



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).

All school staff will be trained on how to identify the early signs of student distress, along with how to effectively follow school processes for mental health support for struggling students. Students and families will be provided with ongoing mental health resources and receive communications and guidance on school processes for requesting support for mental health. Referrals for mental health services can be made by staff, parents, and students (self referral).

Charter Program Implementation

Evidence-Based Program	Positive Behavioral Interventions and Supports (PBIS)
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.	
Positive Behavioral Interventions and Supports (PBIS) is utilized at Florida Connections Academy as a framework to support student academic success. The three tiered program provides opportunities to support student's social and emotional learning, identify students at risk for developing habits and or behaviors that may impeded their success, and adding the supports needed to assist them based on individual needs.	
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>At the Tier 1 level, school data teams regularly and consistently review various data points in relation to student achievement and behavior, as well as parent satisfaction survey results. School counselors utilize social emotional needs assessments completed by staff and families to drive supportive instruction. They then provide school wide live lessons to support social emotional learning, character building, and school success skills. Elementary programs utilize a house system for character building and recognition, as well as Student of the Month. All programs utilize STARmail and positive phone contacts, as well as opportunities to build classroom community through optional live lessons.</p> <p>Tier 2 implementation includes Tier 1 strategies with an additional layer of support for targeted groups of students based on the disaggregation of school wide data, results of surveys and needs assessments, and referrals by staff, parents, and self. These supports include small group counseling for targeted skills strategies to be determined by the school utilizing referral data. These small group sessions are provided virtually in a synchronous live lesson classroom with direct instruction and skill practice. Additionally, assigned counselor check-in on a prescribed schedule to discuss academic/behavioral progress, set individual goals, teach school success skills and strategies as well as monitor mental wellness. Finally, various student engagement strategies and opportunities are offered through our Student Success Administrators.</p> <p>Tier 3 implementation includes both tier 1 and 2 strategies with a more individualized layer of student support including functional behavior assessment, risk/threat assessments, attendance plans. Additionally, students receive individual sessions with their assigned school counselor and/or mental health provider for ongoing mental wellness. When students' needs require services outside of the scope provided by the school, they receive referrals to community based resources based on their geographic location.</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.	
Tier 1 supports are measured and tracked in individual student data views (similar to a private electronic student file). Analysis are conducted which include our school improvement plan data, data team tracking documents, needs assessments results, as well as student and parent satisfaction surveys.	

Tier 2 supports are measured by ongoing progress monitoring through attendance tracking, private Issue Aware tickets, student logs, student gradebook data, student progress report details, and data collected regularly within the tier 1 supports.

Tier 3 supports are measured by functional behavior assessment documents and data, district MTSS documents, analysis of overall progress documented in private Issue Aware tickets, as well as student logs, gradebooks, and progress reports.

Evidence-Based Program	
Tiers of Implementation	[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
325/1

2022-2023 proposed Ratio by June 30, 2023
325/1

School Social Worker

Current Ratio as of August 1, 2022
N/A

2022-2023 proposed Ratio by June 30, 2023
N/A

School Psychologist

Current Ratio as of August 1, 2022
N/A

2022-2023 proposed Ratio by June 30, 2023
N/A

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022

Contracted based on need

2022-2023 proposed Ratio by June 30, 2023

Contracted based on need

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.

School counselors and advisory teachers are employed to support student overall success. They work collaboratively with teachers to identify and provide additional layers of support to students in need. Last school year, we added a new role, escalation specialist, to provide a first line of defence support to families identified as being in "escalation" which is based on low attendance, insufficient contacts, low participation, or low performance.

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).

School counselors have dedicated increased time spent providing direct services to students based on our current school population's needs. As the team has grown, we have moved to grade level band teams to increase expertise and dedicated relationships with the students served.

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

School counselors and contracted mental health partners are providing small group and one-to-one counseling for students who display early warning signs of distress, academic struggles and possible challenges with mental health in an effort to improve mental wellness. Families are referred to community-based resources in their geographic area based on need and availability.

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.

Florida Connections Academy is a statewide virtual school servicing students in grades K-12 across the state. Our Counseling Team maintains a list of public organizations and resources by district so we may provide suggested local supports for students and families who may benefit from these agencies.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 0.00

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

\$ 0.00

Grand Total MHAA Funds

\$ 0.00

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:

No files were uploaded

Charter Governing Board Approval

This application certifies that the **Hillsborough 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 5/25/2022