



## 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).**

Survey data will inform the delivery of small group interventions delivered through our comprehensive counseling program. Specific topics identified by the survey will be addressed by the counselor(s), SRO, and licensed mental health worker quarterly. Additionally, survey data will inform the effectiveness of solution focused counseling services delivered and allow for modification as needed.

Additionally, the academic success and social emotional growth of students enrolled in the Personal, Career and School Development I class using the "Why Try" curriculum will be monitored. Eligibility and progress will be measured by increased GPA and improved attendance as well as a reduction in the number of students needing daily interventions.

## Charter Program Implementation

<b>Evidence-Based Program</b>	Comprehensive Guidance and Counseling Program
<b>Tiers of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
<p>Four school counselors dedicated to provide focused services respectively to enrolled 9th &amp; 10th grade students, and 11th &amp; 12 grade students. Their collaborative efforts align with the school's mission to support the academic achievement of all students.</p> <p>A School Resource Officer (SRO) who is available to all students, parents, faculty, and staff.</p> <p>Contract with licensed mental health provider which includes 24 hour/7 days a week intervention opportunities as well as pre-scheduled office hours at the school each week.</p>	
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>The use of a mental health climate survey will periodically capture school wide trends related to stress, mental health, and resiliency / coping measures. The survey is given to all enrolled students on a quarterly basis and the results are used for two action steps:</p> <p>First, the General Mental Health Inventory survey will inform topics for small group and school wide discussion. At least once a month a school counselor, the SRO, or other staff member will directly address themes or issues raised by survey data.</p> <p>Second, the survey will include the opportunity for students to ask for more Solution-Focused Counseling from either the counselor, the SRO, or contracted mental health counselor. Students involved in these more targeted interventions will have the opportunity to provide feedback via SFC Exit survey to inform the provider on the effectiveness of the provided service.</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>Quarterly, the top 2 or 3 issues identified by the survey will be addressed through small group and/or push in types of services.</p> <p>Quarterly, the survey results will be analyzed with the target of 50% of students reporting decreased levels of stress, mental health challenges, and /or increased coping strategies. By addressing group topics systematically an additional goal is a 10% reduction in the number of students requesting individual follow ups.</p> <p>For students involved in Solution –Focused Counseling, the SFC Exit survey will be given once per 5 weeks to inform the provider of issues that are resolving and/or issues that need further attention. 10% increase of positive responses will be the criteria for determining effectiveness of these services.</p>	

<b>Evidence-Based Program</b>	The Personal, Career and School Development I
<b>Tiers of Implementation</b>	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.	
<p>After 95% of the staff was trained in Mental First Aid, a need was identified to support students with one or more identified mental health risk factors during the school day. The Personal, Career and School Development I class has been created to support identified students. This year-long course will be based on the Why Try? Curriculum and provide interventions for identified students; opportunities to experience success in school; and improve attitudes toward learning, self, school and community. Criteria used for student selection is the presence of at least 2 or more of the following academic barriers and other at-risk factors exhibited within any given 2 week period.</p> <ul style="list-style-type: none"> <li>• Locus of control</li> <li>• Ability to set and achieve goals</li> <li>• Classroom engagement</li> </ul>	
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>This teacher-led course will utilize collaboration in a variety of ways among teachers, students, parents, and counselors. These will include tutoring of students, mentoring opportunities and development of positive attitudes, coaching in individual responsibility, goals, career planning, decision making, and the use of expressive arts to release stress. Students enrolled in this course have demonstrated one or more mental health risk factors and were identified by teacher referrals. Currently 22 of 105 sophomore students have been identified as needing this proactive class. By addressing mental health issues identified through</p> <p>Why Try? (an evidence-based social and emotional learning program) two primary indicators of student success will improve</p> <ol style="list-style-type: none"> <li>1. student attendance</li> <li>2. overall GPA</li> </ol>	
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>Outcome Goals:</p> <p>By the end of the year, it is expected that the following empirical measures of success are evident and at least 25% of the originally qualified students no longer need help with attendance or GPA.</p> <p>Enrolled students will show a 50% decreased frequency of established risk factors. This evidence is collected through staff antidotal communication to the Why Try? course instructor. The and will lead to better academic performance as defined below:</p> <ul style="list-style-type: none"> <li>- 90% increase in attendance, 10% measured bi-weekly</li> </ul>	

- GPA increase as follows: student below 3.0 will achieve 3.0 by end of 1st semester. Students who already have 3.0 will increase GPA by 10% by the end of 1st semester

<b>Evidence-Based Program</b>	
<b>Tiers of Implementation</b>	[none selected]
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
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.	
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*

**1:200**

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

**1:100**

#### School Social Worker

*Current Ratio as of August 1, 2022*

**1:400**

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

**1:400**

#### 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*

**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.**

By providing dedicated counselors for each grade level, the ratio is very favorable for personal interaction. Instructional staff can interact with the counselor daily as can students. Open door policies allow for instant access in crises.

**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).**

Annually the number of students served along with the nature of their needs is analyzed and summarized. This process provides support for the current staffing model, for planning school wide initiatives, as well as for targeted interventions.

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

By contracting with mental health providers, staff and students have access to 24/7 care. This is necessary as the increased awareness of mental health challenges increases the likelihood that situations develop after hours. The opportunity to offer the services of a licensed mental health professional is invaluable when meeting with families and/or students in crises. It also provides a layer of support for proactive care.

## 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.**

Synergy Private Direct Counseling / Mental Health Crisis management  
Designated personnel Ariel G., certified staff MA, LMHC, CBHCMS  
On call personnel As needed Direct 24/7 mental health crisis management, suicide intervention

## MHAA Planned Funds and Expenditures

### Allocation Funding Summary

**MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP)**  
\$ 17,544.00

**Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan**  
\$ 16,435.00

**Grand Total MHAA Funds**  
\$ 33,979.00

**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:

MHAA_Planned_Expenditures_Report_2022-2023_36-4155.pdf
<i>FSWC - Lee 36-4155 MHAA Budget</i>
<a href="#">Document Link</a>

**Charter Governing Board Approval**

This application certifies that the **The School District of Lee County** 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 6/29/2022