups sessions to determine if additional supports are needed.

Evidence-Based Program	In connection with goal 3, we will utilize Psychotherapy services using family systems and CBT during individual counseling sessions
Tiers of Implementation	Tier 3

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

CBT therapy is a form of psychological treatment that has been demonstrated to be effective for a range of counseling needs. These needs include but are not limited to the following; learning to recognize one's distortions, gaining a better understanding of behavior and motivation, using problem-solving skills, learning to develop greater sense of confidence, facing fears instead of avoiding them, using role playing to prepare for potentially problematic interactions with others, learning calm one's mind and relax the body.

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.

Galileo MH counselors will assess all students referred and determine if tier 3 individual counseling services are needed. MH counselors will set up and provide individual counseling services.

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.

Mental health counselor uses assessments such as GAD-7 and PHQ-9 to screen student and determine level of impairment. Counselor provides individual therapy and creates an individualized treatment plan that monitors progress towards treatment goals in sessions.

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022

na

2022-2023 proposed Ratio by June 30, 2023

590:1

School Social Worker

Current Ratio as of August 1, 2022

na

2022-2023 proposed Ratio by June 30, 2023

na

School Psychologist

Current Ratio as of August 1, 2022

590:1

2022-2023 proposed Ratio by June 30, 2023

590:1

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022

590:1

2022-2023 proposed Ratio by June 30, 2023

590:1

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.

Our ratios will allow for us to make direct contact with any student who needs to be screened for MH services and be able to provide needed services to that student or group of students.

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).

Direct services to students and 20% of allotted work hours on administrative tasks. Galileo School Psychologists provide direct services to all classrooms to provide guidance lessons as well as providing group counseling and individual testing for students.

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

Galileo MH counselors will connect with community-partners to help bridge the gap between school and private counseling when it is needed to support a student.

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.

NA

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP) \$ 27,065.00

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

Grand Total MHAA Funds

\$ 27,065.00

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_Planned_Expenditures_Report_2022-2023_Galileo_Riverbend_2022-2023_.pdf

MHAA Planned Expenditure report for Galileo Riverbend.

Document Link

Charter Governing Board Approval

This application certifies that the **Seminole 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

Thursday 7/21/2022